

# Introduction and Overview: NCQA's PPC<sup>®</sup>-PCMH<sup>™</sup> Recognition Program



Mina L. Harkins, MT(ASCP), MBA  
Assistant Vice President, Recognition Programs



# Objectives

- *Provide Understanding of the NCQA Recognition Program for Physician Practice Connections - Patient-Centered Medical Home (PPC-PCMH)*
- *Introduce NCQA's Web-Based Survey System (ISS)*
- *Discuss Standards and Documentation Requirements*
- *Review the Application and Submission Process*
- *Point to Resources Available to Interested Practices*

# NCQA Recognition Programs

- **>15,000** physicians Recognized nationally across all Recognition programs
- Clinical programs
  - Diabetes Recognition Program (DRP)
  - Heart/Stroke Recognition Program (HSRP)
  - Back Pain Recognition Program (BPRP)
- Medical practice process and structural measures
  - Physician Practice Connections
  - **Physician Practice Connections-Patient-Centered Medical Home (PPC-PCMH)**

\* As of 12/31/09



7796 physicians\*



2791 physicians\*



3001 physicians\*  
198 practices\*



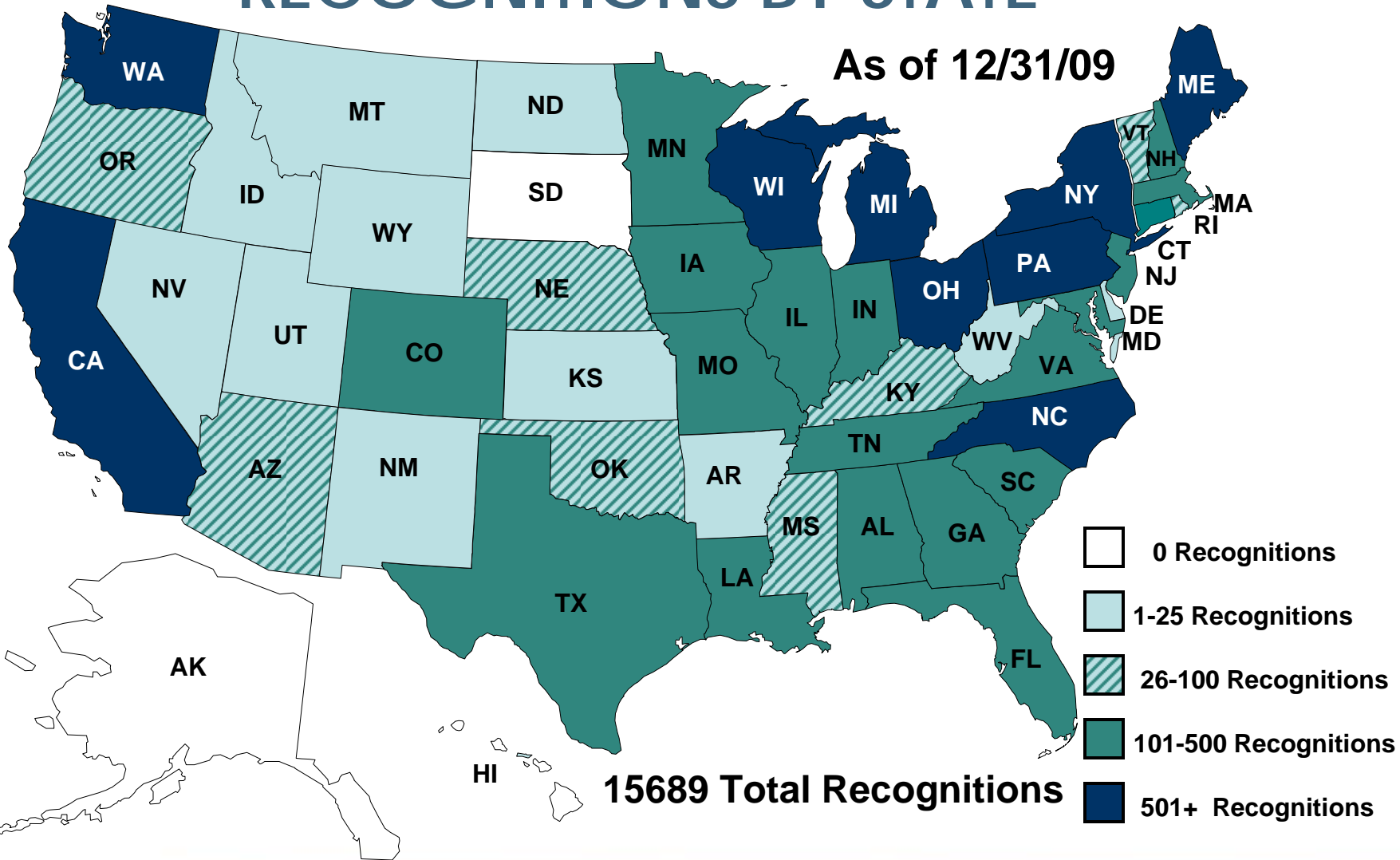
125 physicians\*  
26 practices\*



1976 physicians\*  
383 practices\*

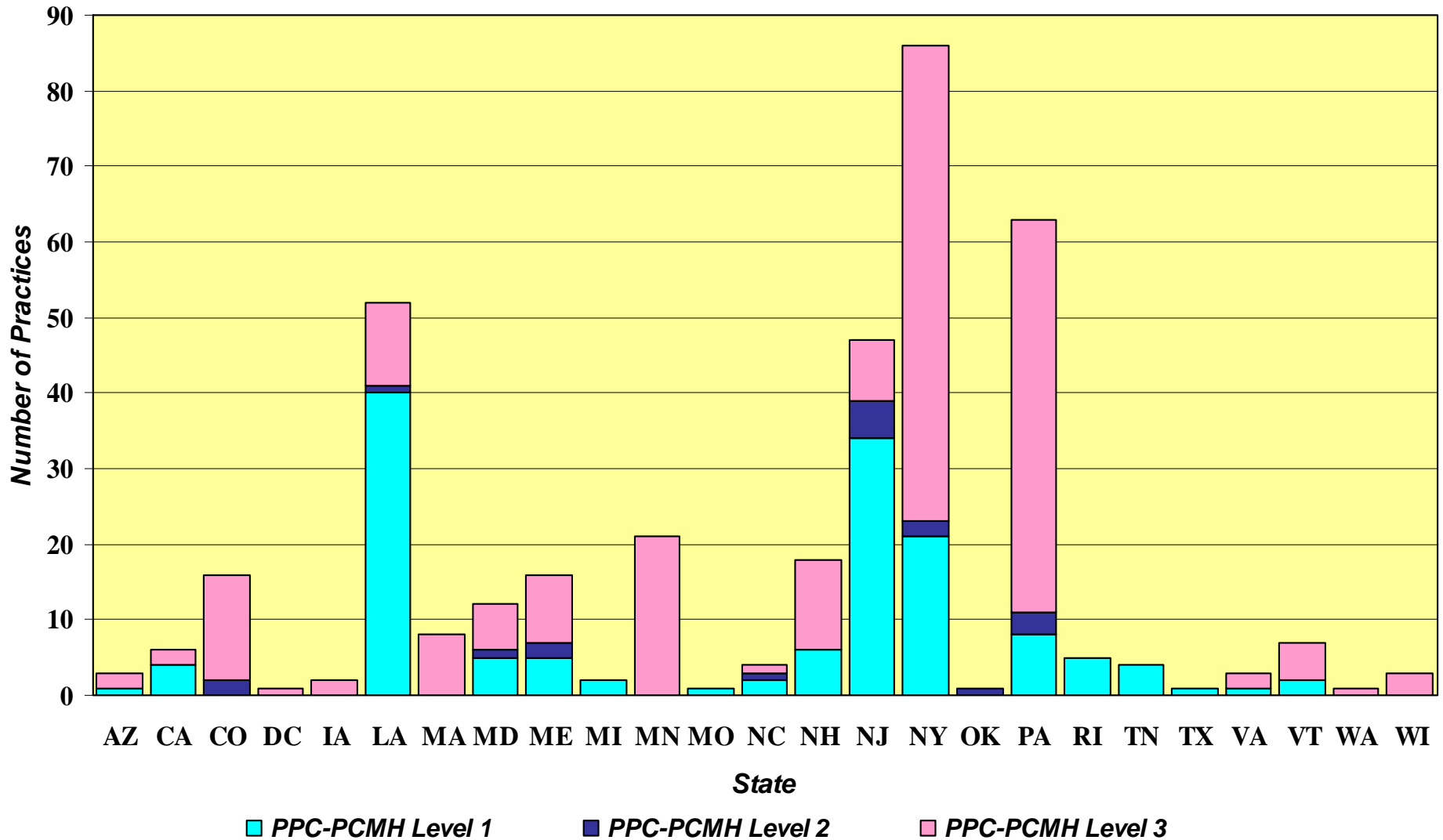
# NUMBER OF CLINICIAN RECOGNITIONS BY STATE

