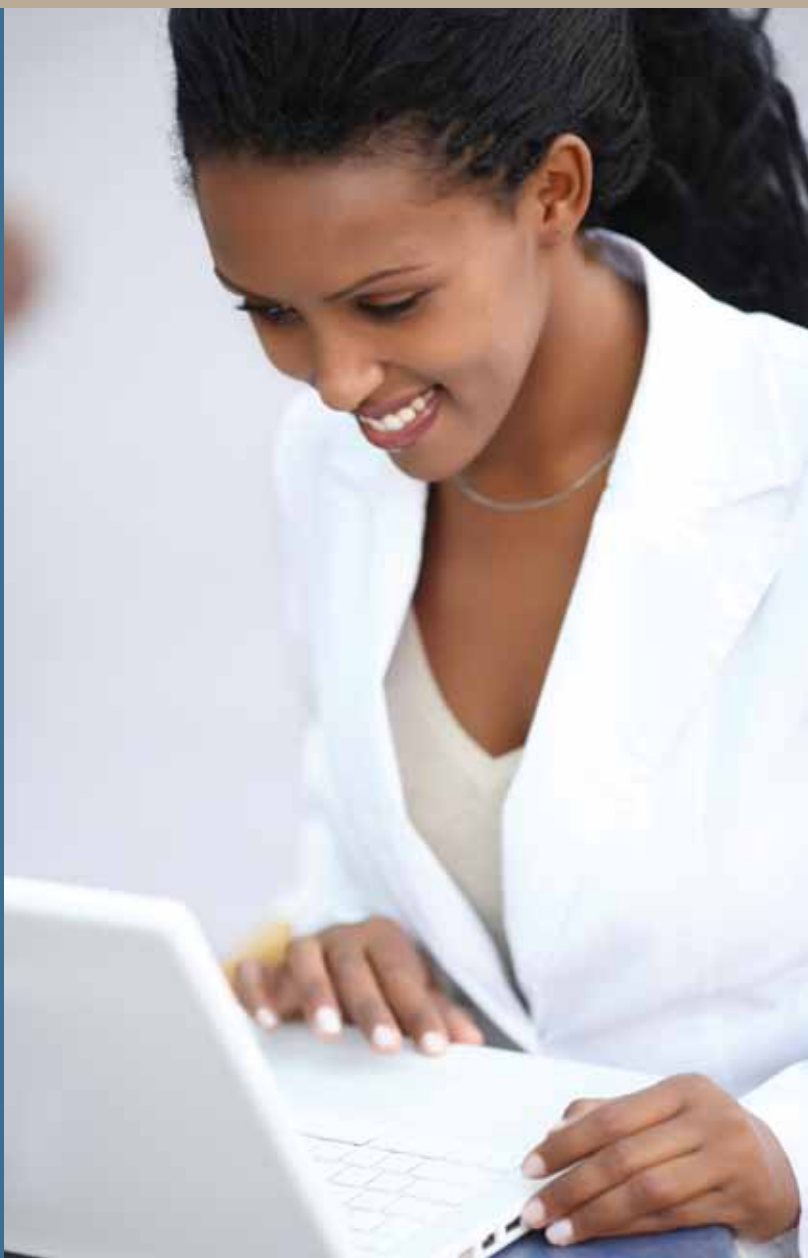




2010–2011 Publications and Products

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WHAT'S NEW

Quality Compass: RRU + Quality Index (Commercial)

Answering the question, “Is this health plan giving me the best return for my health care dollars?”, is more than simply a question of cost. A more complete consideration is *value*—how a plan’s cost and quality correlate. *Quality Compass: RRU + Quality Index (Commercial)* is a reporting tool that gauges the resources a plan uses to treat high-cost chronic conditions, along with the plan’s HEDIS quality results for treating those diseases. *RRU + Quality Index* allows the comparison of health plans based on cost and value because it expresses a plan’s resource utilization and quality results, compared with the average of plans that serve a similar population. By consolidating diverse criteria into quantified points of comparison, RRU makes it easier to choose a health plan.

Multicultural Health Care (MHC)

Caring for an increasingly diverse society requires cultural skills, as well as clinical competence. Multicultural Health Care (MHC) is an evaluation program that uses evidence-based standards to rate how health care plans and other organizations measure, analyze and adjust their services to meet the needs of diverse populations. Health care organizations earn MHC Distinction by meeting rigorous standards in Race/Ethnicity and Language Data Collection, Access and Availability of Language Services, Practitioner Network Cultural Responsiveness, Culturally and Linguistically Appropriate Services Programs and Reducing Health Care Disparities.

