



Annual Reporting for PCMH 2014 Level 3 Recognized Practices

As a PCMH 2014 level 3 Recognized practice, you can maintain your Recognition through an Annual Reporting process. You have already shown that the structure and processes of a medical home are in place, so demonstrating that you have maintained supporting activities should not be difficult or require a lot of additional work.

If you have done a good job of maintaining your PCMH concepts and meet the Annual Reporting requirements, it should take you 25–40 hours or less to complete the Annual Reporting process.

ANNUAL REPORTING VS. EARNING PCMH 2014 RECOGNITION

Below is a comparison of the steps required to earn initial PCMH Recognition and how it compares to Annual Reporting.

STEP	EARNING INITIAL RECOGNITION PCMH 2014	PCMH ANNUAL REPORTING
Number of requirements	Report on 27 elements (6 must-pass elements). 100 possible points.	Attest to current PCMH Standards and Guidelines. Report on 9 requirements.
What NCQA wants to see	Minimum of 6 must-pass elements, plus optional elements (60–85 points for Level 2 Recognition; 85–100 points for Level 3 Recognition). Documented processes, data, reports, screenshots, examples.	Answer questions about how your practice is maintaining PCMH activities associated with each concept. When applicable, provide evidence and reports.
Reporting process	Manual upload of all supporting evidence in ISS. Renewing practices are required to show they have met the requirements for designated elements for at least two years. No virtual review options.	Electronic checklist or data entry in Q-PASS. Minimal documentation upload. Flexibility with types of evidence.
Document review process	Extensive review by NCQA.	No review (unless selected for audit).

WHAT DO YOU DEMONSTRATE DURING ANNUAL REPORTING?

Your practice will submit data and evidence on nine requirements in the six PCMH concepts:

- Team-Based Care and Practice Organization.
- Knowing & Managing Your Patients.
- Patient-Centered Access and Continuity.
- Care Management and Support.
- Care Coordination and Care Transitions.
- Performance Measurement and Quality Improvement.

Your practice will also submit required data and responses on a special topic (e.g., behavioral health), even if it is doing little or nothing on the topic. The special topic is not scored.

TYPES OF EVIDENCE

Examples of evidence that prove that a practice is continuing to function as a PCMH include:

- Attestation (answer questions in Q-PASS).
- Data entered in Q-PASS (e.g., numerator, denominator, reporting period).
- Examples, descriptions, documents, explanations.
- Tools the practice uses to meet requirements (e.g., patient experience surveys).
- QI Worksheet (for quality and performance measures for concept 6).
- Reports (aggregated data or EHR system-generated reports).

Your practice **will NOT have to:**

- Provide evidence for every requirement.
- Upload documented processes.
- Provide the data to support numerator and denominator questions.
- Run new reports to fulfill date range minimums (reporting dates are flexible).
- Take screenshots for evidence of implementation.

For helpful checklists and additional details on preparing for Annual Reporting, download the Annual Reporting Preparation Guide at ncqa.org/arprepguide.



TIP: Checking a box, a simple numerical or yes/no answer is enough for questions that require attestation. There is no need to spend time pulling reports or other documentation.



The National Committee for Quality Assurance (NCQA) is a 501(c)(3) not-for-profit that uses measurement, transparency and accountability to improve health care. NCQA creates standards, measures performance and highlights organizations that do well. All this helps drive improvement, save lives, keep people healthy and save money.

1100 13th Street NW | Third Floor | Washington, DC 20005
www.ncqa.org

NCQA1130-0619