March 31, 2025

This document includes the corrections, clarifications and policy changes to the 2025 Credentialing and Provider Network standards and guidelines. NCQA has identified the appropriate page number in the publication and the standard/element head and subhead for each update. Updates have been incorporated into the Interactive Review Tool (IRT). NCQA operational definitions for correction, clarification and policy changes are as follows:

- A correction (CO) is a change made to rectify an error in the standards and guidelines.
- A clarification (CL) is additional information that explains an existing requirement.
- A policy change (PC) is a modification of an existing requirement.
- A regulatory change (RC) is a new requirement or a modification of an existing requirement to align with federal regulations.

An organization undergoing a survey under the 2025 standards and guidelines must implement corrections and policy changes within 90 calendar days of the IRT release date, unless otherwise specified. The 90-calendar-day advance notice does not apply to clarifications or FAQs, because they are not changes to existing requirements.

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
30	Policies and Procedures— Section 2: The Accreditation Process	Responsible Use of Artificial Intelligence	Revise the "Responsible Use of Artificial Intelligence" text to read: NCQA supports the use of technological advancements that improve the quality and equity of health care operations and delivery. Artificial intelligence may be useful in this regard, but there are risks to consider and mitigate. Many Al frameworks have been established to address these risks. NCQA expects organizations that use Al to implement a framework and policies that are fair and equitable to members. Although NCQA does not mandate use of a specific Al framework, the NIST Al Risk Management Framework may be helpful. The Coalition for Health Al is also a useful resource NCQA may consider use of Al in determining Accreditation/Certification status, even though current NCQA standards do not specifically address Al. For example, with regard to utilization management, NCQA standards require appropriately licensed professionals (not Al) to make medical necessity denial decisions. Other activities that require human decision making, and where Al is used, may be an area for NCQA to consider.	CL	3/31/25
51	CR 1, Element B	Explanation—Factor 4	Remove the factor 4 explanation.	СО	3/31/25
56	CR 2, Element A	Explanation—Factor 5	Revise the second bullet of the factor 5 explanation to clarify the language regarding fraud and misconduct to read: • NCQA, when the organization identifies fraud and misconduct.	CL	3/31/25

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
			 Self-identification of systemic issues affecting 5% or more of eligible credentialing/ recredentialing files; for example, falsifying verification dates. Refer to Section 5: Notifying NCQA of Reportable Events in the Policies and Procedures for details. 		
58	CR 2, Element B	Explanation—Factor 2	Revise the fourth bullet under factor 2 to read: • NCQA, when the organization identifies fraud and misconduct, as identified in Element A, factor 4.	CL	3/31/25
87	CRA 1, Element A	Look-back Period	Revise the look-back period for Initial and Renewal Surveys to read: For Initial Surveys: 6 months; prior to the survey date for factor 6 and the verification of fellowship component of factor 12. For Renewal Surveys: 24 months; prior to the survey date for factor 6 and the verification of fellowship component of factor 12.	СО	3/31/25
87	CRA 1, Element A	Look-Back Period	Replace "For First Surveys" with "For Initial Surveys" in the look-back period.	СО	3/31/25
93	CRA 2, Element A	Look-Back Period	Replace "For First Surveys" with "For Initial Surveys" in the look-back period.	СО	3/31/25
97	CRA 3, Element A	Look-Back Period	Replace "For First Surveys" with "For Initial Surveys" in the look-back period.	СО	3/31/25
98	CRA 3, Element A	Explanation—Factor 6	Replace "ethnicity or language" with "ethnicity and language" in the first paragraph of the factor 6 explanation to read: The organization's application includes fields to enter race, ethnicity and language, and a statement that the organization does not discriminate or base credentialing decisions on an applicant's race, ethnicity and language, and that providing the information is optional.	СО	3/31/25
100	CRA 3, Element B	Look-Back Period	Replace "For First Surveys" with "For Initial Surveys" in the look-back period.	СО	3/31/25
109	CRA 4, Element B	Explanation— Factor 2	Revise the second paragraph of the factor 2 explanation to read: The organization obtains Medicare sanction information from any of the following sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov.	CL	3/31/25