As of 12/31/09



# PPC-PCMH RECOGNIZED PRACTICES BY STATE

(As of 12/31/09)



# PPC-PCMH Practices\*

## NUMBER OF PHYSICIANS IN RECOGNIZED PRACTICES

	1-2	3-7	8-9	10-19	20-50	Total
Level 1	63	62	7	8	2	142
Level 2	6	10	2	---	---	18
Level 3	58	111	22	26	6	223
Total	127	183	31	34	8	383

\* As of 12/31/09

# Goals for Physician Practice Connections (PPC)

- Evaluate systematic approach to delivering preventive and chronic care (Wagner Chronic Care Model)
- Build on IOM's recommendation to shift from "blaming" individual clinicians to improving systems
- Create measures that are actionable for physician practices
- Validate measures by relating them to clinical performance and patient experience results

# Adapting PPC for the Patient-Centered Medical Home

- New PPC-PCMH version released in January 2008
  - Aligned standards with Joint Principles
  - Incorporated critical attributes of PCMH
  - Defined foundational elements (“must pass” requirements)
- PPC-PCMH endorsed by ACP, AAFP, AAP, AOA, other specialties and PCPCC for use in demos

***Endorsed by National Quality Forum Sept 2008  
(as “Medical Home System Survey”)***

# The Patient-Centered Medical Home Defined

*ACP, AAFP, AAP, AOA Joint Principles – April 2007*

- **Personal physician** – each patient has an ongoing relationship with a personal physician trained to provide first contact, continuous and comprehensive care.
- **Physician directed medical practice** – the personal physician leads a team of individuals at the practice level who collectively take responsibility for the ongoing care of patients.
- **Whole person orientation** – the personal physician is responsible for providing for all the patient's health care needs or taking responsibility for appropriately arranging care with other qualified professionals. This includes care for all stages of life; acute care; chronic care; preventive services; and end of life care.
- **Care is coordinated and/or integrated** across all elements of the complex health care system (e.g., subspecialty care, hospitals, home health agencies, nursing homes) and the patient's community (e.g., family, public and private community-based services). Care is facilitated by registries, information technology, health information exchange and other means to assure that patients get the indicated care when and where they need and want it in a culturally and linguistically appropriate manner.

# Who is Recognized?

- NCQA Recognizes practices, for PCMH it is those that meet the criteria described by the endorsed principles of the Patient-Centered Medical Home
- NCQA **defines a practice** as a physician or physicians practicing together at a single geographic location
- Recognition is at the practice-site level

