

# 2017 NCQA Medicaid Managed Care Toolkit

Maximizing NCQA Accreditation for Managed Care Oversight & the State Quality Strategy



State Quality Strategy: Non-Duplication

## What is Deeming?

Per CFR 438.360, in place of a Medicaid review by the State, its agent, or External Quality Review Organization (EQRO), states can use information obtained from a national accreditation review for the mandatory external quality review activities, including a state's annual compliance review. States give plans credit for meeting certain state and federal Medicaid requirements based on how they scored on select standards. This process is commonly known as "deeming."

The NCQA Medicaid Managed Care Toolkit (excel spreadsheet for download) provides guidance to state Medicaid program and EQRO staff on the components of NCQA Health Plan Accreditation results that can be used under the federal non-duplication provision and reported within a state's Quality Strategy. The crosswalk reflects the deemable areas outlined in the May 2016 Medicaid Managed Care Final rule and the NCQA's 2017 Health Plan Accreditation Standards, which are valid for accreditation surveys taking place between July 1, 2017 and June 30, 2018. The crosswalk is an information source only and intended to support states in maximizing use of accreditation reviews.

NCQA's 2017 Health Plan Accreditation status align with a majority of federal requirements.

Regulation Category	2017 Equivalence**
<b>TAB 4</b>	
<b>Access to Care</b> (438.206, 207, 208, 210)	<b>82%</b>
<b>Structure and Operations</b> (438.214, 224, 228, 230)	<b>57%</b>
<b>Quality Measurement and Improvement</b> (438.236, 242, 330)	<b>75%</b>
<b>TAB 5</b>	
<b>Grievances</b> (438.400, 438.228)	<b>85%</b>
<b>TAB 6</b>	
<b>Information Requirements</b> (438.10, 438.218)	<b>62%</b>

\*\*The percentages include NCQA standards that meet or partially meet the federal requirements within the associated category.

## Why Do States Implement Deeming?

- Makes state dollars go farther. Maryland, Tennessee, and Rhode Island use accreditation results in their compliance process to simplify review of the plans and retask staff/EQRO dollars to other priorities. This approach can be beneficial for smaller quality oversight teams with competing priorities. States without accreditation requirements can also leverage plan accreditation results, (e.g. California and Texas).
- Reinforces message to plans about state quality goals. Using the accreditation standards to reinforce the state's goals for quality helps assure a successful partnership. Plans can harness their QI resources to meet state population health priorities and know that accreditation supports that kind of flexibility. Using the NCQA accreditation results can then offer the state and the plan the reassurance of aligned goals.

## How Can Your State Implement Deeming to Maximize Use of Accreditation Results?

- **Step 1: Download** the crosswalk (<http://www.ncqa.org/publications-products>)
- **Step 2:** Review detailed breakdown of how federal requirements compare to NCQA standards
- **Step 3:** Leverage crosswalk to construct a state checklist of deemable requirements
- **Step 4:** Integrate into Quality Strategy and EQRO review

# NCQA Medicaid Managed Care Toolkit

Using NCQA Accreditation for MMC Oversight & Quality Strategy



## 2018 Medicaid Deeming Module (In development)

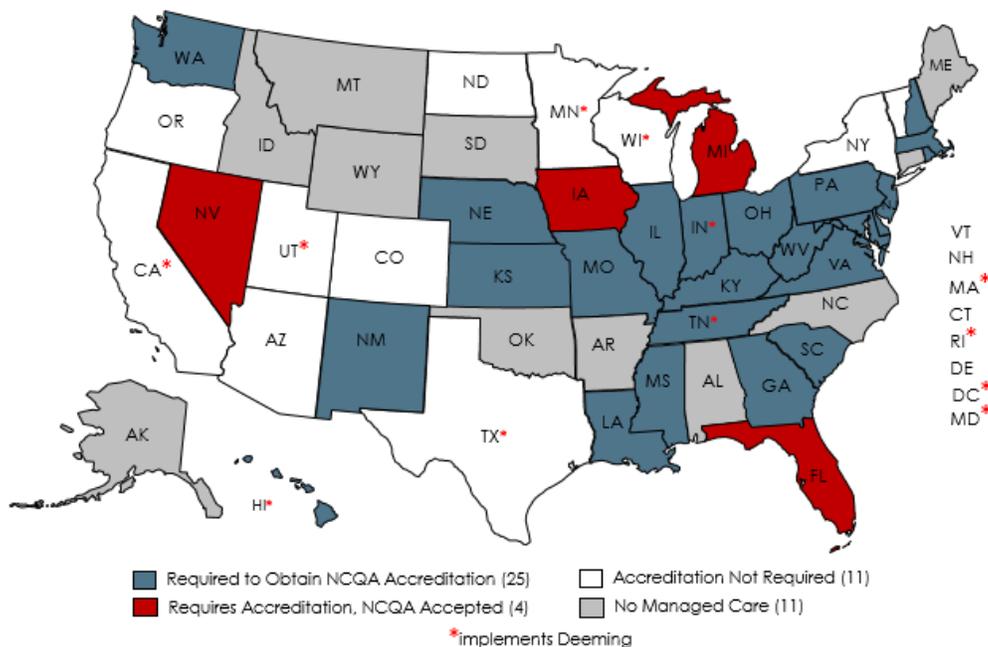
Beginning in July 2018, NCQA plans to implement a review module for Medicaid. It will be comprised of existing Medicaid specific accreditation standards (MED) and new areas taken from the 2016 Medicaid Managed Care Rule. The intent is to increase the value of accreditation by broadening the areas of review NCQA can incorporate as part of our survey process. States with HPA requirements that want to maximize deeming, may include this Medicaid Deeming Module as part of plan accreditation review requirements. The draft standards will be released late 2017 and incorporated in the 2018 Toolkit.

## Accessing NCQA Accreditation Reports

The 2016 Medicaid Managed Care Rule requires states to obtain accreditation information on the Medicaid plans offered in the state. Several pieces of the required information are currently available on NCQA's Health Plan Report Card (<https://reportcards.ncqa.org/#/health-plans/list>), including accreditation status. However, the detailed results must be directly provided by NCQA to the states. We have been working with states to create a systematic process for sharing such information. If you have not already established a designated contact for receipt of the information for plans in your state, please contact us.

## Current Landscape of NCQA Accreditation in Medicaid Managed Care

Twenty-five Medicaid managed care states currently require NCQA Accreditation to promote ongoing quality improvement and drive value. Nearly a dozen states also use NCQA Accreditation to streamline regulatory oversight through the federal non-duplication provision.



## NCQA Can Offer Support!

NCQA's State Affairs team partners with state agencies to help align the state's quality strategy and operational standards with NCQA's requirements. We can work with your agency to interpret NCQA standards and share examples from states making the most of accreditation.

**To learn more, contact Kristine Thurston Toppe, Director of State Affairs  
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