

# S1EpC01-NCQA Accreditation

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DILSA: Welcome to Under the Microscope, brought to you by the Right Credentials Network and your host, Dilsa Bailey, a certified medical services professional for over 20 years. Under the microscope is where we will examine the many layers of the medical services profession using the acronym SCOPE. That's S.C.O.P.E, which stands for S services for Onboarding and Maintaining providers in a health care organization. C. Credentialing and privileging providers to ensure that they are competent and qualified enough to treat patients safely in a health care organization. O. Operations and data management utilizing the health care organizations resources efficiently and overseeing the security of its data promoting patient and provider safety. And P. Provider enrollment affiliating providers with health plans and government payers so that the providers can get paid appropriately, and E. Evaluating and monitoring provider performance to ensure patient safety. As a medical services professional in the health care industry, our primary focus is to promote patient safety. Though we do a lot, we can't accomplish this on our own. It takes a village to collaborate. That's why this podcast will also include the contributions of our healthcare partners with the same objectives. So stay tuned to hear from those other stakeholders in the health care industry, too. Joining us, in addition to medical services, professionals will be experts in risk, legal, revenue cycle quality and more. So stay tuned. Keep us under the microscope so we can help expose all the little details of the medical services profession. We want you to remember how valuable you are to the health care industry. If you're watching this on YouTube, please subscribe. Drop us a like and hit the bell so you will know whenever we add the latest episodes. And in the meantime, follow us on LinkedIn or reach out to us at [info@therightcredentials.com](mailto:info@therightcredentials.com). In each episode, we will discuss a separate topic related to the letter in the acronym of the moment, but we won't be discussing it alone as I mentioned. Each episode will feature a guest who will share their expertise providing advice, training, and support wherever possible. So let's get started with the latest episode, and if you like this one, don't forget to subscribe on YouTube and continue to listen to us on your favorite podcast platform. Welcome to Under the Microscope, brought to you by the Right Credentials Network and your host, Bailey. We're here under the microscope to help delve deeper into the many layers of the medical services profession. I want to make sure that everyone knows how crucial the medical services profession is, and I want us to be able to collaborate with each other a lot better. And I know that we can do this by talking. And I'd like to talk to as many professionals in the health care system or in an industry as possible. But today we're going to focus on S.C.O.P.E, our acronym for services, Credentialing and Credentialing and privileging operations and data management, provider enrollment, and evaluating and maintaining and monitoring provider performance.

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So with that said, we're going to focus on C, credentialing and privileging. I'm not going to talk too much about privileging today, but we're going to talk about credentialing. Credentialing can be looked at from different perspectives dependent on the healthcare organization type, but it's all pretty much the same. It's just that some areas may some organizations, may require additional information than more information than what the other one would require.

4:17

For instance, a health plan may not require as many details to collect and verify as a hospital may, because the hospital would include privileging and peers and other items that they would need for in-service care.

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For credentialing, though it's all pretty much the same process. But again, we're looking at it from different perspectives. So today I want to look at what makes credentialing? What's required when we're going through credentialing? Pretty much. So what defines, um, a complete credentialing file? That would depend on the organization that you're working for. The type of organization they may have internal requirements. As I mentioned, the hospital may have more than the health plan, but they're also going to have to meet other requirements, like CMS regulations for any Medicare or Medicaid products that they use. They may have to meet state regulatory requirements because each state has their own unique set of requirements. And then, of course, they'll want to show how qualified they are to attract patients to their organization. So they want to meet a benchmark. And that benchmark might be set by an accrediting agency. Now the accrediting agencies are...Not too many accrediting agencies, but there are enough that you know about, especially if you are in a health plan. You would know about the National Committee for Quality Assurance, NCQA. If you're with the health plan, or maybe you're in a delegated arrangement with a health plan, and you would know about NCQA accreditation, too, because you would have to meet those guidelines. I've brought on a guest to talk to us about that today. She's a subject matter expert in NCQA because she is an NCQA accreditation consultant. And I'm going to introduce you to her and let her tell you a little bit about herself. Her name is Jana Altieri. Jana. Welcome to Under the Microscope. How are you today?

6:32

JANA: Good. Thank you. Thanks so much for having me on today, Dilsa. I appreciate it. So as Dilsa mentioned, I am an NCQA accreditation consultant. I work for an organization called Managed Care Consulting Pro, I am the Founder, and really focus on helping organizations get through their NCQA accreditation, whether it be for an initial survey or renewal survey. And I work with various organizations from health plans, case management, credentialing, CVOs, the whole gamut of them. So thank you for having me on today and look forward to talking to you.