# PPC-PCMH Content and Scoring

Standard 1: Access and Communication <b>A. Access and communication processes**</b> <b>B. Access and communication results**</b>	Pts <b>4</b> <b>5</b> 9	Standard 5: Electronic Prescribing A. Electronic prescription writing B. Prescribing decision support - safety C. Prescribing decision support - efficiency	Pts 3 3 2 8
Standard 2: Patient Tracking and Registry Functions A. Basic system for managing patient data B. Electronic system for clinical data C. Use of electronic clinical data <b>D. Organizing clinical data**</b> <b>E. Identifying important conditions**</b> F. Use of system for population management	Pts 2 3 3 <b>6</b> <b>4</b> 3 21	Standard 6: Test Tracking <b>A. Test tracking and follow up**</b> B. Electronic system for managing tests	Pts <b>7</b> 6 13
Standard 3: Care Management <b>A. Guidelines for important conditions **</b> B. Preventive service clinician reminders C. Practice organization D. Care management for important conditions E. Continuity of care	Pts <b>3</b> 4 3 5 5 20	Standard 7: Referral Tracking <b>A. Referral tracking**</b>	Pts <b>4</b> 4
Standard 4: Patient Self-Management Support A. Documenting communication needs <b>B. Self-management support**</b>	Pts 2 <b>4</b> 6	Standard 8: Performance Reporting and Improvement <b>A. Measures of performance **</b> B. Patient experience data <b>C. Reporting to physicians **</b> D. Setting goals and taking action E. Reporting standardized measures F. Electronic reporting to external entities	Pts <b>3</b> 3 <b>3</b> 3 2 1 15
		Standard 9: Advanced Electronic Communications A. Availability of interactive website B. Electronic patient identification C. Electronic care management support	Pts 1 2 1 4

**\*\* Must Pass Elements**

# PPC-PCMH Scoring

Level of Qualifying	Points	Must Pass Elements at 50% Performance Level
Level 3	75 - 100	10 of 10
Level 2	50 - 74	10 of 10
Level 1	25 - 49	5 of 10
Not Recognized	0 - 24	< 5

**Levels:** If there is a difference in Level achieved between the number of points and “Must Pass”, the practice will be awarded the lesser level; for example, if a practice has 65 points but passes only 7 “Must Pass” Elements, the practice will achieve at Level 1.

Practices with a numeric score of 0 to 24 points or less than 5 Must Pass Elements are not Recognized.

# PCMH Must Pass Elements

1. **PPC1A:** Written standards for patient access and patient communication
2. **PPC1B:** Use of data to show meeting this standard
3. **PPC2D:** Use of paper or electronic-based charting tools to organize clinical information
4. **PPC2E:** Use of data to identify important diagnoses and conditions in practice
5. **PPC3A:** Adoption and implementation of evidence-based guidelines for three conditions
6. **PPC4B:** Active support of patient self-management
7. **PPC6A:** Tracking system for tests and to identify abnormal results
8. **PPC7A:** Tracking referrals with paper-based or electronic system
9. **PPC8A:** Measurement of clinical and/or service performance
10. **PPC8C:** Performance reporting by physician or across the practice