Health Plan Accreditation to include Medicaid standard

NCQA Health Plan Accreditation requirements assess the quality of care provided by commercial, Medicare and Medicaid health plans. From 2009 to 2010, NCQA evaluated current accreditation requirements with a focus on Medicaid health plans. The evaluation affirmed that many state Medicaid offices value NCQA Accreditation as a reviewer against federal requirements and believe that NCQA can play a larger role in meeting federal requirements. Consequently,

NCQA developed a voluntary Medicaid standard, attached to its Health Plan Accreditation Program, to increase the accreditation standards equivalency with federal requirements. These new requirements include:

- Direct Access to Women’s Health Services
- Second Opinions
- Out-of Network Services
- Out of Network Cost to Member
- Hours of Operation Parity

With the understanding that Medicaid health plans serve a diverse population, NCQA will allow Medicaid health plans to use Children or Children With Chronic Conditions CAHPS survey results.

NCQA Fifth Annual National Policy Conference

Register early for NCQA’s fifth annual National Policy Conference in Washington D.C., on Friday, December 3, 2010. Discussion will focus on how health plans can deliver value and thrive in the new, post-reform environment, and how to improve population health and individual patient experience while reducing per capita spending. Leaders from across the health care industry will offer strategies for:

- Reporting on cost and quality, including how plans can feed quality data back to providers
- Designing benefit structures to support value and effective care
- Coordinating care through incentives and infrastructure changes to support high performance
- Engaging patients in self-care and employers in workers’ wellness
- Forming relationships within communities to share resources and reward primary care.

Seats are limited, so don’t wait to register for this timely symposium! Program updates and registration are available at www.ncqa.org/education.

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HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). Quality Compass® is a registered trademark of NCQA. PPC® is a registered trademark of NCQA. HEDIS Compliance Audit™ is a trademark of NCQA. PPC-PCMH™ is a trademark of NCQA. Quality Dividend Calculator™ is a trademark of NCQA. CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

PERFORMANCE MEASUREMENT

HEDIS

Healthcare Effectiveness Data and Information Set (HEDIS) 2011

HEDIS is the industry standard in health care performance measurement, used by more than 90 percent of the nation's health plans and many leading employers and regulators. HEDIS is a set of standardized measures that specifies how organizations collect, audit and report performance information across the most pressing clinical areas, as well as important dimensions of customer satisfaction and patient experience.

Please note that implementation (i.e., data collection and reporting) of HEDIS 2011 for the 2010 Reporting Year (using 2009 data) will require purchase of Volumes 2, 3 and 5.

Technical Specifications for Physician Measurement

HEDIS is the most widely used set of inpatient and ambulatory performance measures in the health care industry. This publication is the newest addition to NCQA's suite of HEDIS products. It supports standardized measurement by providing the technical specifications necessary to enable reliable, equitable and valid measurement and reporting of physician-specific performance, and applies to individual physicians, practice sites and medical groups. In most cases, measures were developed through adaptation of HEDIS health plan-level measures. A wide array of organizations—health plans, physician groups, offices, community coalitions, employers, the public sector and others—find HEDIS Physician Measurement to be a useful resource.

HEDIS 2011 Technical Specifications for Physician Measurement (Available October 2010)		Price
Print edition	Item #10273-100-11	\$300
E-pub 1–4 users	Item #10273-361-11	\$265

Volume 1: Narrative

Volume 1 is an indispensable reference that will help you understand the science of health care quality measurement. The Narrative gives a background on HEDIS and explains why the measures are important to consumers, purchasers

and health plans. It also features user-friendly descriptions of each performance measure and valuable guidance on interpreting and using HEDIS data.

HEDIS 2011, Volume 1 (Available July 2010)		Price
Print edition	Item #10283-100-11	\$200
E-pub single user	Item #10273-301-11	\$180
E-pub 2–4 users	Item #10273-302-11	\$500
E-pub 5–10 users	Item #10273-303-11	\$1,200

Volume 2: Technical Specifications

A required resource for anyone involved in collecting, calculating or submitting HEDIS data for health plans, Volume 2 features the complete technical specifications for each measure, including all relevant CPT®, ICD-9, HCPCS, UB-92 and DRG codes. It also includes general guidelines for data collection and reporting, detailed instructions on how to perform the necessary calculations and guidelines for sampling.

HEDIS 2011, Volume 2 (Available July 2010)		Price
Print edition	Item #10284-100-11	\$340
E-pub single user	Item #10273-311-11	\$305
E-pub 2–4 users	Item #10273-312-11	\$850
E-pub 5–10 users	Item #10273-313-11	\$2,040

CPT codes copyright 2010. American Medical Association. All Rights Reserved. CPT is a trademark of the AMA. No schedules, basic units, relative values or related listings are included in CPT. The AMA assumes no liability for the data contained herein.

Volume 3: Specifications for Survey Measures

This volume contains complete instructions for administering all survey-based HEDIS measures, including surveys from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Program. It includes the CAHPS Health Plan Survey, 4.0H Adult Version and 3.0H Child Version, Medical Assistance With Smoking and Tobacco Use Cessation, Flu Shots for Adults Ages 50–64, Flu Shots for Older Adults and Pneumonia Vaccination Status for Older Adults. Volume 3 also includes technical specifications, background information and protocols necessary for administering surveys and accompanying correspondence.



