**Health Plan Accreditation 2013**

**Frequently Asked Questions**

### Evaluation Options

**What is the difference between an Evaluation Option and a survey?**

An Evaluation Option is defined by a distinct combination of requirements (standards and measures), scoring, statuses and length of accreditation. Health Plan Accreditation (HPA) 2013 has three Evaluation Options: Interim, First and Renewal. Plans are surveyed under one of the three evaluation options based on eligibility.


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<th>Interim</th>
<th>First</th>
<th>Renewal</th>
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<tbody>
<tr>
<td>Full Survey</td>
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<td>Follow-Up Survey</td>
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<td>Resurvey</td>
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<td>Add-On Survey</td>
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<td>Expedited Survey</td>
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**How are the Interim Option and the First Evaluation Option different?**

The Interim Evaluation Option has half of the number of elements as the First Evaluation Option, focuses on policies and procedures and is valid for 18 months.

The First Evaluation Option is valid for 36 months and focuses on policies and procedures, initial measurement and analysis of programs and file review.

Plans going through the Interim Evaluation Option can earn Interim status (HEDIS/CAHPS reporting is not required); plans going through the First Evaluation Option can earn either Provisional or Accredited status (if they are not scored on HEDIS/CAHPS).

Reporting is required during the third annual HEDIS reporting cycle for organizations going through the First Evaluation Option, which also gives plans the option to be scored on HEDIS/CAHPS results, allowing them to earn an accreditation status higher than Accredited.

**How are the First Evaluation Option and the Renewal Evaluation Option different?**

The First Evaluation Option is for plans without existing NCQA Accreditation, and plans may, but are not required to report HEDIS/CAHPS until the third annual HEDIS reporting cycle. HEDIS/CAHPS reporting and scoring are required at the time of survey submission and annually thereafter for the Renewal Evaluation Option.
In what order do organizations progress through the Evaluation Options?

For the Interim Evaluation Option: Interim, to First, to Renewal.

For the First Evaluation Option: First to Renewal.

After a plan progresses to the Renewal Evaluation Option, all subsequent surveys will be for that Evaluation Option, unless the accreditation lapses for more than two years.

For which Evaluation Options are organizations eligible if their accreditation has expired?

A plan whose accreditation status has expired or has been withdrawn for less than two years is eligible for the Renewal Evaluation Option with a 24-month look-back period.

A plan whose accreditation expired more than two years ago is eligible for accreditation through the Interim Evaluation Option or First Evaluation Options with a six-month look-back period.

Which Evaluation Option should plans choose if they have not been accredited by NCQA?

Plans new to NCQA can earn accreditation through the Interim Evaluation Option or the First Evaluation Option—plans decide which Evaluation Option fits their needs. The two options give plans flexibility to choose based on their readiness and the comprehensiveness of their services.

Which Evaluation Option should plans with New Health Plan accreditation apply for next?

Plans with NHP accreditation must apply for the Renewal Evaluation Option with a 12-month look-back period.

Must NCQA-Accredited plans go through the Renewal Evaluation Option?

Yes. To maintain its accreditation, an NCQA-Accredited plan must go through the Renewal Evaluation Option.

Eligibility

How long must a plan be in operation before applying for NCQA Accreditation?

Plans may apply for the Interim Evaluation Option and the First Evaluation Option at any time, regardless of how long they have been in operation.

For the Interim Evaluation Option, plans must show evidence that they met the requirements before the survey start date.

For the First Evaluation Option, plans must show that they met the requirements for the six months before their survey date.
Accreditation Surveys

How do plans add an Exchange accreditation to an existing accreditation?

Plans submit an application identifying whether their Exchange product will be operated the same as the accredited product. If 70 percent of the Interim Evaluation Option elements are the same, the Exchange product line receives automatic accreditation under the plan’s accreditation. If the majority of the operations are not the same, plans undergo a streamlined Add-On Survey with a six-month look-back period.

How soon will plans be able to earn accreditation for their Exchange product line?

NCQA-Accredited plans can earn accreditation for their Exchange product line as early as February 2013. Plans without previous NCQA Accreditation can apply for the Interim Evaluation Option as early as September 2012 and have their Exchange product line accredited as early as October 2013.

May plans decline the accreditation status earned for a Full Survey?