DILSA: Fantastic. And I'm glad that you have a wide range, just not credentialing. But we're going to focus on credentialing, and perhaps there might be some information that you can give the medical services professionals about how to interact with the other stakeholders in the accreditation process that's within the organization. So let me start by asking you what types of organizations should seek an NCQA accreditation?

JANA: Well, really any organization, healthcare organization that is really aiming to demonstrate their commitment to quality. Um, so, you know, really showing their, you know, that they're patient centered, that they're trying to improve their quality outcomes. Um, there's various different accreditations, as I mentioned, you know, health plan, case management. Um, those that do credentialing, um, might be, uh, you know, credentialing, um, ones that do verification only, uh, or there may be more, broader scope credentialing, um, organizations that would go for the, the specific

accreditation. Um, again, there's other organizations I won't go into detail, but there's a whole host of different programs that NCQA has. But really, it's for those those organizations that really want to demonstrate their commitment to quality.

DILSA: Awesome. Fantastic. Yeah. Um, it's it's fun when they start deciding that they're going to become accredited, or they want to become accredited. Uh, what should they start? Or when should they start preparing for accreditation?

8:41

JANA: Well, I usually like, like to tell my clients it's never too early to begin. Um, it really is specific to the organization, so it depends on how if they're already working within the quality framework, if they're already, you know, working within the NCQA standard. Some you may be doing some things you don't even realize that you're doing that are NCQA standards, because there are standards that are, you know, across the health care, you know, organization. Um, but really, I usually say at least a year to two years, um, give or take. And again, that can really vary with, with, with organizations. Um, but it depends on your business. It depends on your resources, how much staff you have available to assist with that. How if you have your policies and procedures written yet and if you are already working within those NCQA guidelines.

DILSA: Okay. Cool. Now. I meant. Well, I just asked about when if, um. They should consider accreditation. Who should consider accreditation? But there's not just accreditation with NCQA, they also have a certification. So ,who should consider certification as opposed to accreditation?

9:53

JANA: Sure. Well, let me explain this to the two programs because they are a little bit different. Um, the credit the accreditation for credentialing is more of a broader scope. It's a full scope credentialing. Um, so that really entails, um, those that do not just the primary source verification of credentials, but they do the ongoing monitoring. They have a whole quality improvement framework for their program. Um, they're doing their implementing interventions. Um, they have a credentialing committee and a medical director that, you know, leads or is involved in the credentialing program. Um, they do the full credentialing lifecycle. Um, they monitor actions against providers, you know, complaints, adverse events, um, and they do ongoing assessments of providers. So it's a much broader scope. Um, CVO's the certification is focused mainly on, um, the, you know, the primary source certification. There's 11 different certifications that an organization can achieve through NCQA. Um, so it's really on those that are focusing on mostly the verifications usually have a client like a health plan or another organization, health care organization that you know, they are they are doing the credentialing for, um, and also sometimes they may do the ongoing monitoring of sanctions. So it is a different, uh, different in scope. Um, both types of organizations may, as I mentioned, contract with, you know, a health plan, be a client of a health plan or some other sort of health integrated health system. Um, so they're acting as a delegate of that. So it's both similar, similar types of function that they will provide, but much broader scope in terms of the accreditation versus the certification.

DILSA: Okay. So, an organization that some, some large organizations have like centralized verification offices. So, I guess it would be, it would be dependent on whether they also support the

committees and the ongoing monitoring and all that good stuff, as opposed to just, verifying data and sending it out to the other hospitals whether they would want accreditation or certification.

JANA: Right, right. Yeah.

12:04

DILSA: Okay. All right. Um. When should you apply for accreditation or how long should it do? What's your timeframe for renewal? I guess for both. That would be two different questions. But how soon would you apply and what time? What timing should you give yourself before putting that application in for an, for an initial survey?

JANA: So, for an initial one, what I usually recommend is first reviewing on the website the different programs to determine if you're eligible and which one you might be eligible for. And then I recommend setting up a meeting with NCQA, um, to discuss your organization and the different nuances of it. Um, and then they will give you an idea of, you know, whether you are eligible for, you know, which one of the programs. I would say at least a year, maybe more like a year and a half. Um, what is important to know is that for a first survey and initial survey, they have what's called the lookback period. So that is typically six months prior to your survey date. So that lookback period you want to make sure you're in full compliance with all of the different standards prior to that lookback period. So prior to that six months. So you want to think about how much time do you does your organization really need to become prepared prior to that six months. So that's why I say, you know, if you look at the NCQA website, they will say a year. Certainly I've seen organizations do it successfully in a year or under, but I recommend really more like year and a half, you know, even two years sometimes.