HEDIS 2011, Volume 3 (Available October 2010)		Price
Print edition	Item #10285-100-11	\$225
E-pub single user	Item #10273-321-11	\$210
E-pub 2–4 users	Item #10273-322-11	\$563
E-pub 5–10 users	Item #10273-323-11	\$1,350

Volume 5: HEDIS Compliance Audit™ — Standards, Policies and Procedures

NCQA uses only audited HEDIS data for its information products, including Quality Compass and the State of Health Care Quality Report. NCQA Accreditation requires health plans to submit audited HEDIS data annually, which further strengthens the HEDIS Audit and its role in ensuring accurate and reliable data for plan-to-plan comparison. *HEDIS Compliance Audit Standards, Policies and Procedures* describe in detail the methodology used to audit a health plan's data collection programs, calculation processes and HEDIS measure results. This volume also includes the standards and guidelines for assessing a plan's information systems capabilities and for evaluating its ability to comply with HEDIS specifications.

HEDIS 2011, Volume 5 (Available November 2010)		Price
Print edition	Item #10287-100-11	\$200
E-pub single user	Item #10273-341-11	\$180
E-pub 2–4 users	Item #10273-342-11	\$500
E-pub 5–10 users	Item #10273-343-11	\$1,200

Volume 6: Specifications for the Medicare Health Outcomes Survey

The Medicare Health Outcomes Survey (HOS) measure was developed to monitor and evaluate the quality of care and services provided to Medicare beneficiaries and to provide them with information that supports plan-to-plan comparison. This volume features details about the measure, the survey instrument and information that health plans and vendors need to report results.

HEDIS 2011, Volume 6 (Available February 2011)		Price
Print edition	Item #10288-100-11	\$170
E-pub single user	Item #10273-351-11	\$155
E-pub 2–4 users	Item #10273-352-11	\$425
E-pub 5–10 users	Item #10273-353-11	\$1,020

HEDIS 2011 Electronic Coding Tables (ECTs)

Available in XML, the ECTs provide an easy way to incorporate CPT, ICD-9-CM, HCPCS, UB-92 and DRG codes into your organization's data collection program to save programming hours, eliminate the manual search for code and reduce keying errors.

HEDIS 2011 ECTs (Available September 2010)		Price
Single site	Item #10289-150-11	\$1,900
2–5 sites	Item #10289-151-11	\$2,840
6–10 sites	Item #10289-152-11	\$3,300
11–20 sites	Item #10289-153-11	\$3,785
21+ sites	Item #10289-154-11	\$5,645

HEDIS Package

This package includes printed editions of HEDIS Volumes 1, 2, 3, 5 and 6. Each publication is delivered as soon as it is available. Order the HEDIS 2011 Package and save \$115.

HEDIS 2011 Package	Price
Item #10283-150-11	\$1,020

HEDIS Users Group (HUG) Membership

Each organization implementing HEDIS is strongly encouraged to join NCQA's HUG for technical assistance and guidance on interpreting the specifications. Membership benefits include the HEDIS 2011 publications package, informational Web-based conferences, a monthly newsletter, discount vouchers and up-to-date technical information, as well as the inside track on measure development. Two membership package options are offered.

2011 HUG Package 1

This package includes printed editions of HEDIS 2011 Volumes 1, 2, 3, 5 and 6 and a single-user, member exclusive e-pub copy of Volume 2 that incorporates all changes from the *October Update*. Each publication is delivered as soon as it is available.

2011 HUG Package 1	Price
Item #10702-150-11	\$2,495

PERFORMANCE MEASUREMENT/ACCREDITATION

2011 HUG Package 2

This package includes printed editions of HEDIS 2011 Volumes 1, 2, 3, 5 and 6; a single-user, member-exclusive e-pub of Volume 2 that incorporates all changes from the *October Update*; and the *2011 Standards and Guidelines for the Accreditation of Health Plans*. Each publication is delivered as soon as it is available.

2011 HUG Package 2	Price
Item #10702-151-11	\$2,795

Disease Management (DM)

The 2010 DM Standards and Guidelines and Survey Tool are effective July 1, 2010. The 2010 DM program includes performance measures, which are updated each year.

Standards and Guidelines for Accreditation and Certification in DM

This publication outlines standards and features explanations and examples of how to meet the standards, scoring guidelines, points and certification outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2010 DM Standards and Guidelines		Price
Print edition	Item #10400-100-10	\$260
E-pub single user	Item #10401-301-10	\$235
E-pub 2-4 users	Item #10401-302-10	\$465
E-pub 5-10 users	Item #10401-303-10	\$1,150

Web-based		Price
Single user	Item #10401-321-10	\$235
2-4 users	Item #10401-322-10	\$465
5-10 users	Item #10401-323-10	\$1,150

Survey Tool for Accreditation and Certification in DM

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for accreditation or certification must complete the Survey Tool and submit it to NCQA to begin the survey process.

