

# NCQA Corrections, Clarifications and Policy Changes to the 2017 CM-LTSS Standards and Guidelines

November 25, 2019

This document includes the corrections, clarifications and policy changes to the 2017 CM-LTSS standards and guidelines. NCQA has identified the appropriate page number in the printed publication and the standard and head—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.

An organization undergoing a survey under the 2017 CM-LTSS 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
27	Policies and Procedures— Section 4: Reporting Results	Reporting Status to the Public—NCQA's Right to release and publish	Add the following as the fourth paragraph: NCQA publicly reports expired status and that the organization was previously Accredited and has chosen not to undergo a survey to renew its status or the organization has chosen to withdraw its status before expiration of its Accreditation cycle.	PC	11/25/2019
PREVIOUSLY POSTED UPDATES					
NA	Policies and Procedures	Acknowledgments	Update the NCQA address on the page preceding the <b>Acknowledgments</b> page to read: 1100 13th Street NW, Third Floor Washington, DC 20005  Update the Policy Clarification Support link to read: <a href="http://my.ncqa.org">http://my.ncqa.org</a>	CL	11/20/2017

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5	Overview	Other NCQA Programs	<p>Add the following as the last bullet under “NCQA offers the following accreditation programs”:</p> <ul style="list-style-type: none"> <li>• Utilization Management, Credentialing and Provider Network (UM-CR-PN).</li> </ul> <p>Replace the last bullet under “NCQA offers the following certification programs” with the following:</p> <ul style="list-style-type: none"> <li>• Wellness &amp; Health Promotion (WHP).</li> </ul> <p>Add the following as the last two bullets under “NCQA offers the following recognition programs”:</p> <ul style="list-style-type: none"> <li>• Oncology Medical Home (PCMH-O).</li> <li>• School-Based Medical Home (SBMH).</li> </ul> <p>Delete the second bullet under “NCQA offers the following distinction programs” that reads:</p> <ul style="list-style-type: none"> <li>• Patient Experience Reporting (for NCQA-Recognized Patient-Centered Medical Homes).</li> </ul> <p>Add the following as the last section:</p> <p><i>NCQA offers the following distinction programs for recognized PCMHs:</i></p> <ul style="list-style-type: none"> <li>• Patient Experience Reporting.</li> <li>• Behavioral Health Integration.</li> <li>• Electronic Quality Measures (eCQM) Reporting.</li> </ul>	CL	11/20/2017
10	Policies and Procedures— Section 1	Applying for an NCQA Survey—Application Request	<p>Update the NCQA address to read:</p> <p>National Committee for Quality Assurance 1100 13th Street NW, Third Floor Washington, DC 20005</p> <p><b>Updated the issue on March 26, 2018.</b></p>	CL	11/20/2017
10	Policies and Procedures— Section 1	Applying for an NCQA Survey—Processing criteria	<p>Add the following as the second bullet:</p> <p>A current, signed Business Associate Agreement.</p> <p><b>Updated the issue on March 26, 2018.</b></p>	CL	11/20/2017

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10	Policies and Procedures	Eligibility for Accreditation—Programs	Add the following paragraph as the first paragraph: Organizations that manage their LTSS populations differently are required to contact NCQA via My.NCQA ( <a href="https://my.ncqa.org">https://my.ncqa.org</a> ) to determine the appropriate survey option (HPA with LTSS Distinction or CM-LTSS) to pursue. Examples of when an organization may manage requirements differently include delegated populations or dual-eligible populations whose LTSS services are not covered under the organization's medical benefit.	CL	12/3/2018
10	Policies and Procedures—Section 1: Eligibility and the Application Process	Applying for an NCQA Survey—Application request	Revise the section to read: NCQA has implemented a new web-based application process. Organizations with current NCQA Accreditation can apply for a Renewal Survey at <a href="http://my.ncqa.org">http://my.ncqa.org</a> . Log in, click <b>My Apps</b> and then click <b>Go To Site</b> for the accreditation/certification application tool. Review and edit the prepopulated application information and submit the application directly to NCQA.  Contact the application and scheduling account representative (ASAR) with questions or go to <a href="http://www.ncqa.org/programs/accreditation/online-application-process">http://www.ncqa.org/programs/accreditation/online-application-process</a> for information on NCQA's new application process.  Organizations without current accreditation or that are applying for CM-LTSS accreditation for the first time can contact Customer Support at <b>888-275-7585</b> or submit a question in the <b>My Questions</b> section at <a href="http://my.ncqa.org">http://my.ncqa.org</a> to begin the prequalification and application process.	CL	3/26/2018
10	Policies and Procedures—Section 1: Eligibility and the Application Process	Applying for an NCQA Survey—Survey application	Remove the note and the last paragraph that reads: <b>Note:</b> <i>To avoid delays in processing resulting from submission of out-of-date applications and contracts, organizations must request an application from the NCQA Publications Department no more than 30 days in advance of when they plan to submit the application materials.</i>  Programs brought forward must be operational when the application and contract are submitted. The organization must complete and submit a separate application for each legal entity that it wants Accredited and each legal entity must complete the survey process.	CL	3/26/2018

