

Improving Outcomes for Individuals with Complex Needs

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Who We Are

Private, independent non-profit health care quality oversight organization founded in 1990

MISSION

To improve the quality of health care.

VISION

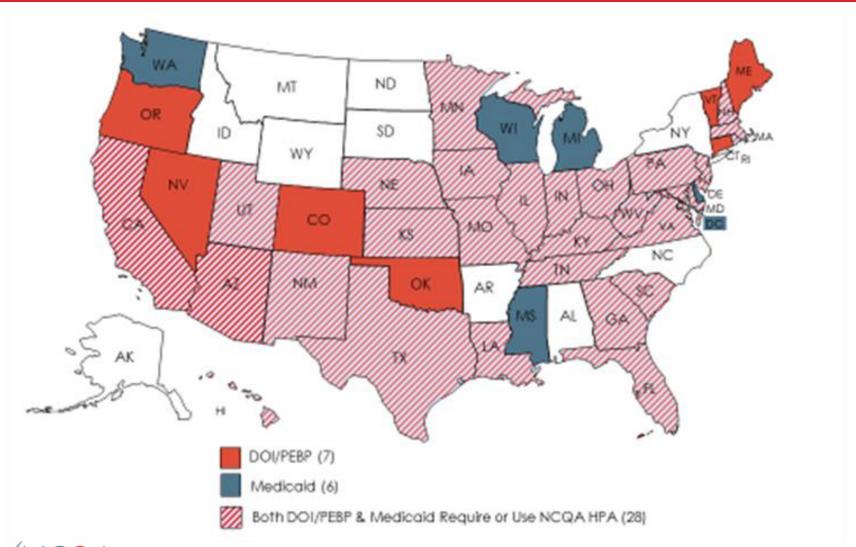
To transform health care through quality measurement, transparency, and accountability.

ILLUSTRATIVE PROGRAMS

- * HEDIS Healthcare Effectiveness Data and Information Set
- * Health Plan Accreditation * Multicultural Healthcare Distinction
- * Disease Management *Utilization Management & Credentialing Certification
- * Wellness & Health Promotion Accreditation * Health Plan Rankings * Case Management Accreditation
 - *ACO Accreditation * Patient-Centered Medical Home * Patient-Centered Specialty Practice
 - * Patient-Centered Connected Care * Diabetes Recognition * Heart/Stroke Recognition



41 States Require or Use NCQA Health Plan Accreditation (June 2016)





NCQA's Approach

Standards guide design of integrated person-driven care systems

Process measures assess implementation Outcome measures assess goal attainment and persondriven outcomes

Best practices aid implementation

Evaluating the quality of person-driven care requires a special approach



LTSS Accreditation Builds Capability

- Coordination of person-centered LTSS
- Collaboration between CBOs and MCOs
- Measurement and improvement





Aligned Expectations for Quality Across Three NCQA Programs

Accreditation of Case Management for LTSS

 Evaluation for community-based organizations (CBOs) or standalone MLTSS plans

Health Plan Accreditation (HPA) w/ LTSS Distinction

- Module for comprehensive MLTSS plans
- May be completed as part of Accreditation Survey

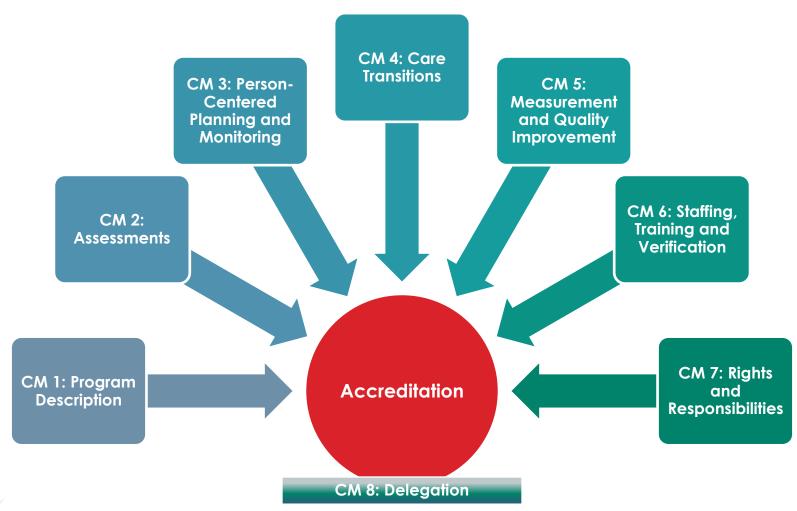
MBHO Accreditation w/ LTSS Distinction

 Aligned with framework for HPA



Case Management-LTSS Accreditation







Program Description

LTSS 1

 Requires organizations to use current and emerging evidence in development, ongoing review and updating of their programs.



Element A

Program Description



Element B

Systematic Review of Evidence and Professional Standards



Element C

Program Content Consistent With Evidence and Professional Standards



Assessment Process

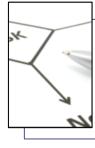


• Requires organizations to have a systematic process for assessing the needs of the population it serves, and performs assessments relevant to the individuals served.



Element A

Population Assessment



Element B

Assessment of Health, Functioning and Communication Needs



Element C

Resource Assessments



Element D

Comprehensive Assessment Implementation



Person-Centered Care Planning and Monitoring



• Requires organizations to coordinate person-centered services for individuals through the development and individualized case management plans and monitors progress against those plans.