2010 DM Survey Tool

Web-based		Price
Single user	Item #10402-301-10	\$985
2-4 users	Item #10402-302-10	\$1,960
5-10 users	Item #10402-303-10	\$4,885

Technical Specifications for Disease Management

A required resource for anyone involved in collecting, calculating or submitting data for Disease Management. This publication features the complete technical specifications for each measure, including all relevant data elements. It also includes general guidelines for data collection and reporting, detailed instructions on how to perform the necessary calculations and guidelines for sampling.

2011 DM Technical Specifications e-pub (Available August 2010)

E-pub single user	Item #10404-301-11	\$160
E-pub 2-4 users	Item #10404-302-11	\$460
E-pub 5-10 users	Item #10404-303-11	\$1,080

Application for Accreditation and Certification in DM

The application provides all materials necessary to apply for an NCQA DM Survey and includes pricing information, policies and procedures and the survey agreement.

DM Accreditation Application	Price
Item #10400-150-02	Free

DM Certification Application	Price
Item #10400-151-02	Free

ACCREDITATION

Health Plans (HP)

The 2011 Health Plan Standards and Guidelines and Survey Tool are effective July 1, 2011.

Standards and Guidelines for the Accreditation of Health Plans

Web-based version includes Medicare Advantage. Medicaid is available in a print edition, e-pub and Web-based version.

This publication features in-depth explanations and examples of how to meet the standards, accreditation scoring guidelines and points, accreditation outcomes and reporting categories. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2011 Health Plan Standards and Guidelines (Available August 2010)

	Item #	Price
Print edition	Item #10352-100-11	\$320
E-pub single user	Item #10253-311-11	\$300
E-pub 2-4 users	Item #10253-312-11	\$865
E-pub 5-10 users	Item #10253-313-11	\$2,120

Web-based

	Item #	Price
Single user	Item #10800-321-11	\$300
2-4 users	Item #10800-322-11	\$865
5-10 users	Item #10800-323-11	\$2,120

Survey Tool for the Accreditation of Health Plans

Includes Medicare Advantage and Medicaid

The Survey Tool includes the Standards and Guidelines and all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for accreditation must complete the Survey Tool and submit it to NCQA to begin the survey process.

2011 Health Plan Survey Tool (Available July 2010)

Web-based	Item #	Price
Single user	Item #10801-321-11	\$1,300
2-4 users	Item #10801-322-11	\$2,445
5-10 users	Item #10801-323-11	\$6,110

Application for Health Plan Accreditation

The application provides all materials required to apply for an NCQA HP Survey and includes pricing information, policies and procedures and the survey agreement.

Health Plan and MA Application	Price
Item #10013-150-10	Free

2011 Health Plan and MA Application (Check website for availability.)	Price
Item #10013-150-11	Free

Managed Behavioral Healthcare Organizations (MBHO)

The 2011 MBHO Standards and Guidelines and Survey Tools are effective July 1, 2011.

Standards and Guidelines for the Accreditation of MBHOs

This publication outlines standards and features in-depth explanations and examples of how to meet the standards; accreditation scoring guidelines and points; and accreditation outcomes and reporting categories. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2011 MBHO Standards and Guidelines (Available August 2010)

	Item #	Price
Print edition	Item #10550-100-11	\$260
E-pub single user	Item #10256-311-11	\$255
E-pub 2-4 users	Item #10256-312-11	\$660
E-pub 5-10 users	Item #10256-313-11	\$1,450

Web-based

	Item #	Price
Single user	Item #10802-321-11	\$255
2-4 users	Item #10802-322-11	\$660
5-10 users	Item #10802-323-11	\$1,450

ACCREDITATION

Survey Tool for the Accreditation of MBHOs

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for accreditation must complete the Survey Tool and submit it to NCQA to begin the survey process.

2011 MBHO Survey Tool (Available July 2010)

Web-based		Price
Single user	Item #10803-321-11	\$1,035
2-4 users	Item #10803-322-11	\$2,060
5-10 users	Item #10803-323-11	\$5,150

Application for the Accreditation of MBHOs

This application provides all materials required to apply for an NCQA MBHO Accreditation Survey and includes pricing information, policies and procedures and the survey agreement.

MBHO Application	Price
Item #10026-150-97	Free

2011 MBHO Application (Check website for availability.)	Price
Item #10026-150-11	Free

Medicare Advantage (MA)

MA Module

The MA Module is an essential resource for health plans that provide care under the MA Program. These publications supplement the NCQA Accreditation Survey with Medicare-specific requirements for the complete MA Survey. The MA Module contains the Standards and Guidelines, data collection tools, an appendix of useful information and details about eligibility requirements, application procedures and policies and procedures.