# Data Sources & Health Information Technology (HIT) Guidance

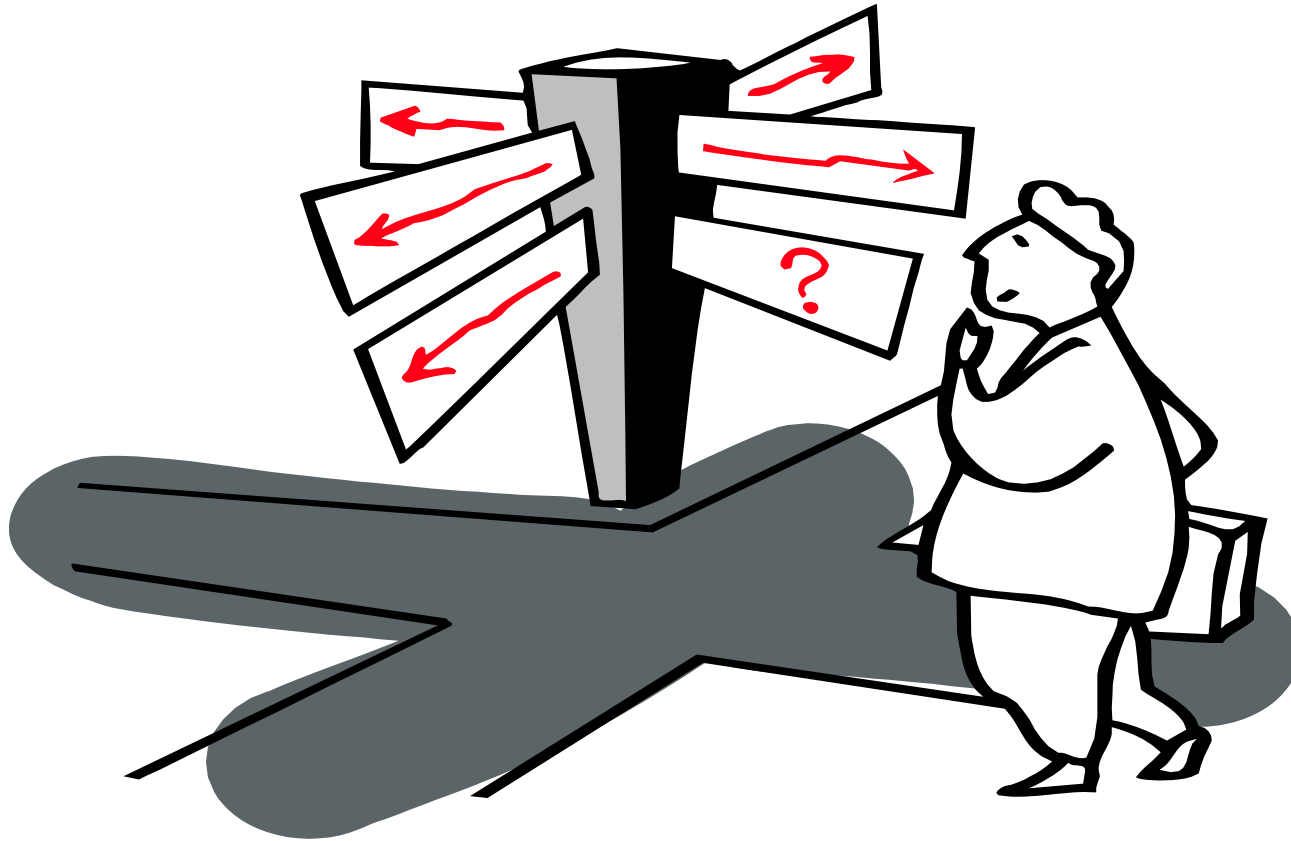
- Elements may have multiple suggestions for data sources and documentation– select what your practice would use to demonstrate that function and describe how it is used
- Each element indicates the type of health information technology needed to perform the functions
  - Basic – (HIT) Basic
    - Paper-based or basic (mostly administrative) electronic system
  - Intermediate – (HIT) Intermediate
    - Electronic system for clinical functions
  - Advanced – (HIT) Advanced
    - Electronic system with connectivity or interoperability with other systems

# PCMH Elements by Type of Information Technology

Basic	Intermediate	Advanced
PPC 1 A - B	PPC 2 B, C, F	PPC 6 B
PPC 2 A, D, E	PPC 5 A - C	PPC 8 F
PPC 3 A - E	PPC 8 E	
PPC 4 A - B	PPC 9 A - C	
PPC 6 A		
PPC 7 A		
PPC 8 A - D		
<b>TOTAL = 18</b>	<b>TOTAL = 10</b>	<b>TOTAL = 2</b>

Practice can achieve a passing score on **Must Pass** Elements with Basic Information Technology

# What is the NCQA application and survey process?



# Steps for the Physician/Practice

1. Review program information
2. Participate in a standards workshop (See [www.ncqa.org/rptraining.aspx](http://www.ncqa.org/rptraining.aspx))
3. Obtain a Survey Tool
4. Participate in a WebEx ISS demonstration of the Survey Tool
5. Use Survey Tool to self-assess current performance
6. Submit completed application, agreements, fee, and results to NCQA when ready
7. Receive final Recognition decision and Level in 30 – 60 days

# Using the On Line Survey Tool

## Steps for the practice:

1. Purchase license to use Survey Tool
2. Get user ID and password from NCQA
3. View WebEx training
4. Select important conditions
5. Enter responses
6. Organize supporting documentation
7. Attach documents
8. Review results
9. Upload documents\*
10. Submit Survey Tool\*

\*Must have sent in application and received confirmation that tool is ready for upload and submission