Element A

Person-Centered Assessments



Element B

Person-Centered
Care Planning Process



Element C

Implementing the Care Planning Process



Care Transitions



 Requires organizations to have a process for managing care transitions, identifying problems that could cause unplanned transitions and preventing unplanned transitions, when possible.



Element AProcess for Transitions



Element BReducing Unplanned
Transitions for Individuals



Element CReducing Unplanned
Transitions for the Population



Measurement and Quality Improvement



 Requires organizations to measure and work to improve individual experience, program effectiveness and active participation rates.



Element A

Experience With Case Management



Element B

Track and Analyze the First Measure of Effectiveness



Element C

Track and Analyze the Second Measure of Effectiveness



Element D

Track and Analyze the Third Measure of Effectiveness



Element E

Action and Remeasurement



Measurement and Quality Improvement (cont'd)



 Requires organizations to measure and work to improve individual experience, program effectiveness and active participation rates.



Element F

Transparency in Reporting Outcomes



Element G

Active Participation



Element H

Improving Participation Rates



Element I

Transparency in Reporting Participation



Staffing, Training and Verification



 Requires organizations to define staffing needs, provide staff with ongoing training and oversight and verify health care staff credentials, where applicable.



Element ADefining Staffing Needs



Element B

Qualifications and Assistance for LTSS Providers



Element CProcess for Staff Interactions



Element DInitial Training for Staff



Element E

Monitoring and Training for Staff



Rights and Responsibilities



 Requires organizations to communicate their commitment to their rights of individuals and their expectations of individuals' responsibilities.



Element A

Critical Incident Management System



Element B

Individuals' Rights



Element C

Expectations of Individuals



Element D

Handling Complaints from Individuals



Element E

Resolving Complaints



Delegation



 Requires organizations to carefully monitor functions performed by other organizations.



Element A

Written Delegation Agreement



Element B

Provisions for PHI



Element C

Pre-delegation Evaluation



Element D

Review of Case Management Program



Element E

Opportunities for Improvement

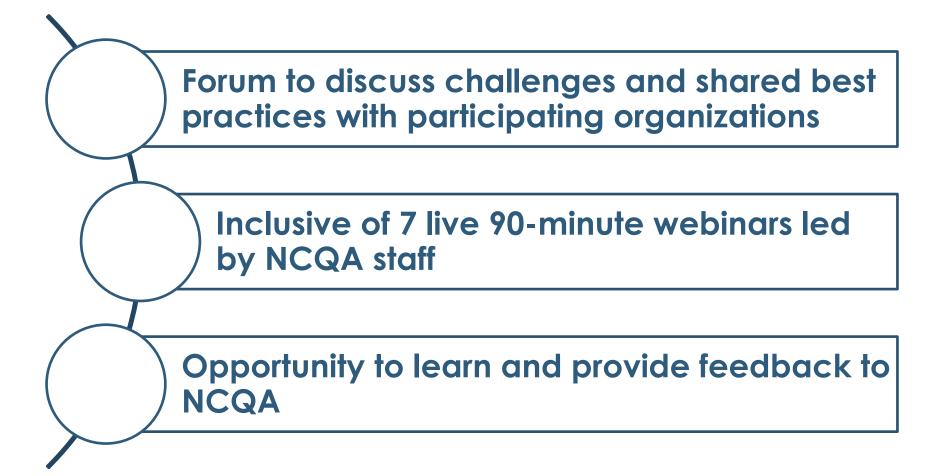


Implementation Guide

- Supports improvement
- Aid to accreditation
- Examples, tools and resources drawn from 10 Learning Collaborative sites
- Available March 2017



LTSS Best Practices Academy





Accreditation Launch

- Standards released July 25
- 33 Early Adopters have signed up
- Evaluations begin January 2017
- Best Practices Academy launches January 2017

http://www.ncqa.org/newsroom/details/ncqa-s-new-accreditation-and-distinction-programs-improve-quality-of-long-term-services-and-supports



Becoming Accredited



Purchase Standards & Guidelines: The Case Management for LTSS standards and guidelines detail program requirements and the documentation required to become accredited.



Download Application Pack, Complete & Send to NCQA: NCQA reviews application, approves eligibility and schedules survey dates.



Purchase Survey Tool: Complete readiness evaluation using online survey tool.



Submit Completed Survey Tool: Use the survey tool to submit the completed survey and documentation on the date survey is scheduled to start.



Offsite Review: NCQA evaluates non-file review elements off-site via survey tool.



Becoming Accredited (cont'd)



Onsite Survey & Preliminary Report: NCQA conducts an onsite survey to evaluate the file review elements and complete the preliminary report. At the completion of the evaluation, NCQA performs a closing presentation with staff that identifies overall strengths and opportunities found in the review.



Review Preliminary Report: In general, the organization receives the preliminary report in two weeks at which time they have an opportunity to review and may provide comments to NCQA.



Review Oversight Committee: NCQA's Review Oversight Committee reviews report and makes accreditation decision.



Receive Decision: In general, you will receive your final report within 34 days of the closing presentation and learn whether you are the newest NCQA-Case Management for LTSS accredited organization.



Thank you