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
109	CRA 4, Element B	Explanation—Factor 3	Add NPDB as an acceptable source for Medicare/Medicaid exclusions. Factor 3: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from the State Medicaid agency and from one of the following additional sources: List of Excluded Individuals and Entities maintained by OIG and available over the internet, or NPDB. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet. NPDB.	СО	3/31/25
111	CRA 5, Element A	Summary of Changes	Revise the summary of changes to read: • Add SAM.gov as an acceptable source for verification of Medicare/Medicaid sanctions.	СО	3/31/25
112	CRA 5, Element A	Scope of Review	Revise the scope of review to read: NCQA reviews the organization's policies and procedures and reports that demonstrate the organization collected and reviewed applicable information. For factors 1-3, if the organization uses a monitoring service, NCQA also reviews the organization's evidence of the subscription with the service.	СО	3/31/25
112	CRA 5, Element A	Explanation— Factor 1	Revise the second paragraph of the factor 1 explanation to read: The organization obtains Medicare sanction information from any of the following sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov.	CL	3/31/25
112	CRA 5, Element A	Explanation—Factor 2	Add NPDB as an acceptable source for Medicare/Medicaid exclusions. Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from the State Medicaid agency and from one of the following additional sources:	СО	3/31/25

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
			 List of Excluded Individuals and Entities maintained by OIG and available over the internet, or NPDB. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet). NPDB. 		
113	CRA 5, Element A	Explanation—Factor 5	Revise the factor 5 explanation to clarify the time frame for adverse events. The organization monitors for adverse events: Before July 1, 2025: At least every 6 months. On or after July 1, 2025: At least monthly.	CL	3/31/25
120	CRA 7, Element A	Explanation—Factor 1	Replace "CR" with "CRA" under <i>Related information</i> to read: Related information <i>Time frame.</i> NCQA does not prescribe a time frame for gathering data to use for assessing organizational providers (e.g., the 120-calendar-day rule, applied against the verification of credentials of individual practitioners, is NA). <i>Telemedicine organizations.</i> If telemedicine practitioners are credentialed under CRA 1– CRA 6, organizations are not required to also assess the telemedicine organization under CRA 7, but if telemedicine practitioners are not credentialed under CRA 1–CRA 6, the telemedicine organization must be assessed under CRA 7.	СО	3/31/25
127	CRC 1, Element A	Summary of Changes	Replace "factor 13" with "factor 8" in the summary of changes to read: • Moved "Appropriate documentation" requirements from "Related information" to be the new factor 8.	СО	3/31/25
128	CRC 1, Element A	Explanation	Replace "90 calendar days" with "120 calendar days" for Work history.	СО	3/31/25
133	CRC 2, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	СО	3/31/25
135	CRC 3, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	СО	3/31/25
137	CRC 4, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	СО	3/31/25
140	CRC 5, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	СО	3/31/25

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
142	CRC 6, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	со	3/31/25
144	CRC 7, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	со	3/31/25
146	CRC 8, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from 36 months to 24 months.	СО	3/31/25
149	CRC 9, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from "36 months, 6 months for factor 2" to "24 months, 6 months for factor 2."	СО	3/31/25
149	CRC 9, Element A	Explanation— Factor 1	Revise the second paragraph of the factor 1 explanation to read: The organization obtains Medicare sanction information from any of the following sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov.	CL	3/31/25
149	CRC 9, Element A	Explanation—Factor 2	Add NPDB as an acceptable source for Medicare/Medicaid exclusions. Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from the State Medicaid agency and from one of the following additional sources: List of Excluded Individuals and Entities maintained by OIG and available over the internet, or NPDB. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet.	СО	3/31/25
152	CRC 10, Element A	Look-Back Period	Revise the look-back period for Renewal Surveys from "36 months, 6 months for factor 6" to "24 months, 6 months for factor 6."	СО	3/31/25

