

2027 Health Plan Accreditation

Summary of Questions for Public Comment

Updates to 2027 Health Plan Accreditation

Introduction

NCQA seeks public comment on proposed targeted reductions to Health Plan Accreditation Standards Year 2027.

Recommendations focus on reducing administrative burden while maintaining meaningful evaluation of core capabilities.

Background Questions

1. Which best describes your organization?
 - Health plan
 - Integrated delivery system
 - Behavioral health organization
 - Medicaid-focused organization
 - State
 - Other (please specify)
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Global Questions

1. **Overall support:** To what extent do you support the proposed reductions?
 - Strongly support
 - Support
 - Neutral
 - Do not support
 - Strongly do not support

Please explain your response.

2. **Burden reduction intent:** To what extent do the proposed changes help reduce administrative burden, improve clarity and support more focused, meaningful evaluation?
 - Significantly helps
 - Somewhat helps
 - No change
 - Does not help

Please explain your response.

3. **Maintaining rigor:** Do proposed reductions preserve meaningful oversight of core capabilities across the Accreditation life cycle (First Surveys, Interim Surveys, Renewal Surveys)?
 - Yes
 - Somewhat
 - No

Please explain your response.

4. **Alignment:** Do you support carrying proposed changes through to other affected NCQA Accreditation programs, where applicable?
 - No
 - Yes

Please explain your response.

5. **Unintended impact:** Could proposed reductions create unintended risks, gaps or confusion for organizations or surveyors?

- No
- Yes

Please explain your response.

Content Related Questions

For each proposed change, please select **one** response:

- **Support**
- **Support With Modifications**
- **Do Not Support**

Please provide comments for any response other than **Support**.

Quality Improvement

- QI 3: Continuity and Coordination of Care
 - QI 3, Element E: Do you support retiring this element?

Population Health Management

- PHM 5: Complex Case Management
 - PHM 5, Element A—Access to Case Management: Do you support retiring this element from Renewal Surveys?
 - PHM 5, Element C—Case Management Process: Do you support removing the conclusion for each factor requirement?
 - PHM 5, Element D—Initial Assessment: Do you support removing the conclusion for each factor requirement?

Network Management

- NET 4: Continued Access to Care
 - NET 4, Element A—Notification of Termination: Do you support retiring this element from Renewal Surveys?
 - NET 4, Element B—Continued Access to Practitioners: Do you support retiring this element from Renewal Surveys?
- NET 5: Physician and Hospital Directories
 - NET 5, Element G—Usability Testing: Do you support retiring this element?
 - NET 5, Element H—Availability of Directories: Do you support retiring this element?

Utilization Management

- UM 1: Program Structure
 - UM 1, Element A—Program Description: Do you support adding factor 9 to strengthen transparency around AI-generated outputs?
- UM 2: Clinical Criteria for UM Decisions
 - UM 2, Element A—Clinical Criteria for UM Decisions: Do you support retiring this element from Renewal Surveys?
- UM 4: Appropriate Professionals
 - UM 4, Element F—Use of Board-Certified Consultants: Do you support retiring this element from Renewal Surveys?
- UM 5: Timeliness of UM Decisions

- UM 5, Element C, factor 3—Notification of Pharmacy Decisions: Do you support changing the time frame for urgent preservice decisions from 72 hours to 24 hours to align with CMS?
- UM 10: Procedures for Pharmaceutical Management
 - UM 10, Element A—Pharmaceutical Management Procedures: Do you support retiring this element from Renewal Surveys?
 - UM 10, Element B—Pharmaceutical Restrictions/Preferences: Does the revised element stem clarify the required timing for updates?
 - UM 10, Element D—Procedures for Pharmaceutical Management: Do you support retiring this element?
 - UM 10, Element E—Considering Exceptions: Do you support retiring this element from Renewal Surveys?

Credentialing

- CR 2: Credentialing Committee
 - CR 2, Element A—Credentialing Committee: Do you support replacing the evidence required for this element with the Credentialing Committee charter?
- CR 7: Assessment of Organizational Providers
 - CR 7, Element A—Assessing Medical Providers: Do you support allowing virtual modalities to conduct quality assessment?
 - CR 7, Element D—Assessing Medical Providers: Do you support allowing virtual modalities to conduct quality assessment?
 - CR 7, Element E—Assessing Behavioral Healthcare Providers: Do you support allowing virtual modalities to conduct quality assessment?

Member Experience

- ME 3: Marketing Information
 - ME 3, Element A—Materials and Presentations: Do you support retiring this element from the Member Experience category and moving the requirement to the Medicaid Module?
 - ME 3, Element B—Communicating with Prospective Members: Do you support retiring this element from the Member Experience category and moving the requirement to the Medicaid Module?
 - ME 3, Element C—Assessing Member Understanding: Do you support retiring this element from the Member Experience category and moving the requirement to the Medicaid Module?
- ME 4: Functionality of Claims Processing
 - ME 4, Element A—Functionality: Website: Do you support retiring this element?
 - ME 4, Element B—Functionality: Telephone Requests: Do you support retiring this element?
- ME 5: Pharmacy Benefit Information
 - ME 5, Element A—Pharmacy Benefit Information: Website: Do you support retiring this element?
 - ME 5, Element B—Pharmacy Benefit Information: Telephone: Do you support retiring this element?
 - ME 5, Element C—Pharmacy Benefit Updates: Do you support retiring this element?
- ME 6: Personalized Information of Health Plan Services
 - ME 6, Elements A—Functionality: Website: Do you support retiring this element from Renewal Surveys?
 - ME 6, Elements B—Functionality: Telephone: Do you support retiring this element from Renewal Surveys?

- ME 7: Member Experience
 - ME 7, Element C—Annual Assessment of Nonbehavioral Healthcare Complaints and Appeals: Do you support removing the five prescriptive categories for complaints and appeals?
 - ME 7, Element E—Annual Assessment of Behavioral Healthcare and Services: Do you support removing the five prescriptive categories for complaints and appeals?