

NCQA Corrections, Clarifications and Policy Changes to the 2008 Physician Practice Connections®-Patient-Centered Medical Home™ Standards and Guidelines
Updated 9/15/2011

This document includes the corrections, clarifications and policy changes to the 2008 Physician Practice Connections®-Patient-Centered Medical Home™ Standards and Guidelines. NCQA has identified the appropriate page number in the printed publication and the standard and head/subhead for each update. NCQA operational definitions for correction, clarification and policy changes are as follows:

- A **correction (CO)** is a change made to rectify an error in the *Standards and Guidelines*.
- A **clarification (CL)** is additional information to explain an existing requirement.
- A **policy change (PC)** is a notification of a revised requirement.

An organization undergoing a survey under the 2008 Physician Practice Connections®-Patient-Centered Medical Home™ Standards and Guidelines must implement corrections and policy changes within 90 calendar days of the release date, unless otherwise specified. The 90-calendar-day advance notice does not apply to clarifications or FAQs because they are not changes to existing requirements.

Page	Standard/Element	Head/Subhead	Update	Type of Update	Release Date
15	Policy	Policies and Procedures—Participating in PPC-PCMH	<p>Replace second paragraph and subsequent four bullets with:</p> <p>This program recognizes eligible <i>outpatient primary care practices for a duration of three years</i>. A practice is one or more clinicians who practice together and provide patient care at a single geographic location. Practice together means that, for all the clinicians in a practice:</p> <ul style="list-style-type: none"> • The practice care team follows the same procedures and protocols • Medical records for all patients treated at the practice site, whether paper or electronic, are available to and shared by all clinicians, as appropriate • The same systems—electronic and paper-based—and procedures support both clinical and administrative functions, for example: scheduling, treating patients, ordering services, prescribing, maintaining medical records and follow-up • A facility, such as a rehabilitation facility or a hospital cannot receive PCMH Recognition, however hospital-based primary care practices are eligible. 	CL	11/15/10
15	Policy	Policies and Procedures—Participating in PPC-PCMH	<p>Replace Physician practices sub-section with Primary care practices that qualify for PCMH evaluation and replace subsequent text section with the following:</p> <ul style="list-style-type: none"> • An incorporated group of three clinicians in an office site who use the same systems and staff, as described above. • An individual clinician, whether sharing an office with other clinicians or not, who maintains his or her own systems. • A group of clinicians at one location that is part of a larger medical group with several locations. • A practice within a multi-site group; NCQA defines a multi-site group as 3 or more practice sites using the same systems and processes including an electronic medical record system shared across all practice sites. • A subset of primary care clinicians within a multi-specialty practice. 	CL	11/15/10

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15	Policy	Policies and Procedures— Participating in PPC-PCMH	<p>Add sub-section after previously updated sub-section Physician practices with sub-section Eligible primary care clinicians who qualify for PCMH evaluation and add this subsequent text:</p> <ul style="list-style-type: none"> • Only clinicians that a patient/family can select as a Personal Clinician are eligible for Recognition and listed on NCQA's website • Clinicians who are typically eligible for PCMH evaluation include physicians, nurse practitioners and physician assistants who practice in the specialty of internal medicine, family medicine, or pediatrics and with the intention of serving as the personal clinician for their patients • Clinicians who are not typically eligible for PCMH evaluation include specialty physicians, nurse practitioners and physician assistants who do not have their own panel of patients or who do not practice in primary care • All eligible clinicians practicing together at practice site applying for recognition must be included in the PCMH Application • Physician-led practices applying with nurse practitioners or physician assistants: <ul style="list-style-type: none"> – Patients must be able to choose the nurse practitioner or physician assistant as their primary care practitioner – Nurse practitioners or physician assistants must have their own panel of patients 	CL	11/15/10
15	Policy	Policies and Procedures— The PPC-PCMH Multi-Site Application	<p>Add the following new section with header The PPC-PCMH Multi-Site Application after Participating in PPC-PCMH section. Add subsequent text:</p> <p>The multi-site application process is an option for organizations or medical groups with three or more practice sites that share an electronic record system and standardized policies and procedures across all of the practice sites applying for NCQA PCMH 2011 Recognition at one time. Practice sites do not have to all submit at the same time or be the same specialty or the same size.</p> <p>The multi-site application process does not allow organization-wide recognition; instead, it relieves eligible organizations from providing repetitive responses and documentation that would be the same for all sites.</p> <p>Determine Multi-Site Eligibility</p> <p><i>A multi-site application requires that the organization have at least three sites and share an electronic record system as well as standardized policies and procedures across all of the practice sites applying.</i></p> <p>An organization uses their Recognition Account to submit a Multi-site Request Eligibility Request, which asks them to enter the number of sites applying for Recognition and to answer three eligibility questions. The eligibility questions are:</p> <p>What is the number of practice sites in your organization applying for recognition?</p>	CL	9/15/11