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
153	CRC 10, Element A	Explanation—Factor 6	Replace "ethnicity or language" with "ethnicity and language" in the first paragraph of the factor 6 explanation to read: The organization's application includes fields to enter race, ethnicity and language, and a statement that the organization does not discriminate or base credentialing decisions on an applicant's race, ethnicity and language, and that providing the information is optional.	СО	3/31/25
158	CRC 11, Element A	Explanation—Factor 6	Replace "ethnicity or language" with "ethnicity and language" in the first paragraph of the factor 6 explanation to read: The organization's application includes fields to enter race, ethnicity and language, and a statement that the organization does not discriminate or base credentialing decisions on an applicant's race, ethnicity and language, and that providing the information is optional.	CO	3/31/25
161	CRC 12, Element B	Explanation— Factor 1	Revise the second paragraph of the factor 1 explanation to read: The organization obtains Medicare sanction information from any of the following sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov.	CL	3/31/25
161	CRC 12, Element B	Explanation—Factor 2	Add NPDB as an acceptable source for Medicare/Medicaid exclusions. Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from the State Medicaid agency and from one of the following additional sources: List of Excluded Individuals and Entities maintained by OIG and available over the internet, or NPDB. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet. NPDB.	СО	3/31/25

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
163	CRC 12, Element C	Explanation— Factor 1	Revise the second paragraph of the factor 1 explanation to read: The organization obtains Medicare sanction information from any of the following sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov.	CL	3/31/25
163	CRC 12, Element C	Explanation—Factor 2	Add NPDB as an acceptable source for Medicare/Medicaid exclusions. Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from the State Medicaid agency and from one of the following additional sources: List of Excluded Individuals and Entities maintained by OIG and available over the internet, or NPDB. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet.	СО	3/31/25

	PREVIOUSLY POSTED UPDATES							
17	Policies and Procedures— Section 2: The Accreditation Process	Resurvey	Replaced "above 55%" with "greater than or equal to 55%" in the first and second paragraphs under <i>Resurvey</i> .	CL	11/18/24			
34	Policies and Procedures— Section 3: The Survey Process	File review universe	Add the following text to the end of the last sentence of the Note paragraph: (i.e., a single legal entity conducts functions centrally and on behalf of local applicable accreditable entities).	CL	11/18/24			
72	CR 3, Element C	Element stem	Revise the factor 5 text to read: Annually audits each delegate's credentialing files for inappropriate documentation and inappropriate updates to credentialing information.	СО	11/18/24			

PREVIOUSLY POSTED UPDATES Type of Update **IRT Release** Standard/Element Head/Subhead Update **Page** Date Explanation—Factor 1 Replace "certified nurse midwife" with "physician assistant" in the last bullet to read: CO 11/18/24 88 CRA 1, Element A • Other medical practitioners who may be within the scope of credentialing (e.g., physician assistant). 106 Explanation—Factor 5 CO 11/18/24 CRA 4, Element A Replace "120 calendar days" with "180 calendar days" in the explanation to read: Verification time limit: 180 calendar days. Note: The 180-calendar-day verification time limit applies to files processed by the organization or its delegate(s) on or after July 1, 2025. Files processed before July 1, 2025, are scored against the previous verification time limit requirement of 365 calendar days. 108 CRA 4, Element B Explanation Add the following as the third paragraph under the explanation: CL 11/18/24 The organization verifies sanction and exclusion information (from factors 1-3) for all product lines. 109 CRA 4, Element B Explanation—Factor 2 Replace the current factor 2 explanation with the following text: CL 11/18/24 Factor 2: Sources for Medicare/Medicaid sanctions The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources: AMA Physician Master File. • FSMB. NPDB. SAM.gov. The organization obtains Medicare sanction information from the following sources: AMA Physician Master File. FSMB. NPDB. SAM.gov. 109 CRA 4, Element B Explanation—Factor 3 CL 11/18/24 Replace the current text of the factor 3 explanation with the following text: Factor 3: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from each of the following sources:

	PREVIOUSLY POSTED UPDATES						
Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date		
			 The state Medicaid agency. List of Excluded Individuals and Entities maintained by OIG and available over the internet. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet. 				
110	CRA 4, Element B	Exceptions	Remove the second paragraph, which reads: Factors 2 and 3 are NA for commercial and Exchange product line	CL	11/18/24		
112	CRA 5, Element A	Explanation	Add the following as the third paragraph under the explanation: The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.	CL	11/18/24		
112	CRA 5, Element A	Explanation—Factor 1	Replace the current factor 1 explanation with the following text: Factor 1: Sources for Medicare/Medicaid sanctions The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov. The organization obtains Medicare sanction information from the following sources: • AMA Physician Master File. • FSMB. • NPDB. • SAM.gov.	CL	11/18/24		