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11	Policies and Procedures— Section 1: Eligibility and the Application Process	Applying for an NCQA Survey—Processing criteria	Revise the section to read: NCQA only processes a complete application, which comprises: <ul style="list-style-type: none"> <li>• The web-based application for an NCQA CM-LTSS Accreditation Survey. A current, signed Agreement for NCQA Case Management Accreditation Survey for LTSS Programs (“the Agreement”).</li> </ul> <p><b>Note:</b> <i>Unless state or other applicable law requires modifications, all organizations are required to sign the Agreement. Requests to change the standard Agreement due to legal conflicts must be approved by NCQA, and must be submitted with evidence of the legal conflict at least 12 months before the requested survey date.</i></p> <ul style="list-style-type: none"> <li>• A current, signed Business Associate Agreement HIPAA Confidentiality Agreement.</li> <li>• The application fee.</li> </ul>	CL	3/26/2018
11	Policies and Procedures— Section 1: Eligibility and the Application Process	Applying for an NCQA Survey—Application timeline	Revise the first sentence to read: Organizations submit the complete application a <i>minimum of nine months</i> before the requested survey date.	CL	3/26/2018
11	Policies and Procedures— Section 1: The Application Process	Organization Obligations	Add the following as sub-bullets under the third bullet: <ul style="list-style-type: none"> <li>— An organization that ceases to do business and no longer serves individuals before the end of its NCQA Accreditation cycle will be removed from the NCQA Case Management for Long Term Services and Supports Program Report Card.</li> <li>— An organization that continues to serve individuals and elects to withdraw from accreditation and not continue to meet NCQA requirements before the end of its NCQA Accreditation cycle, will be reported as “Revoked” on the NCQA Case Management for Long Term Services and Supports Program Report Card.</li> </ul>	CL	7/30/2018
11	Policies and Procedures— Section 1	Eligibility and the Application Process— Organization Obligations	Add the following note as a separate paragraph under the last bullet: <p><b>Note:</b> <i>If NCQA conducts a Discretionary Survey, it reviews the organization against the standards in effect at the time of the Discretionary Survey. Refer to Discretionary Survey in Section 5: Additional Information.</i></p>	CL	11/20/2017

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14	Policies and Procedures— Section 2	Data source	Replace the last paragraph with the following: If an element lists multiple data sources, the scope of review specifies the evidence needed to meet the requirements.	CL	7/24/2017
14	Policies and Procedures— Section 2: The Accreditation Process	Accreditation Status	Add the following subhead and text as the last section under the subhead: <b>Corrective Action</b> In certain circumstances, NCQA may require corrective action by the organization. Corrective action are steps taken to improve performance when an organization does not meet specific NCQA accreditation or certification requirements. Failure to comply timely with requested corrective action may result in a lower score or reduction or loss of accreditation status.	PC	7/29/2019
15	Policies and Procedures— Section 2	Overriding scoring guidelines	Replace the language under <b>Overriding scoring guidelines</b> with the following:  Scoring guidelines codify NCQA decision-making principles used to evaluate all organizations consistently against its standards and can help an organization prepare more effectively for a survey; they are not a substitute for the judgment of the ROC. NCQA recognizes that it is not possible to account for all the circumstances it may find at an organization. If the scoring guidelines do not cover an organization's situation, NCQA may override the scoring guidelines. The ROC makes the final decision on all scores.  The scoring guidelines are not binding.	CL	7/24/2017
23	Policies and Procedures— Section 3: The Survey Process	Reconsideration— Reconsideration request	Add the following as the last sentence:  The request may be mailed to NCQA Office of Program Integrity, 1100 13th Street NW, 3rd Floor, Washington DC 20005 or submitted via email to <a href="mailto:Reconsiderations@ncqa.org">Reconsiderations@ncqa.org</a> .	CL	7/30/2018
23	Policies and Procedures— Section 3: The Survey Process	Reconsideration— Documentation that supports Reconsideration	Delete the last sentence of the note, which reads:  The organization must provide NCQA with 12 copies of materials.	CL	7/30/2018