*The MA Module is included in the **Web-based** Health Plan Standards and Guidelines and the Health Plan Survey Tool.*

2010 HP MA Module		Price
Print edition	Item #10355-100-10	\$100
E-pub single user	Item #10253-331-10	\$90
E-pub 2-4 users	Item #10253-332-10	\$220
E-pub 5-10 users	Item #10253-333-10	\$575

2011 HP MA Module (Available April 2011)		Price
Print edition	Item #10355-100-11	\$100
E-pub single user	Item #10253-331-11	\$90
E-pub 2-4 users	Item #10253-332-11	\$220
E-pub 5-10 users	Item #10253-333-11	\$515

New Health Plans (NHP)

The 2011 NHP Standards and Guidelines and Survey Tools are effective July 1, 2011.

Standards and Guidelines for the Accreditation of NHPs

This publication outlines standards and features explanations and examples of how to meet the standards, scoring guidelines and points, accreditation outcomes and reporting categories. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2011 NHP Standards and Guidelines (Available August 2010)		Price
E-pub single user	Item #10265-311-11	\$255
E-pub 2-4 users	Item #10265-312-11	\$660
E-pub 5-10 users	Item #10265-313-11	\$1,450

Web-based		Price
Single user	Item #10332-321-11	\$255
2-4 users	Item #10332-322-11	\$660
5-10 users	Item #10332-323-11	\$1,450

Survey Tool for the Accreditation of NHPs

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for accreditation must complete the Survey Tool and submit it to NCQA to begin the survey process.



2011 NHP Survey Tool (Available July 2010)

Web-based		Price
Single user	Item #10333-321-11	\$1,035
2-4 users	Item #10333-322-11	\$2,060
5-10 users	Item #10333-323-11	\$5,150

Application for the Accreditation of NHPs

The application provides all materials required to apply for an NCQA NHP Accreditation Survey and includes pricing information, policies and procedures and the survey agreement.

2010 NHP Application	Price
Item #10096-150-98	Free

2011 NHP Application (Check website for availability.)	Price
Item #10096-150-11	Free

Wellness and Health Promotion (WHP)

The 2009 WHP Standards and Guidelines and Survey Tool are effective April 1, 2009. The WHP program includes performance measures, which are updated each year.

Standards and Guidelines for Accreditation in Wellness and Health Promotion

This publication outlines the standards and features explanations and examples of how to meet the standards, scoring guidelines, points and accreditation outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2009 WHP Standards and Guidelines		Price
E-pub single user	Item #10890-311-09	\$215
E-pub 2-4 users	Item #10890-312-09	\$425
E-pub 5-10 users	Item #10890-313-09	\$1,050

Web-based		Price
Single user	Item #10891-321-09	\$215
2-4 users	Item #10891-322-09	\$425
5-10 users	Item #10891-323-09	\$1,050

Survey Tool for Accreditation in Wellness and Health Promotion

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for accreditation must complete the Survey Tool and submit it to NCQA to begin the survey process.

2009 WHP Survey Tool

Single user	Item #10892-321-09	\$485
2-4 users	Item #10892-322-09	\$960
5-10 users	Item #10892-323-09	\$2,385

Technical Specifications for Wellness and Health Promotion

A required resource for anyone involved in collecting, calculating or submitting data for Wellness and Health Promotion. This publication features the complete technical specifications for each measure, including all relevant data elements. It also includes general guidelines for data collection and reporting, detailed instructions on how to perform the necessary calculations and guidelines for sampling.

2011 WHP Technical Specifications (Available August 2010)

E-pub single user	Item #10894-301-11	\$160
E-pub 2-4 users	Item #10894-302-11	\$460
E-pub 5-10 users	Item #10894-303-11	\$1,080

Application for the Accreditation of Wellness and Health Promotion

This application provides all materials required to apply for an NCQA WHP Accreditation Survey and includes pricing information, policies and procedures and the survey agreement.

WHP Application	Price
Item #10893-150-09	Free

CERTIFICATION

Credentials Verification Organizations (CVO)

The 2010 CVO Standards and Guidelines and Survey Tools are effective July 1, 2010.

Standards and Guidelines for the Certification of CVOs

This publication outlines standards and features explanations and examples of how to meet the standards, scoring guidelines, points and certification outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2010 CVO Standards and Guidelines		Price
Print edition	Item #10451-100-10	\$180
E-pub single user	Item #10274-311-10	\$200
E-pub 2–4 users	Item #10274-312-10	\$390
E-pub 5–10 users	Item #10274-313-10	\$960
Web-based		Price
Single user	Item #10820-321-10	\$200
2–4 user	Item #10820-322-10	\$390
5–10 user	Item #10820-323-10	\$960

Survey Tool for the Certification of CVOs

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for certification must complete the Survey Tool and submit it to NCQA to begin the survey process.

2010 CVO Survey Tool		Price
Web-based		Price
Single user	Item #10821-321-10	\$295
2–4 users	Item #10821-322-10	\$525
5–10 users	Item #10821-323-10	\$1,210

Application for the Certification of CVOs

The application provides all materials required to apply for an NCQA CVO Certification Survey and includes pricing information, policies and procedures and the survey agreement.

CVO Application	Price
Item #10006-150-97	Free

Health Information Products (HIP)

The 2009 HIP Standards and Guidelines and Survey Tools are effective October 1, 2009.

