



GUIDELINES FOR MARKETING AND ADVERTISING NCQA QUALITY PLUS DISTINCTION

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INTRODUCTION

Congratulations on earning NCQA Accreditation, Certification, Recognition, Distinction or other NCQA status! We encourage you to publicize your achievement and have developed the following Marketing and Advertising Guidelines to help you get the most out of your NCQA status. The Guidelines include how to market your achievement, appropriate language to incorporate into your marketing and advertising materials and helpful ideas to get you started.

The guidelines are designed to help NCQA customers to create advertising and marketing materials that reference NCQA status in a clear, factual and accurate manner. They are also designed to protect the integrity of NCQA's programs and allow all participants to benefit from their achievement in a fair and accurate manner.

The Guidelines below are to be used in conjunction with NCQA's General Marketing Guidelines. Organizations that receive Quality Plus Distinction are required to follow NCQA's General Guidelines for review and approval of all marketing and advertising materials.

****SPECIAL NOTE: For organizations that have received Physician and Hospital Quality Distinction, please contact marketing@ncqa.org for more information about guidelines and appropriate use of seals.**

DESCRIPTION OF QUALITY PLUS DISTINCTION

The following statements may be used in your marketing and advertising material:

- NCQA awards distinction to organizations that meet or exceed its rigorous requirements for quality in Member Connections and Care Management and Health Improvement. The status is awarded individually by content area and by product as applicable.
- The Quality Plus programs evaluate how well a health plan complies with the standards for the two content areas: Member Connections (MEM) and Care Management and Health Improvement (CHI).
- Quality Plus is a nationally recognized evaluation that purchasers, regulators, and consumers can use to assess which health plans have earned distinction by meeting rigorous standards in the areas of Member Connections (MEM) and Care Management and Health Improvement (CHI).
- Quality Plus recognizes innovative plans that lead the market in areas such as leveraging the Web to promote members' self-management of chronic conditions, allowing members to track claims online, adopting innovative disease management programs and delivering high-value health care.
- Quality Plus is a voluntary program for NCQA-Accredited organizations. Health plans can opt to achieve distinction in Quality Plus content areas in addition to their accreditation. (Only MCOs can apply for and achieve CHI Distinction.)

GENERAL GUIDELINES FOR MARKETING AND ADVERTISING QUALITY PLUS DISTINCTION

The following statements may be used in your marketing and advertising material:

- Organizations **must** always advertise their most current Quality Plus status.
- Organizations that reference their Distinction status should always capitalize the “Q” and “P” in Quality Plus and the word “Distinction” that follows.
- The organization may not use, disclose, represent or otherwise communicate reports or numeric results from the readiness evaluation to any third party for any other purpose. The organization may not represent that it has achieved Quality Plus Distinction based on reports or numeric results without a final NCQA decision. In addition, the organization may not release supplemental worksheets.
- Organizations may advertise that they are either awaiting the results of a Distinction survey or are scheduled for a survey.
- Organizations with a designated Quality Plus Distinction status may use pre-approved quotations from NCQA staff members in their advertising material.
- Organizations are not required to advertise their Quality Plus Distinction effective or expiration dates.

GUIDELINES FOR MEMBER CONNECTIONS DISTINCTION

The following section highlights guidelines that are specific to Member Connections. Please use the General Guidelines in conjunction with the product specific guidelines below.

Standards for Member Connections address the following questions:

Do members have access to interactive information? Can they track claims? How functional is the plan’s Web site? Does the organization take advantage of available technology to provide good service? Can members engage in a health risk appraisal?

Descriptions of the NCQA Standards for Member Connections

The following statements may be used in your marketing and advertising material with respect to Member Connections:

- The Member Connections standards assess how effectively an organization interacts with its members via the Web and telephone to make sure they understand and know how to use their benefits, have access to self-management tools for certain conditions and can check on the status of their claims.
- NCQA's Quality Plus standards are purposely set high to encourage health plans to continuously enhance their quality.
- NCQA's Distinction standards are intended to help organizations achieve the highest level of performance possible, reduce patient risk for untoward outcomes, and create an environment of continuous improvement.
- NCQA Quality Plus provides purchasers and consumers with the ability to evaluate the quality of different health plans along a variety of important dimensions, and to make their health plan decisions based on demonstrated value rather than simply on cost.

Member Connections standards are focused on four areas:

Support and Administration: Do members have the information they need to understand and use the plan's services? Can they change doctors or order enrollment cards on the plan's Web site? Can they check the site to see how much a given procedure or therapy might cost? How do members rate the plan's services?

Claims: Can members easily submit and track claims? Is tracking available via the Web? Do members feel claims are processed in a timely manner? Do members feel claims are processed accurately?

Pharmacy Benefits: Do members have access to comprehensive information about their pharmacy benefits and how to use them? Can they get cost information about specific drugs by calling or visiting the plan's Web site? Is information provided about drug-drug interactions and generic substitutions? Is it possible to order a refill online?

Self-management: Does the plan help members conduct a health risk appraisal? Does the plan offer interactive tools on its Web site related to issues such as smoking cessation, exercise, immunizations and screenings? Are evidence-based guidelines the basis for such tools? How often are the tools tested and updated?

For Care Management and Health Improvement, an Organization maintains a status of Distinction until the earlier of:

- three (3) years; or

- the expiration, lapse, revocation, or other loss of organization's current Distinction status for the products in its commercial product line.