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			<p>Note: Responses must reflect processes and systems currently in place and that have been in place for a minimum of three months.</p> <p>To qualify for a multi-site application, the practice must answer “yes” to all of the following questions:</p> <ol style="list-style-type: none"> 1. Can your organization sign one PCMH program agreement to cover all sites applying for Recognition? 2. Currently and for a minimum of 3 months, have ALL the practice sites applying for Recognition shared and used in the same way a Practice Management System, Registry or Electronic Health Record to document patient care for administration, and billing? 3. Currently and for a minimum of the 3 months, have ALL the practice sites applying for Recognition operated under the same policies and procedures? <p>After submitting a Multi-site Request Form, organizations will be contacted to set up a personal call with a Recognition Manager to determine if the organization is eligible for the process and the manager will approve their sites to purchase survey tools. Organizations will prepare for their call by reviewing the materials provided prior to the call and entering their practice sites into their Recognition Account.</p> <p>Multi-Site Survey Tool Submission</p> <p>Note: Multi-site practices should complete the application before purchasing the required Survey Tools.</p> <p>It is not necessary to purchase all of the required Survey Tools at one time.</p> <p>Corporate and site-specific survey tools will be submitted and reviewed in the following manner:</p> <ul style="list-style-type: none"> • An organization submits a Corporate Survey Tool with approved Multi-site elements prior to submission of the first practice site survey. • NCQA reviews and scores the Corporate Survey Tool within 30 days of submission. • The organization completes site-specific survey tools for each site with responses to the remaining elements. • NCQA merges the Corporate Survey Tool scored elements to the practice site survey tools prior to their submission. • This allows the practices to see full survey scoring prior to practice site submission. • All practice site survey tools must be submitted within 12 months of the Corporate tool submission date. <p>NCQA reviews, finalizes scoring and makes a Recognition decision for each practice site within 60 days of submission of each site tool (after merging of the corporate survey scoring).</p>		
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Updated 9/15/2011

21	Policy	Policies and Procedures – Audit	<p>Update Audit sub-section to read:</p> <p>NCQA reserves the right to audit any practice that has applied for NCQA Recognition while the practice's application is under review. An audit validates documentation, stated procedures and responses given by a practice in its application and Survey Tool. NCQA audits 5 percent of practices, either by specific criteria or randomly, before making a decision about whether the practice meets PCMH requirements. Audits may be completed by e-mail, teleconference, Webinar, onsite review or by other electronic means. Failure to agree to an audit, failure to pass an onsite audit or failure to pass an audit of Survey Tool responses and documented elements may result in a status of "Not Recognized."</p> <p>Practice sites selected for audit are notified and sent instructions. The first level of review is verification of the Survey Tool submitted by the practice. The practice may be asked to forward copies of the source documents and explanations, to substantiate the information in the Survey Tool submitted with its application.</p> <p>If the application is verified and no issues are discovered, the practice is notified that the audit is complete and the application for Recognition is processed.</p> <p>If an audit requires an onsite review, NCQA conducts the review within 30 calendar days of notifying the practice of its intent to conduct an audit.</p> <p>If audit findings indicate that the information submitted by the practice is incorrect or that the documentation does not meet the PCMH standards, the application for NCQA Recognition may be denied, scores may be reduced or additional documentation may be required. NCQA staff notify the practice of audit findings and the recognition decision within 30 days after conclusion of the audit.</p> <p>A practice whose application for recognition is denied because of an audit may request Reconsideration of the decision. Refer to <i>Reconsideration</i> for more information.</p>	CL	11/15/10
24	Policy	Policies and Procedures – Reconsideration	<p>Update Reconsideration sub-section to read:</p> <p>A practice may request Reconsideration of any NCQA Recognition Level or Not Recognized status decision. NCQA must receive a Reconsideration request within 30 days after the practice is notified that it has received a specific recognition level or a status of Not Recognized. The practice must describe the reason for requesting the Reconsideration and list standards or elements for which it requests Reconsideration. It may not submit additional documentation at this time, but may state how it believes NCQA misinterpreted the original documentation.</p> <p>NCQA refers Reconsideration requests to the Reconsideration Committee. The Recognition Programs assistant vice president or Recognition Programs director will review the request and make a recommendation to a group of three RP-ROC members who were not involved in making the initial recognition decision and do not have a conflict of interest with the practice; these members will</p>	CL	11/15/10

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