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DILSA: Yeah, I recommend that too, not everybody does it. But yeah. Yeah.

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JANA: So that's, that's uh, you know, just give yourself enough time and build in, um, you know, just building that extra layer of the unknown, I guess I should say. Yeah. So.

13:45

DILSA: And then renewal, what is the typical time frame for the renewal application?

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JANA: So typically, it depends on what you've achieved. You know, there's a two year and a two year accreditation and a three year prediction for credentialing based on what your score is. So they typically give you an idea when, um, when you receive that accreditation, you'll receive a letter. Um, then about I think it's about just over a year, about 13 months prior to your, your, uh, the renewal becoming due. Um, they will reach out to you, NCQA, and they will let you know a reminder to submit your application. So you'll have to go through the application, pay another fee, and then get that survey scheduled.

14:24

DILSA: Okay. Alrighty. Great. So, preparation for NCQA, What should they... Well, you mentioned policies and procedures. Um, what else would they. Would you have to have in place? I know with credentialing you really need to have your files in place. But other items, what else would they be looking for? Or how would you want to prepare what you're going to submit? What? What kind of advice would you give someone? Because I know if they're not used to it, it's going to seem overwhelming.

JANA: Sure, sure. Yeah. So, I think that, you know, really the foundation of what NCQA looks for are definitely, as you mentioned, policies and procedures. So what they call the different data sources. And the primary one I would say is, is documented processes. So that can be in the form of policies and procedures, standard operating procedures, desk procedures, workflows, any type of written documentation that will tell NCQA what it is you do and how you do it. Then the other data sources are such things as reports and materials. And then I'll get into files in a minute. But, um, reports different, the different standards have different reports. So they might be like ongoing monitoring logs, your sanctions monitoring, your complaint reports, your adverse event reports. Um, reports can also include credentialing committee minutes. So there's those are very important to keep good minutes. And one thing I'd like to tell my clients is document who says what. It's I mean you can use initials. You can, you know, not include the actual names of the providers. But at the top of your minutes include their specialties and their titles. You want to have practicing providers on your committee. You want to have those that are actually practicing in your network, in your committee. Can't just be internal staff, so you really want to document very good minutes. Um, those will be provided as evidence, especially for credentialing. They really want to see that you are using a thoughtful process when you're reviewing those credentials of practitioners and those practicing providers are weighing in on that, and you're having good discussions as to whether or not you should allow practitioners in your network or allow them to continue practicing, um, other data or data sources. They will review our materials. Um, those could be like practitioner letters, um, newsletters, emails that, uh, practitioner rights statements that you send out, um, provider manuals. Um, and then when you get into delegation that refers to usually, usually the contracts. So the delegation contracts have to have very specific language in them. Um, so those kind of need to be reviewed right up against the standards. Um, and then as you mentioned, files. So file review is something, um, that, you know, NCQA will request um, in advance of the survey, the on-site survey, they will request your files, the file universe. They will then pull a random sample from that, and they will review both initial um, credentialing and recredentialing files. Uh, and they will look for all the different verification sources that you're using, the appropriate sources, and that you're documenting them appropriately and that you're meeting the appropriate timeframes. Um, so that will be your file review. And that's why I say it's so important to get in compliance prior to your six months, because once that six-month period you're in that lookback period, you know, they can pull any file randomly from during that six month time frame. And file review is considered like a must pass element. It's very important to the scoring of the accreditation. So you want to really make sure that your you've got all your processes in line and you know what sources you're using appropriate sources and you're meeting your timeframes.

18:04

DILSA: Awesome. Thank you. That was very comprehensive, I like that.

JANA: Great.

DILSA: I'm sure that's very helpful to the listeners. Oh, okay. Um. You mentioned the must pass. I noticed there's also automatic credit given for some areas. Are there any specifics that you can mention what they may get automatic credit for?