# NCQA Website: ISS Login

## *Access to Survey Tool*

The screenshot shows the NCQA website interface. At the top left is the NCQA logo with the tagline "Measuring quality. Improving health care." To the right of the logo are navigation links: "Home | Contact Us | Site Map". Below these is a search bar with a "Search" button. Further right are links for "Email Alerts" and "Print Page". A horizontal navigation bar contains the following links: "ACCREDITATION | CERTIFICATION | RECOGNITION | ISS LOGIN". A green arrow points to the "ISS LOGIN" link. Below the navigation bar is a large banner with a red header that reads "PUTTING QUALITY FIRST". The banner features an image of the US Capitol building and text that says: "Improving health care quality is vital to any reform agenda. NCQA has four reform proposals to help every American get the high-quality care they deserve." Below this text is a link: "Read NCQA's reform proposals" with a red arrow. To the left of the banner is a vertical menu with the following items: "Programs", "HEDIS & Quality Measurement", "Report Cards", "Public Policy", "Publications & Products", "Education & Events", "Newsroom", "Sponsors", and "About NCQA". Below the banner are three content blocks. The first block is titled "Choose Health Care Wisely" and includes a photo of a man and a child, text about making health care choices, and a link "Visit the Health Plan Report Card" with a red arrow. Below this is a "Learn More" link with a red arrow. The second block is titled "NCQA Headlines" and includes a link ">Visit Newsroom", the date "05.06.2009", and the text "Study: Physician Performance Can Be Tiered Using Measure Composites". The third block is partially visible and titled "America's Best".

# NCQA Web-Based Survey Tool

- **Interactive System Survey (ISS) Tool allows practices to:**
  - Enter responses in Survey Tool
  - Attach documents to Survey Tool that support responses
- **Survey Tool scores the responses**
- **Practices can use the Tool to self-assess**

# To Enter the Survey Tool

## Interactive Survey System

### Publications and Survey Tools

Your organization has licensed the following Web-based publications.

*In this section, use the survey tool(s) to complete your organization's self-evaluation prior to submitting to NCQA. Once the survey tool has been submitted, you may view the information submitted to NCQA. The survey tool will not contain the results of NCQA's evaluation. To view the preliminary or final results of the NCQA survey, scroll down to [Survey & Results](#).*

Please select one to use:

#### PPC-PCMH

- [PPC-Patient-Centered Medical Home comp for Mina\\_H](#)  
(License 1599)

## Administration

Click on the link below to enter the administrative area.

- [Administrative Functions](#)
- [Change User Password](#)

Welcome to NCQA's Interactive Survey System which contains all the information necessary for understanding and undergoing an NCQA Accreditation, Certification or Recognition program. We've designed our electronic format to facilitate understanding of our standards and make our survey process more efficient.



Margaret E. O'Kane,  
President, NCQA

For any NCQA evaluation program, you can purchase either of two components of the Interactive Survey System. The first component - Standards and Guidelines - presents the details of our programs in a searchable, layered format via the Web. Using the second component - the Survey Tool, which has the Standards and Guidelines embedded in it - you can evaluate your performance against the standards as NCQA will evaluate it and you can prepare for an NCQA survey. When you are ready, the Survey Tool becomes the basis for the NCQA survey. You complete the Survey Tool, attach necessary documentation and submit both to NCQA. Using the Survey Tool allows you to fully understand how you meet the standards and allows NCQA to conduct surveys economically and efficiently, with most of the survey occurring

# Enter the Survey Tool





## Survey Tool

**To enter the Survey Tool, select a tab above.**

This section includes all the Standards that are used for evaluation. The categories in the tabs above organize the Standards. Each category includes information about the Standards necessary to understand the survey process. This information includes:

- the Standards
- elements that specify exactly how the Standards are evaluated and scored
- specific scoring rules for each element
- the data source needed to document the scoring
- the scope of review for each element and
- additional explanation and examples

This dynamic Survey Tool is used to evaluate organizations and individuals. The Survey Tool allows you to evaluate yourself just as we will, but at your own pace. You may score yourself, attach the necessary documentation and make comments. Following your readiness evaluation, if you elect to apply for a survey, you submit the Survey Tool to begin the formal survey process.