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27	Policies and Procedures— Section 4: Reporting Results	Reporting Status to the Public—NCQA's right to release and publish	Revise the third paragraph to read: NCQA publicly reports Denied Accreditation for one year (unless the organization declines its status under the Introductory Survey option) or until the status is replaced as the result of another survey. An organization that dissolves or ceases to exist is removed from public reporting.	CL	7/29/2019
27	Policies and Procedures— Section 4: Reporting Results	Reporting Status to the Public—NCQA's right to release and publish	Add the following as the fourth paragraph: NCQA will also report when an organization is required to complete corrective actions. Failure to comply timely with requested corrective action may result in a lower score or reduction or loss of accreditation status.	PC	7/29/2019
27	Policies and Procedures— Section 5	Reporting Hotline for Fraud and Misconduct—How to Report	Replace the "English-speaking USA and Canada" toll free telephone number with <b>844-440-0077</b> .	CO	11/20/2017
28	Policies and Procedures— Section 5	Notifying NCQA of Reportable Events	Update the language under the subhead <b>Notifying NCQA of Reportable Events</b> .  See the attached <b>Policies and Procedures</b> to review updates to this section, which includes the definition of Reportable Events, the process for notifying NCQA of Reportable Events and a description of the investigative process that NCQA may initiate following a Reportable Event.	PC	11/20/2017
28	Policies and Procedures— Section 5: Additional Information	Notifying NCQA of Reportable Events— Annual Attestation of Compliance With Reportable Events	Revise the second sentence in the second paragraph to read: Submit Reportable Events via email to <a href="mailto:ReportableEvents@ncqa.org">ReportableEvents@ncqa.org</a> and annual attestations electronically to <a href="mailto:Attestations@ncqa.org">Attestations@ncqa.org</a> , by fax to 202-955-3599 or by mail to the address below:	CL	7/30/2018
28	Policies and Procedures— Section 5	Discretionary Survey— Time frame	Revise the first sentence to read: The Discretionary Survey is generally conducted within 60 calendar days of notification by NCQA of its intent to conduct a Discretionary Survey, but may include an unannounced survey.	PC	11/20/2017

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28	Policies and Procedures— Section 5	Discretionary Survey	Revise the first sentence to read: NCQA may survey an organization while an accreditation status is in effect.	CL	11/21/2016
29	Policies and Procedures— Section 5: Additional Information	Notifying NCQA of Reportable Events	Revise the third subbullet under the first bullet to read: Request for corrective action where the substance of such corrective action relates to the organization's handling of important patient safety matters.	CL	7/29/2019
29	Policies and Procedures— Section 5	Mergers and Acquisitions	<p>Replace the language with the following:</p> <p>An NCQA-Accredited organization involved in a merger, acquisition, consolidation or other form of corporate reorganization, including filing for dissolution, must submit written notice of such action to NCQA within 30 calendar days following the date of the merger, acquisition, consolidation or reorganization, or earlier, if possible. Refer to Appendix 3: Mergers, Acquisitions and Consolidations for CM-LTSS Organizations.</p> <p>An NCQA-Accreditation organization must also notify NCQA in writing within 30 calendar days of any change in operational structure or the organization's status that affects the Scope of Review under NCQA's standards for case management accreditation for LTSS programs, such as program name change or material restructuring or consolidation of functions. Notices can be submitted electronically to <a href="mailto:NCQA-Accreditation@ncqa.org">NCQA-Accreditation@ncqa.org</a>; by fax to 202-955-3599 or by mail to the address below:</p> <p style="text-align: center;">National Committee for Quality Assurance 1100 13th Street NW, Third Floor Washington, DC 20005 Attention: AVP Accreditation</p>	PC	11/20/2017
33, 38, 41, 45, 46, 48, 50, 53, 54, 57, 70, 73, 75, 76,	LTSS 1, Elements A, C LTSS 2, Elements B–D LTSS 3, Elements A–C LTSS 4, Elements A, B LTSS 5, Elements F, I LTSS 6, Elements A–E	Look-back period	<p>Revised the look-back period to read:</p> <p><i>For Initial Surveys:</i> 6 months.</p> <p><i>For Renewal Surveys:</i> 12 months.</p>	PC	12/3/2018