18:24

JANA: Sure. So automatic credit has to do with, you know, delegation. As I mentioned, um, a lot of the credentialing accreditation organizations or the CDOs will be a delegate or act as a delegate to health plan or another organization, which means they will, um, that organization will give authority, um, to the credentialing organization to perform a function on their behalf that meets an NCQA requirement. Um, so if that organization is NCQA certified or accredited, they can help that organization to meet to get automatic credit for certain NCQA standards. So there will be more in the accreditation as a certification, as we talked about earlier, perhaps a little bit more comprehensive. So for the certification, you know, health plan could get automatic credit for those primary source verifications in the file review. Um, they the surveyors won't need to, you know, review the files for that verification. That will be, you know, going to get a checkbox for that. You will pass that. Um, but in, there is more that health plan or other organization can get credit for, uh, if they're contracted or they're delegated to a credentialing accredited, accredited organization. So there's the, you know, some of the ongoing monitoring, um, there's I think about three additional standards that 3 to 3 and a half. There's a couple nuances I won't get into the detail, but within the standards and guidelines, there's an appendix called auto credit and Delegation that you can refer to that really kind of shows the difference between a CVO and accredited organization. So yes, there are additional, um, a couple additional standards that being accredited can help. You can help a health plan or other organization.

20:08

DILSA: Awesome. That's very helpful. Okay. Let's see. What else can I ask you? Oh, here's a good one. Who should be involved in the actual survey?

20:19

JANA: Well, I definitely recommend, um, you know, the frontline, you know, workers, those who do the day to day credentialing, you know, processes should be involved, especially in the file review. They're going to be the ones probably to walk the surveyor through the files. Um, they're going to know exactly what to show them and where, um, the person who's responsible for credentialing overall, usually a manager director should be involved. Um. Call the NCQA. Uh, onsite. Onsite, virtual these days. Um, at least it's still to date. Virtual. Um, you know, usually it starts with an opening conference. Um, and then a closing conference at the end. I usually tell my clients, you know, if they just send out an invite to their internal staff, I, I recommend they involve invite optional attendees, uh, some leadership of various departments that may be, uh, somewhat involved in practitioner networks. They may be provider network or, you know, um, any, any touchpoint that has to do with, for credentialing has to do with practitioners or even even membership, because as you know it, credentialing it does impact overall member satisfaction. I

think it's important for the organization leadership to understand what is involved in an NCQA survey. Um, so they get a little bit of the intro there and then in the closing conference, NCQA will give you a pretty good idea of, of their findings. They won't be final or anything. They have to go to the review oversight committee, but they will give a good summary of their findings. They will talk about the strengths of your organization and then you know what your opportunities for improvement are. So that's quite typically, you know, recommend being invited to that. But definitely the frontline people who do the day to day in and out credentialing or who want to be very involved.

21:56

DILSA: Okay. All right. Yeah. And that's um. That's very, um, important that everybody gets involved. So everyone, you know, even the front line people will know how important it is to be a part of it and what they actually need to, um, do to meet it. Well, they'll realize the importance of what they're doing every day as well.

22:19

JANA: Right, exactly.

DILSA: Um. Okay. Let's see. Um, how do you remain up to date on any of the changes that to the standards? You know, every year they have a little change here and a little there. But this year coming up, I think they have some major changes that they're going to put in.

JANA: Right, right.

22:38

DILSA: So how do you keep up to date on those?

22:41

JANA: Yeah. So NCQA usually publishes regular updates about three times a year. They typically seem to be around March, July, and November. They will not for every type of program. But I think credentialing mostly has had an annual, you know, updates, um, or at least annually. But it's always good to look at those, um, you know, mark your calendar, put it on your work plan, whatever it is you follow, to kind of go out to the website and check under that, um, that section of the website. Um, there's also FAQs that they publish monthly. Um, and you can filter by the type of accreditation or certification to just see what's applicable to you. So definitely, um, also sign up for the NCQA newsletter that comes out. They have good information in there. They have trainings on their website that are self-paced that I highly recommend. Um, they have one specific to different, you know, I believe they have a credentialing accreditation one. Um, they have the you know, they had the health plan series, which there is a credentialing specific ones. So that could even be it's very, very similar credentialing, the credentialing accreditation compared to the health plan, a standard category of credentialing are very, very similar, almost like almost identical, but not quite so. Um, and then, as you mentioned, be on the lookout for those big changes that might be coming for 2025. So, um, back in this past winter, I think it was around January time frame. They put out, um, their open comment, public comment period for their proposed changes for next year. And they were really some of the

biggest changes I've seen in a long time. So for credentialing, how it would affect credentialing is they are proposing combining the credentialing, accreditation and the verification program. So instead of two separate programs, as we talked about, they would combine them into one. And then they would have the various tiers of the different verifications and accreditation. They also proposed some pretty major changes to the time frames, um, for primary source verification. Um, some other less sweeping changes include some that I think might be a little bit better for the systems control piece, which is an area that especially within the the credentialing accreditation as well as health plan, have struggled with submitting some of those standards around the reporting, um, requirements for those. So they're going to have there's some proposed changes for that, but definitely some you know, I know that they did receive a lot of feedback from those proposed changes. So I'm not sure, um, what they will take into consideration. And if they will, you know, make some changes to those, but definitely be on the lookout. I would say by this summer that they would be putting out the final version of the 2025 standards.