Standards and Guidelines for the Certification of Health Information Products

This publication outlines the standards and features explanations and examples of how to meet the standards, scoring guidelines, points and certification outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2009 HIP Standards and Guidelines		Price
E-pub 1–4 users	Item #10840-311-09	\$160

Survey Tool for the Certification of Health Information Products

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for certification must complete the Survey Tool and submit it to NCQA to begin the survey process.

2009 HIP Survey Tool		Price
1–4 users	Item #10841-321-09	\$485



Application for the Certification of HIPs

The application provides all materials required to apply for an NCQA HIP Certification Survey and includes pricing information, policies and procedures and the survey agreement.

HIP Application	Price
Item #10842-150-09	Free

PHQ Application

The application provides all materials required to apply for an NCQA PHQ Survey and includes pricing information, policies and procedures and the survey agreement.

PHQ Application	Price
Item #10361-150-08	Free

Physician and Hospital Quality (PHQ)

The 2008 PHQ Standards and Guidelines and Survey Tool are effective October 1, 2008.

PHQ Standards and Guidelines

This publication outlines standards and features explanations and examples of how to meet the standards, certification scoring guidelines, points and certification outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2008 PHQ Standards and Guidelines	Price
E-pub 1–4 users Item #10359-311-08	\$215

PHQ Survey Tool

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations must complete the Survey Tool and submit it to NCQA to begin the survey process.

2008 PHQ Survey Tool	Price
Web-based	
1–4 users Item #10356-321-08	\$485

Utilization Management (UM)/ Credentialing (CR)

Note: If you purchased Physician Organization (PO) previously, this is the publication for you.

The 2011 UM/CR Standards and Guidelines and Survey Tool are effective July 1, 2011.

Standards and Guidelines for the Certification of UM/CR

This publication outlines the standards and features explanations and examples of how to meet the standards, scoring guidelines, points and certification outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2011 UM/CR Standards and Guidelines (Available December 2010)	Price
Print edition Item #10291-100-11	\$240
E-pub single user Item #10259-311-11	\$235
E-pub 2–4 users Item #10259-312-11	\$660
E-pub 5–10 users Item #10259-313-11	\$1,450
Web-based	Price
Single user Item #10806-321-11	\$235
2–4 users Item #10806-322-11	\$660
5–10 users Item #10806-323-11	\$1,450

CERTIFICATION/DISTINCTION

Survey Tool for the Certification of UM/CR

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for certification must complete the Survey Tool and submit it to NCQA to begin the survey process.

2011 UM/CR Survey Tool (Available December 2010)

Web-based		Price
Single user	Item #10808-321-11	\$510
2-4 users	Item #10808-322-11	\$1,010
5-10 users	Item #10808-323-11	\$2,250

Application for the Certification of UM/CR

The application provides all materials required to apply for an NCQA UM/CR Certification Survey and includes pricing information, policies and procedures and the survey agreement.

2010 UM/CR Application	Price
Item #10291-150-01	Free

2011 UM/CR Application (Check website for availability.)	Price
Item #10291-150-11	Free

NEW! Multicultural Health Care (MHC)

The 2010 MHC Standards and Guidelines and Survey Tools are effective July 1, 2010.

Standards and Guidelines for Distinction in MHC

This publication outlines the standards and features explanations and examples of how to meet the standards, scoring guidelines, points and distinction outcomes. Eligibility requirements, application information and policies and procedures are also included.

Note: Purchase of the Standards and Guidelines is not necessary if you are purchasing the Survey Tool.

2010 MHC Standards and Guidelines

		Price
E-pub single user	Item #10900-311-10	\$200
E-pub 2-4 users	Item #10900-312-10	\$390
E-pub 5-10 users	Item #10900-313-10	\$960

Survey Tool for the Distinction in MHC

The Survey Tool includes all information needed to prepare and submit materials for an NCQA Survey. Organizations applying for Distinction must complete the Survey Tool and submit it to NCQA to begin the survey process.

2010 MHC Survey Tool

Web-based		Price
Single user	Item #10901-321-10	\$295
2-4 users	Item #10901-322-10	\$525
5-10 users	Item #10901-323-10	\$1,210

Application for the Distinction in MHC

The application provides all materials required to apply for an NCQA MHC Distinction Survey and includes pricing information, policies and procedures and the survey agreement.

2010 MHC Application	Price
Item #10902-150-10	Free

Abbreviated Standards for Distinction in MHC

A high-level overview of the MHC program, including standards and element information. This document is provided for information-only. If pursuing Distinction, purchase the MHC Survey Tool.

2010 MHC Standards (Abbreviated)	Price
Item #10900-301-10	Free

RECOGNITION

Back Pain Recognition Program (BPRP)

BPRP identifies physicians who provide high-value, patient centered care for back pain. The program is designed with the understanding that patients can seek care from various types of practitioners—primary care, spine specialists, chiropractors—for treatment of an episode of back pain. Accordingly, the measures reflect that physicians should provide high-quality care from the outset of patient contact, and understand and consider previous treatment history to help avoid inappropriate treatment.