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78, 79, 82, 83, 85, 87, 88, 89, 90, 93,	LTSS 7, Elements A–E LTSS 8, Elements A, C				
35	LTSS 1, Element A	Examples—Factor 3: Evidence and professional standards	Revise the 14th bullet to read: <ul style="list-style-type: none"> <li>Case Management Society of America Legal and Ethical Standards.</li> </ul> Revise the last bullet to read: <ul style="list-style-type: none"> <li>American Case Management Association.</li> </ul>	CL	3/27/2017
36, 69	LTSS 1, Element B LTSS 5, Element E	Look-back period	Revised the look-back period to read: <i>For Renewal Surveys</i> : 6 months.	PC	12/3/2018
46	LTSS 2, Element D	Scope of review	Revise the scope of review to read: NCQA reviews a random sample of up to 40 case management files selected from active or closed cases that were opened during the look-back period and remained open for at least 60 calendar days during the look-back period.	CL	7/30/2018
49	LTSS 3, Element A	Explanation—Factor 1: Prioritized goals	Add as the last two sentences to the paragraph under the factor 1 explanation: Designating goals as long-term or short-term is not sufficient to meet the requirement. The organization must rank or prioritize goals.	CL	7/30/2018
49	LTSS 3, Element A	Explanation—Factor 3: Life-planning activities	Revise the first and second sentences of the second paragraph to read: If life planning activities are determined to be appropriate, the case manager documents what activities the individual has taken and what documents are in place. If determined not to be appropriate, the case manager documents the reason in the case management record or file.	PC	7/30/2018
51	LTSS 3, Element B	Explanation—Factor 1: Individualized case management plan	Add as the last two sentences to the paragraph under the factor 1 explanation: Designating goals as long-term or short-term is not sufficient to meet the requirement. The organization must rank or prioritize goals.	CL	7/30/2018

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53	LTSS 3, Element C	Scope of review	Revise the scope of review to read: NCQA reviews a random sample of up to 40 case management files selected from active or closed cases that were opened during the look-back period and remained open for at least 60 calendar days during the look-back period.	CL	7/30/2018
55	LTSS 4, Element A	Explanation—Factor 1: Identify individuals who transition	Revise the second paragraph to read: The organization has a process to identify members who transition between settings.	CL	7/24/2017
57	LTSS 4, Element A	Examples—Factor 4 Track the status of transitions	Revise the subhead to read: <b>Factor 6: Track the status of transitions</b>	CL	3/26/2018
59	LTSS 4, Element C	Explanation—Factor 1: Analyzing population-based data and taking action	Add the following as the second sentence in the third paragraph. If the organization has no access to patient record systems, it can gather information about unplanned admissions during its visit with participants.	CL	7/24/2017
69	LTSS 5, Element E	Exceptions	Revise the first two paragraphs to read: Factors 1 and 3 are NA if the organization does not identify opportunities for improvement of effectiveness. NCQA evaluates whether this conclusion is reasonable, given the organization's analysis. Factors 2 and 4 are NA if the organization does not identify opportunities for improvement of experience. NCQA evaluates whether this conclusion is reasonable, given the organization's analysis.	CO	11/21/2016
70, 74	LTSS 5, Elements F, I	Exceptions	Replace "None" with the following: This element is NA if the organization has no purchasers.	CL	7/24/2017
72	LTSS 5, Element G	Examples	Revise the example to read: The organization is contracted to provide case management to 100 individuals (the denominator) identified as needing LTSS. • Of the 100 individuals identified, the organization is only able to contact 80 individuals (the organization is unable to find or reach 20 individuals).	CL	3/27/2017