	PREVIOUSLY POSTED UPDATES						
Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date		
112	CRA 5, Element A	Explanation—Factor 2	Replace the current factor 2 explanation with the following text: Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from each of the following sources: The state Medicaid agency. List of Excluded Individuals and Entities maintained by OIG and available over the internet. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet.	CL	11/18/24		
132	CRC 1, Element B	Summary of Changes	Remove the text that reads, "Add a requirement to the related information section for organization's policies and procedures to specify verification of fellowship if delegated by clients and the client communicates practitioner fellowship" from the summary of changes.	СО	11/18/24		
143	CRC 6, Element A	Explanation—Work history	Replace "90 calendar days" with "120 calendar days" in the explanation to read: Verification time limit: 120 calendar days. Note: The 120-calendar-day verification time limit applies to files processed by the organization or its delegate(s) on or after July 1, 2025. Files processed before July 1, 2025, are scored against the previous verification time limit requirement of 365 calendar days.	CL	11/18/24		
148	CRC 9, Element A	Summary of Change	Remove the following summary of change: Add an exception for commercial and Exchange product lines.	СО	11/18/24		
149	CRC 9, Element A	Explanation	Add the following as the third paragraph of the explanation: The organization verifies sanction and exclusion information (from factors 1 and 2) for all product lines.	CL	11/18/24		
149	CRC 9, Element A	Explanation—Factor 1	Replace the current factor 1 explanation with the following text: Factor 1: Sources for Medicare/Medicaid sanctions The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources:	CL	11/18/24		

PREVIOUSLY POSTED UPDATES							
Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date		
			 AMA Physician Master File. FSMB. NPDB. SAM.gov. The organization obtains Medicare sanction information from the following sources: AMA Physician Master File. FSMB. NPDB. SAM.gov. 				
149	CRC 9, Element A	Explanation—Factor 2	Replace the current factor 2 explanation with the following text: Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from each of the following sources: The state Medicaid agency. List of Excluded Individuals and Entities maintained by OIG and available over the internet. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet.	CL	11/18/24		
160	CRC 12, Element B	Explanation	Add the following as the third paragraph of the explanation: The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.	CL	11/18/24		
160	CRC 12, Element B	Explanation—Factor 1	Replace the current factor 1 explanation with the following text: Factor 1: Sources for Medicare/Medicaid sanctions The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources: • AMA Physician Master File.	CL	11/18/24		

	PREVIOUSLY POSTED UPDATES							
Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date			
			 FSMB. NPDB. SAM.gov. The organization obtains Medicare sanction information from the following sources: AMA Physician Master File. FSMB. NPDB. SAM.gov. 					
161	CRC 12, Element B	Explanation—Factor 2	Replace the current factor 2 explanation with the following text: Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from each of the following sources: The state Medicaid agency. List of Excluded Individuals and Entities maintained by OIG and available over the internet. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet.	CL	11/18/24			
163	CRC 12, Element C	Explanation	Add the following as the fourth paragraph of the explanation: The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.	CL	11/18/24			
163	CRC 12, Element C	Explanation—Factor 1	Replace the current factor 1 explanation with the following text: Factor 1: Sources for Medicare/Medicaid sanctions The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources: • AMA Physician Master File. • FSMB.	CL	11/18/24			

PREVIOUSLY POSTED UPDATES					
Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
			 NPDB. SAM.gov. The organization obtains Medicare sanction information from the following sources: AMA Physician Master File. FSMB. NPDB. SAM.gov. 		
163	CRC 12, Element C	Explanation—Factor 2	Replace the current factor 2 explanation with the following text: Factor 2: Sources for Medicare/Medicaid exclusions The organization obtains Medicaid exclusion information from each of the following sources: The state Medicaid agency. List of Excluded Individuals and Entities maintained by OIG and available over the internet. The organization obtains Medicare exclusion information from any of the following sources: Medicare Exclusion Database. List of Excluded Individuals and Entities maintained by OIG and available over the internet.	CL	11/18/24
152	CRC 10, Element A	Explanation— Processing of application and attestation	Replace "90-calendar day" with "120-calendar day" in the Note under Processing of application and attestation.	СО	11/18/24