Yes. A plan surveyed under the First Evaluation Option may decline the accreditation status (without penalty) at the completion of the survey, within 30 calendar days from receipt of its results. A plan that declines its accreditation status has the option to undergo a Follow-Up Survey within 12 months of receipt of its Full Survey results.

What is the Resurvey timeline for plans that score less than 85 percent of the possible points during the First Evaluation Option or the Renewal Evaluation Option?

A plan that scores less than 85 percent of the possible standards points must undergo a Resurvey within 12 months of the accreditation decision. The Resurvey look-back period is six months.

May a plan that was denied accreditation reapply for accreditation in less than a year from the date of the Denied status?

Yes, a plan may apply for a new Accreditation Survey (called an “Expedited Survey”) in less than a year under specific circumstances, including:

- The plan was denied accreditation under the Interim Evaluation Option and may reapply after three months.
- The organization demonstrates to NCQA’s satisfaction that the issues identified in the original survey can be corrected within a six- to nine-month time frame as a result of the organization’s activity.
- Correction of the issues would raise the organization’s accreditation status in a new survey.

To qualify for an Expedited Survey, a plan must submit a written request listing the steps it has taken to address the substantive issues that led to its Denied Accreditation status.
## Status and Scoring

**Does NCQA publish denials for plans undergoing the Interim Evaluation Option or the First Evaluation Option?**

No. NCQA does not publish denials for plans undergoing the Interim Evaluation Option or the First Evaluation Option.

**Is it possible for plans to score higher than Accredited status during any First Evaluation Option years?**

Yes. Plans that notify NCQA that they want to be scored on HEDIS/CAHPS measures by December 31 (before the June HEDIS reporting date) may score higher than Accredited status.

**How are plans scored that do not report HEDIS/CAHPS?**

Standards-only accreditation scoring is based on 50 points.

**Will currently accredited plans be scored 50 points for HEDIS/CAHPS and 50 points for standards?**

No. Recalculation of accreditation scores is generally made against the HEDIS measures and point values in place at the time of the organization’s last Full Survey.

## HEDIS Reporting and Scoring

**Plans that are not scored on HEDIS/CAHPS are capped at Accredited status. Will NCQA grandfather plans that earned Commendable status but were not scored on HEDIS/CAHPS?**

Yes. The Commendable status will remain valid until the plan’s existing accreditation status expires.

**Will NCQA review and score HEDIS/CAHPS measures if a plan submits them for the Interim Evaluation Option?**

No. HEDIS/CAHPS results will not be used to evaluate plans seeking accreditation through the Interim Evaluation Option.

**Are HEDIS/CAHPS measures reported during the third annual HEDIS reporting cycle scored for the First Evaluation Option?**

No, unless a plan opts for HEDIS/CAHPS scoring.

**When must plans report HEDIS/CAHPS measures if they are going through the First Evaluation Option?**

Plans report HEDIS/CAHPS measures during the third annual HEDIS reporting cycle of their accreditation status. For example, if an organization receives a status in September 2014, it must submit audited HEDIS/CAHPS results in June 2017.
How does NCQA differentiate among plans that are accredited through the Renewal Evaluation Option and plans that are accredited through the First Evaluation Option but do not report HEDIS/CAHPS measures?

Plans that do not report HEDIS/CAHPS are capped at Accredited status. The list of plans that report HEDIS/CAHPS (or do not report) is available on NCQA’s publicly reported Health Plan Report Card.

**Survey Process**

**Will NCQA conduct onsite surveys (at the health plan) for the Interim Evaluation Option?**

No. NCQA conducts onsite surveys for the First and Renewal Evaluation Options, but not for the Interim Evaluation Option.

**Standards and Guidelines**

Several elements in the First Evaluation Option require annual evaluation, even though the Evaluation Option has a six-month look-back period for all other elements. How do plans meet this annual requirement?

NCQA will expand the look-back period if it is necessary for plans to demonstrate that performance requirements are met and to produce an adequate sample for file reviews. For annual requirements, plans must complete the activity at least once during the prior year.

**CR 7: Recredentialing Verification was eliminated for Accreditation 2013. Is there a recredentialing requirement?**

Yes. Verification requirements from CR 7 were merged into CR 3, Elements A–C.

**Where can plans get information about standards points, HEDIS/CAHPS points for accreditation and reporting categories points?**


**To which product lines and evaluation options do the Member Connections (MEM) standards apply?**

MEM standards apply only to commercial product lines for the First Evaluation Option and the Renewal Evaluation Option.