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			<ul style="list-style-type: none"> <li>• Of the 80 individuals reached, the organization can schedule an initial assessment with 78 individuals (two individuals refused).</li> <li>• The organization conducts an initial scheduled assessment of 75 individuals (one individual dies, one is admitted to a skilled nursing facility, one refuses to meet the case manager on the day of the scheduled assessment).</li> <li>• Of the 75 assessments completed, case managers have interactive contact (in-person visits or telephone check-ins) with 60 individuals.</li> <li>• In this scenario, the participation rate is 60/100.</li> </ul>		
73	LTSS 5, Element H	Exceptions	Revise the exception to read: Factors 2 and 3 are NA: <ul style="list-style-type: none"> <li>• If the organization's analysis of results shows that there are no opportunities for improvement.               <ul style="list-style-type: none"> <li>– NCQA evaluates whether this conclusion is reasonable, given assessment results.</li> </ul> </li> <li>• For Initial Surveys.</li> </ul>	CL	7/30/2018
92	LTSS 8, Element B	Scope of review	Add the following as the first sentence of the scope of review: Because this element is being retired for the 2019 standards year, NCQA will score it NA for surveys beginning on or after July 1, 2018.	PC	7/30/2018
95	LTSS 8, Element D	Exceptions	Remove the following language: Factor 2 is NA if: <ul style="list-style-type: none"> <li>• The organization does not delegate case management activities.</li> <li>• Delegation arrangements have been in effect for less than 12 months.</li> </ul>	CL	3/26/2018
95	LTSS 8, Element D	Exceptions	Remove the exception for factor 2 that reads: Factor 2 is NA if: <ul style="list-style-type: none"> <li>• The organization does not delegate case management activities.</li> <li>• Delegation arrangements have been in effect for less than 12 months.</li> </ul>	CL	7/30/2018

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2-8	Appendix 2	Delegating to an NCQA-Accredited/Certified Organization—General Requirements	Add the following as the last sentence of the fourth bullet: If there are two or more delegates, “70 percent” is cumulative.	CL	12/3/2018
3-2	Appendix 3: Mergers, Acquisitions and Consolidations for Case Management LTSS Organizations	The MAC Policy	Revise the second and third sentence in the first paragraph to read: Mergers, acquisitions, consolidations and corporate reorganizations are treated the same under NCQA’s MAC Policy. The terms <i>merge</i> , <i>merged</i> and <i>merger</i> also refer to acquisitions, consolidations and reorganizations.	CL	11/20/2017
3-3	Appendix 3: Mergers, Acquisitions and Consolidations for Case Management LTSS Organizations	Definitions	Add the following definitions for “reorganization” and “reorganization date” as follows: <b>reorganization</b> The process of reorganizing or altering the corporate structure of an organization, including the creation of a new organization or the dissolution of the organization as an entity. The filing for petition of bankruptcy or the initiation of receivership, liquidation or state insurance supervision should be reported to NCQA as Reportable Events under NCQA Accreditation program policy and not under the MAC Policy. <b>reorganization date</b> The effective date of the new entity, dissolution or corporate restructuring plan.	CL	11/20/2017
3-3	Appendix 3: Mergers, Acquisitions and Consolidations for Case Management LTSS Organizations	Written Notice—Written notice	Revise the first and second paragraph and the NCQA address to read: NCQA and CM organizations hold preliminary discussions regarding the potential impact of pending mergers, acquisitions, consolidations or reorganizations on accreditation status and the survey schedule. NCQA-Accredited organizations involved in a merger, acquisition, consolidation or reorganization must submit written notice of such action to NCQA within 30 calendar days following the merger, acquisition, consolidation or reorganization date, or earlier, if possible. Send the written notice to the following address:	CL	11/20/2017

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