Back Pain Recognition Program Package

This web-based package includes *2007 BPRP Requirements*, as well as the *2007 BPRP Data Collection Tool* and application. The package contains all the information necessary to apply for Recognition.

Note: Use of the Data Collection Tool is required for Recognition.

2007 BPRP Package	Price
Item #10835-151-06	\$80

Diabetes Recognition Program (DRP)

Reward quality through the Diabetes Recognition Program (DRP)—a national program developed by the American Diabetes Association (ADA) and NCQA that recognizes physicians, physician groups and other providers who provide high-quality diabetes care. Those who earn Recognition receive the benefit of having their names highlighted in provider directories, special referrals from ADA and local media attention recognizing their achievement. Health plans can benefit by supporting the DRP for their network providers and implementing Recognition as a network-wide quality initiative.

Diabetes Recognition Package

This web-based package includes the *2009 DRP Requirements*, as well as the *2009 DRP Data Collection Tool* and application. The package contains all the information you need to apply for Recognition.

2009 DRP Package	Price
Item #10832-321-09	\$80

Heart/Stroke Recognition Program (HSRP)

The American Heart Association (AHA), American Stroke Association (ASA) and NCQA launched the Heart/Stroke Recognition Program (HSRP)—a national program that recognizes physicians and physician groups who provide high-quality cardiovascular or stroke care. The HSRP uses evidence-based clinical measures to evaluate physician performance. Physicians who successfully complete the program are highlighted in provider directories and gain local media attention recognizing their achievement. Health plans can benefit by supporting the HSRP as a quality initiative for their network physicians.

Heart/Stroke Recognition Package

This web-based package includes the *2006 HSRP Requirements*, as well as the *2006 HSRP Data Collection Tool* and application. The package contains all the information you need to apply for Recognition.

2006 HSRP Package	Price
Item #10826-321-06	\$80

Physician Practice Connections (PPC)

The Physician Practice Connections (PPC) Program recognizes practices that have superior systems in place for connecting patients and doctors with information and each other. Use of electronic medical records (EMR) is not required to achieve Recognition.

Survey Tool for PPC Recognition

The Survey Tool is an invaluable resource containing all the information you need to apply for Recognition. It incorporates the Standards and Guidelines and facilitates collecting information about how the practice meets the standards.

Note: Use of the Survey Tool is required for practices applying for Recognition. The Survey Tool includes the complete Standards and Guidelines.

2006 PPC Survey Tool	Price	
1–4 users	Item #30001-322-06	\$80

RECOGNITION/DATA AND REPORTS

Physician Practice Connections® (PPC) — Patient-Centered Medical Home™ (PPC-PCMH)

NCQA's Physician Practice Connections® — Patient-Centered Medical Home™ (PPC-PCMH) Recognition Program recognizes physician practices functioning as medical homes by using systematic, patient-centered and coordinated care management processes.

Physician Practice Connections — Patient-Centered Medical Home Survey Tool

This web-based product includes the Standards and Guidelines (the requirements to meet the standards, as well as explanations and examples). The Survey Tool also includes all the information and the electronic Data Collection Tool needed to prepare and submit materials to begin the process for Recognition.

2008 PPC-PCMH Survey Tool	Price
1–4 users Item #30003-322-08	\$80

Application for Physician Practice Connections — Patient-Centered Medical Home

The online application includes an overview of the PPC-PCMH Program, eligibility criteria and pricing information.

PPC-PCMH Online Application	Price
Item #30002-150-10	Free

Physician Practice Connections — Patient-Centered Medical Home Standards and Guidelines

The Adobe PDF version of the *PPC-PCMH Standards and Guidelines* includes the requirements to meet the standards, as well as explanations and examples.

Note: Use of the Survey Tool is required for Recognition.

2008 PPC-PCMH Standards and Guidelines	Price
Single user Item #30003-322-08	Free

Quality Compass®

NCQA's Quality Compass is an indispensable tool for selecting a health plan, conducting competitor analysis, examining quality improvement and benchmarking managed care plan performance in health conditions most important to you.

Quality Compass 2010: Health Care Data to Power Change

Quality Compass provides full access to plan-specific, comparative and descriptive information on the performance of health maintenance organizations (HMO), point-of-service (POS) plans and preferred provider organization (PPO) plans across the U.S., in addition to national and regional performance benchmarks. This interactive tool provides online access to HEDIS and CAHPS data on more than 400 commercial and 100 Medicaid public reporting health plan products, generating customized reports with graphic displays and extracting content into Microsoft® Excel with the optional Data Exporter. Up to three years of trended data for commercial and Medicaid plans are available for analyzing performance over time. The cost of Quality Compass varies by format and number of users.

For more information about pricing and to view a product demonstration video, visit www.ncqa.org/QualityCompass.aspx.