You may access a complete glossary of terms by selecting Glossary on the menu. Key terms in the [Glossary](#) are highlighted and identified with the  symbol. You may view a glossary definition at any time by clicking on the  symbol.

# To Open the Standards

## Physician Practice Connections-Patient Centered Medical Home

This category includes the following Standards:

### [PPC1 - Access and Communication](#)

[View Points](#)

Elements: [A](#) - [B](#)

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### [PPC2 - Patient Tracking and Registry Functions](#)

[View Points](#)

Elements: [A](#) - [B](#) - [C](#) - [D](#) - [E](#) - [F](#)

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### [PPC3 - Care Management](#)

[View Points](#)

Elements: [A](#) - [B](#) - [C](#) - [D](#) - [E](#)

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### [PPC4 - Patient Self-Management Support](#)

[View Points](#)

Elements: [A](#) - [B](#)

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### [PPC5 - Electronic Prescribing](#)

[View Points](#)

# PPC1A

PHYSICIAN PRACTICE CONNECTIONS-PATIENT CENTERED MEDICAL HOME

← PREVIOUS STANDARD

Save

NEXT STANDARD →

## PPC1: Access and Communication [View Points](#)

The practice<sup>☒</sup> has standards for access to care and communication with patients, and monitors its performance to meet the standards.

### Intent

The practice provides patient access during and after regular business hours, and communicates with patients effectively.

### ELEMENT A - Access and Communication Processes

[View Points](#)

The practice<sup>☒</sup> establishes in writing standards for the following processes to support patient access:

	Yes	No	NA
1. scheduling each patient with a personal clinician for continuity of care	<input type="radio"/>	<input type="radio"/>	
2. coordinating visits with multiple clinicians and/or diagnostic tests during one trip	<input type="radio"/>	<input type="radio"/>	
3. determining through triage how soon a patient needs to be seen	<input type="radio"/>	<input type="radio"/>	
4. maintaining the capacity to schedule patients the same day they call	<input type="radio"/>	<input type="radio"/>	
5. scheduling same day appointments based on practice's <sup>☒</sup> triage of patients' conditions	<input type="radio"/>	<input type="radio"/>	

# Review the Explanation and Examples

- 10. providing an interactive practice Web site
- 11. making language services available for patients with limited English proficiency
- 12. identifying health insurance resources for patients/families without insurance.

## Scoring:

100%	75%	50%	25%	0%
Practice has written process for 9-12 items	Practice has written process for 7-8 items	Practice has written process for 4-6 items	Practice has written process for 2-3 items	Practice has written process for 0-1 items

**Data Source:** Documented process, Reports

**Scope of Review:** ONCE--NCQA scores this element once for the organization.

**Reference Information:** [Explanation](#) | [Examples](#)

ELEMENT SCORE

DOCUMENTS

SUPPORT  
TEXT / NOTES

# Link Documents and Enter Text of Explanation

- 9. e-mail address (or "none" for patients)
- 10. internal ID
- 11. external ID
- 12. emergency contact information
- 13. current and past diagnoses
- 14. dates of previous clinical visits
- 15. billing codes for services
- 16. legal guardian
- 17. health insurance coverage
- 18. patient/family preferred method of communication.

**Scoring:**

100%	75%	50%	25%	0%
12-18 items were entered for 75-100% of patients	8-11 items were entered for 75-100% of patients	6-7 items were entered for 75-100% of patients	4-5 items were entered for 75-100% of patients	0-3 items were entered for 75-100% of patients

**Data Source:**  
**Scope of Review:**  
**Reference Information:**

Reports  
 ONCE--NCQA scores this element once for the organization.

[Explanation](#) | [Examples](#)

- ELEMENT SCORE
- DOCUMENTS
- TEXT / NOTES AVAILABLE

Click here to link documents

Click here to enter explanatory text

# Click "Results" Tab



## PHYSICIAN PRACTICE CONNECTIONS-PATIENT CENTERED MEDICAL HOME

### Survey Tool

To enter the Survey Tool, select a tab above.