25:14

DILSA: Yeah, I know a lot of people will be happy if they improve the what the requirements are for the system controls piece, because that is a little confusing.

JANA: It is, I think hopefully that that I think when I reviewed that, it looks that they are trying to provide a little bit more guidance because that has been a big area of confusion.

U2

25:22

DILSA: Yeah. Yeah. And um, a lot of the changes to...well used to be a lot of the changes would be just languages, you know, the grammar or the language of how they addressed something. But now, um, this one is really going to affect everything. Mhm. Um, so. So that's where you can look out for everything. Is there anything else you would like to tell us that? Um, that maybe I didn't ask and the questions and, and, um, anything that you would want to put everybody's radar up to make sure that they're doing in order to succeed and and, um?

U2

26:10

JANA: Yeah, sure. I think one of the, the biggest barriers I find when I review and this is across all different organizations, not just credentialing, um, you know, over the years and NCQA has really become, I think, more strict over the past several years. You know, we went through a pandemic and then a lot of resignations. Um, I feel like leadership in some organizations are not aware of the amount of time that goes into preparing for NCQA accreditation. Um, they're not aware necessarily of the amount of resources that are needed. So I see organizations trying to do their day to day work of credentialing, which, as you know, is very cumbersome, very time, you know, time consuming. Then on top of that, they're given the task of becoming NCQA accredited or maintaining accreditation. That is too much to ask. You really need to have additional staff members. Um, if you have a lot of delegates, you really need a specific delegation oversight coordinator, for instance, for credentialing accrediting accredited organizations. If you have a bunch of, you know, delegates, um, I really feel that this has led to, you know, inappropriate staffing. And this has put a damper on a lot of organizations where they're not able to meet some of the requirements around analysis and



analytic pieces anymore. Um, some of the delegation oversight I see has been slipping just because they, they can't really keep up with it. Um, and I think really the whole reason for doing credentialing in the first place is for, you know, our members, our patients, for having overall improved patient safety and good quality healthcare outcomes. And that you need to come back to remembering that. And that is the overall goal of NCQA, is health care quality. And I think that, you know, it's really important to, to for organizational leadership to to understand what is involved in the standards. So having sort of a NCQA 101 meeting with them or a training, um, so they understand what is involved and what type of resources are needed so they can provide that for their staffing. Um, that is really something I see is really important, um, you know, to, to having a successful survey.

28:20

DILSA: That is um, and you're right, there's so many organizations that don't realize what it takes, what it actually takes to get done, and they don't give it the resources until the last minute.

28:28

JANA: Exactly. And then you've been through your lookback period and you can't go back and change things. So that's why it's very important. Yeah.

28:37

DILSA: So everybody take that to heart, please. Well, thank you for sharing that with us. I want you to share your contact information So if anyone wants to get in touch with you to learn more or to get your help, tell us. You know, I'll add this in our, um, on YouTube. They'll be able to see it. But tell us how to get in touch with you.

28:59

JANA: so you can, um, certainly go through my website and [managedcareconsulting.org](http://managedcareconsulting.org). Um, or, um, my email and I'll have to provide it. But it's my [jaltieri@managedcareconsulting.org](mailto:jaltieri@managedcareconsulting.org). Um, so find my website and you can contact me through that or through email. Um, I'm also on LinkedIn. You can find me there. Um, so I'd be happy to answer any questions if anybody has any, you know, interest about consulting, I'd be happy to talk to you.

DILSA: Okay. Awesome. Well, thank you for joining us, Gina. I really appreciate all the information. It was very valuable. And I want all the medical services professionals to hear what listen to this a couple of times because you gave us so much information. I really appreciated it. And listeners, please, if you're watching us on YouTube to hit subscribe, hit the like button and hit the bell so you can hear about us again. And other medical staff services professionals need to hear this, so share it with your colleagues please, and share it with the stakeholders in your organization because they need to know how to, um, support you and how they should support each other in getting accredited and what the needs are. So please join us again and thank you again, Jana, for all of you.

JANA: Thank you for having me.

30:21

DILSA: Thank you. And if you like this one, don't forget to subscribe on YouTube and continue to listen to us on your favorite podcast platform.