DATA AND REPORTS

NEW! Quality Compass: RRU + Quality Index (Commercial)

As health care costs continue to skyrocket, health plans, employers and consumers want to know: *Are we getting the most return for our health care dollars?*

This year, NCQA introduces **Quality Compass: RRU + Quality Index (Commercial)**, which incorporates Relative Resource Use (RRU) measures that capture the total resources used by health plans to treat patients with select chronic conditions and aligns their utilization with their HEDIS quality results. This dataset provides detailed information that allows for the comparison of plans based on both value and quality.

Measures focus on traditionally high-cost conditions: asthma, cardiovascular conditions, COPD, diabetes, and hypertension.

Populations captured in the resource use measures are risk adjusted for clinical category, presence of comorbidities, age and gender so that plans that serve an older or sicker population are not at a disadvantage when compared to other plans that serve younger and healthier populations.

2010 Commercial licenses are scheduled for release in July 2010 and include access to RRU + Quality Index (Commercial), which is scheduled for release in late October 2010. Learn more by contacting informationproducts@ncqa.org

Data Licensing Opportunities

NCQA offers licenses for its health plan performance (HEDIS and CAHPS) data, accreditation results, physician recognition programs and HEDIS technical specifications. Offered in various formats, these data licenses are designed for consultants, employers, software vendors, survey vendors and other health care stakeholders for various uses, including self-built report cards and benefit communication tools. They are the perfect complement to any health care research or quality improvement initiative. Available licensing options include:

Health Plan Performance

- NCQA Accreditation and Certification results, including Wellness & Health Promotion (WHP) and Physician and Hospital Quality (PHQ)
- Healthcare Effectiveness Data and Information Set (HEDIS):
 - Health plan performance results and specifications
 - Electronic Coding Table (ECT) specifications
- Pharmacy Quality Alliance (PQA) measure specifications
- Consumer Assessment of Healthcare Providers and Systems (CAHPS):
 - Health plan satisfaction results and specifications
 - Blinded commercial or Medicaid member-level data using the HEDIS/CAHPS 4.0H Adult Survey
 - Adult and Child CAHPS benchmark data: Total number of completed surveys; national percentiles for the global proportion and composite means for all composite and rating measures; and frequency of survey item responses

Recognition Programs

NCQA offers licenses for its performance data on physicians, practices and other providers for integration with the customer's directory listings and tools. Data include identifying information with NCQA Recognition Program status for the Back Pain Recognition Program (BPRP), Diabetes Recognition Program (DRP, ADA), the Heart/Stroke Recognition Program (HSRP, AHA/ASA), Physician Practice Connections (PPC) and Physician Practice Connections-Patient-Centered Medical Home (PPC-PCMH)* for over 15,000 recognized providers.

* Option to include element level scoring data for each of the PCMH standards.

DATA AND REPORTS/ADDITIONAL PUBLICATIONS

Quality Dividend Calculator™ – Compass Edition

The Quality Dividend Calculator™ (QDC) – Compass Edition estimates the savings in dollars for employee populations that are achieved through improved productivity and lower absenteeism, based on health plan selection. By filtering plan-specific HEDIS results against user-entered population characteristics as well as labor and wage data, the QDC – Compass Edition demonstrates the value of selecting high-quality and accredited health plans.

This year, the QDC – Compass Edition includes PPO performance data for the first time, providing more insight on NCQA-accredited PPO plans for QDC users. While the QDC – Compass Edition is available for free to commercial Quality Compass® users, it is also available in a standalone version that can be purchased separately. Many organizations are taking advantage of this tool to arm account managers and sales personnel with valuable data that demonstrates the importance of plans' achievements in quality. A free version of the QDC with general comparisons (e.g., average Accredited plan vs. average non-Accredited plan) is available at www.ncqacalculator.com.

For more information about purchasing the standalone edition of the QDC, visit www.ncqa.org/publications or email NCQA at informationproducts@ncqa.org.

Additional Publications

State of Health Care Quality Report

Produced every year since 1997, the State of Health Care Quality Report is a thorough analysis and interpretation of major performance trends in managed care over the past year. The report looks at clinical quality and member satisfaction information based on HEDIS and CAHPS data submitted by hundreds of health plans across the country. It includes national and regional performance averages and benchmarks on measures ranging from childhood immunization rates to member satisfaction with choice of doctor. The report explains the significance of changes in these benchmarks and trends and is available online at no cost.

**2010 State of Health Care Quality Report
(Print Edition Available November 2010)**
Item #80010-100-10

Price
\$60

Health Care Quality Improvement Studies in Managed Care Settings—Design and Assessment: A Guide for State Medicaid Agencies

Originally developed for state Medicaid agencies, this manual presents a framework for designing, implementing and evaluating focused quality improvement studies of health care services. It reviews basic concepts of quality assessment, quality assurance and quality improvement, and presents a 10-step approach to study design and implementation with studies of mammography, childhood immunizations, prenatal care and diabetes. Bibliography included.

Health Care Quality Improvement
Item #40011 (published 1994)

Price
\$75

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