GUIDELINES FOR CARE MANAGEMENT AND HEALTH IMPROVEMENT DISTINCTION

The following section highlights guidelines that are specific to Care Management and Health Improvement (CHI). Please use the General Guidelines in conjunction with the product specific guidelines below.

Standards for Care Management and Health Improvement address the following questions:

Does the organization offer its members specific services based on their own unique health status? How effectively does the plan manage members with chronic conditions and complex illnesses? Does the plan work to make all its members healthier?

Descriptions of the NCOA Standards for Care Management and Health Improvement

The following statements may be used in your marketing and advertising material with respect to Member Connections

- The CHI standards look specifically at how effectively an organization manages chronic conditions and targets treatments and interventions to individuals, including healthy ones, based on their unique needs.
- Standards in this area address issues such as disease management, risk assessment and complex case management.

Care Management and Health Improvement standards are focused on three areas:

Wellness and Prevention: What data sources are used to identify members for wellness activities? Do members who are identified receive targeted follow-up with information on wellness activities? Do members have access to health information online?

Helping Members with Chronic Conditions: Are members identified for disease management programs? Do health plans regularly evaluate member satisfaction with disease management programs? Do members have access to health information systems that facilitate continuity of care?

Complex Case Management: Do members receive effective case management for complex cases? Do health plans measure the effectiveness of the case management programs? Do health plans implement processes to improve the performance of the case management programs?

For Care Management and Health Improvement, an Organization maintains a status of Distinction until the earlier of:

- three (3) years; or

- the expiration, lapse, revocation, or other loss of organization’s current Distinction status for the products in its commercial product line.

REGIONAL COMPARISONS

- When making regional comparisons, organizations should provide NCQA with supporting documentation to validate any claims made in the materials being submitted for review.
- Organizations may say they have the first product line and product in a particular region to earn Quality Plus Distinction.
- If an organization is the second, third, fourth, etc. in a region to earn a Quality Plus status, it may promote this status by acknowledging (for example) that they are “one of two plans” or “one of five plans in the region.” Plan **must** footnote actual statistic.

QUALITY PLUS STATISTICS

*Organizations may use Quality Plus statistics from the NCQA Health Plan Report Card (HPRC) in their promotional material provided they use these statistics in a format that is accurate and understandable by the consumer. All advertising and marketing should include the date of the HPRC from which they were drawn. **Organizations should be aware that these statistics change every month.** Some durable goods may need to be corrected with the appropriate statistic if necessary.*

Organizations can obtain the HPRC through NCQA’s Web site at www.ncqa.org, or by calling NCQA Customer Support at (888) 275-7585.

USE OF QUALITY PLUS DISTINCTION SEALS

NCQA encourages organizations that have received Quality Plus Distinction to display their seals in marketing and advertising materials.

- There are three Quality Plus seals
 - General Quality Plus seal (for organizations that have achieved more than one area of distinction only)
 - Member Connection Seal
 - Care Management and Health Improvement Seal
- Only organizations that have received more than one area of distinction can use the General Seal.
- Organizations that have received one or both of the areas of distinction can use the seals for which they have received distinction.

- Organizations may attach the Quality Plus seal to their letterhead, emails and business cards.
- You may access the seals at www.ncqa.org/marketing.aspx.
- Seals are provided in EPS and JPG formats.
- Organizations are not required to advertise their Quality Plus Distinction effective or expiration dates.
- Organizations should be aware that Distinction statuses can change which may affect the statement on durable goods (e.g.: a billboard that is no longer accurate will have to be corrected). It is the organization's responsibility to maintain and update accurate marketing materials. Should your status change, you are responsible for updating all promotional items, and **must** cease distribution of all materials with incorrect status information. Updating of website and other distributed materials should take place within 30 days of the status change.

APPROVED QUOTES

Organizations that have received Quality Plus Distinction are permitted to use the following quotes in their marketing and advertising materials.

Member Connections

“_____ is to be commended for meeting Member Connections standards,” said NCQA President Margaret E. O’Kane. “Meeting these standards is an indication that _____ uses technology effectively to connect with its members and keep them involved in their care. There’s real value in doing so – engaged patients have better outcomes.”

Care Management and Health Improvement

“_____ is to be commended for meeting our Care Management and Health Improvement standards,” said NCQA President Margaret E. O’Kane. “Meeting these standards is an indication that _____ is excelling at engaging members in wellness and prevention. Members will want to know which plans are taking steps to prevent and manage chronic conditions.”

COMPLIANCE

Any advertising material or other promotional effort that refers to NCQA status and violates any of the NCQA Marketing and Advertising Guidelines, or which is in any way false or misleading as determined by NCQA, may be grounds for revocation of the organization’s status (es).

It is the responsibility of the organization to follow the General Marketing Guidelines as well as the product specific guidelines and conform to all applicable NCQA Marketing and Advertising Guidelines. Failure to do so may jeopardize the organization's status.

NCQA reserves the right to require an organization to withdraw advertising material from distribution immediately or to publish, at the organization's cost, a retraction and/or clarification in connection with any false or misleading statements or any violation of all applicable NCQA Marketing and Advertising Guidelines. Each organization agrees in advance to remedy such violation with the action deemed appropriate by NCQA. In addition, NCQA reserves the right to conduct an audit of an organization's NCQA-related advertising and marketing materials at any time.

Thank you for observing these guidelines, and please don't hesitate to contact us with questions at marketing@ncqa.org