This section includes all the Standards that are used for evaluation. The categories in the tabs above organize the Standards. Each category includes information about the Standards necessary to understand the survey process. This information includes:

- the Standards
- elements that specify exactly how the Standards are evaluated and scored
- specific scoring rules for each element
- the data source needed to document the scoring
- the scope of review for each element and
- additional explanation and examples

This dynamic Survey Tool is used to evaluate organizations and individuals. The Survey Tool allows you to evaluate yourself just as we will, but at your own pace. You may score yourself, attach the necessary documentation and make comments. Following your readiness evaluation, if you elect to apply for a survey, you submit the Survey Tool to begin the formal survey process.

# Click to See “Must Pass Results”

[Return to Results Index](#)

The screenshot shows a web interface with three navigation tabs: 'STATUS', 'SUMMARIZED & DETAILED RESULTS', and 'MUST PASS RESULTS'. The 'MUST PASS RESULTS' tab is highlighted with a green border. Below the tabs, the main content area displays the title '2008 PPC-Patient-Centered Medical Home' and a paragraph explaining that the section provides summary and detailed results and recommendations. It also states that overall scoring results are available at the category, Standard and element levels. A second paragraph notes that based on information compiled during the recent review, the status listed below is awarded, and status descriptions can be found by clicking the Policies and Procedures tab. Under the heading 'General Information', the following details are listed: Name: NCQA, Status: Not Available, Valid Dates: Not Available, Standards Year: 2008, Score: 4.00, Overall Score: 4.00 out of 100.00, and Unit Of Assessment: (blank).

**STATUS**   **SUMMARIZED & DETAILED RESULTS**   **MUST PASS RESULTS**

## 2008 PPC-Patient-Centered Medical Home

This section provides summary and detailed results and recommendations. Overall scoring results are available and at the category, Standard and element levels.

Based on information compiled during the recent review, We award the status listed below. Status descriptions can be found by clicking the Policies and Procedures tab.

### General Information

**Name:** NCQA  
**Status:** Not Available  
**Valid Dates:** Not Available  
**Standards Year:** 2008   **Score:** 4.00  
**Overall Score:** 4.00 out of 100.00  
**Unit Of Assessment:**

# Results: “Must Pass Elements”

Possible Status	Number of Points	Must Pass Elements at 50% Scoring Level
Recognized-Level III:	75-100	10 out of 10
Recognized-Level II:	50-75	10 out of 10
Recognized-Level I:	25-50	5 out of 10
Not Recognized:	0-25	0 out of 10

If there is a difference in Level achieved for the number of points and the Must Pass elements, the practice will be awarded the lesser level. For example, if a practice has 65 points but passes only 7 Must Pass Elements, the practice will achieve Level 1 Recognition.

Practices with a numeric score of 0 to 24 points or less than 5 Must Pass Elements receive a Not Recognized status.

Number of Must Pass Elements Passed: **10**  
 Maximum Status: **Recognized-Level III**

Standard	Element	Your Score	Minimum Score Required	Unit Of Assessment Affected	Passed
PPC1	Element B	50.00%	50.00%	All	Yes
PPC1	Element A	75.00%	50.00%	All	Yes
PPC2	Element E	75.00%	50.00%	All	Yes
PPC2	Element D	100.00%	50.00%	All	Yes
PPC3	Element A	100.00%	50.00%	All	Yes
PPC4	Element B	50.00%	50.00%	All	Yes
PPC6	Element A	50.00%	50.00%	All	Yes
PPC7	Element A	100.00%	50.00%	All	Yes

# Documentation Time Periods

- Materials, documented processes, records, files and examples should show implementation and use for **at least 3 months prior to submission**
- Reports and data (including Record Review Workbook) should show current performance **not older than 12 months**
- Where a specific reporting period is stated for a denominator, it is **for the last 3 months** (i.e., PPC 2A Use of Patient Data)

# PPC-PCMH Survey Process

1. NCQA receives Survey Tool
2. NCQA evaluates Survey Tool
  - Responses, documentation, and explanations
  - Practice may be contacted for clarifications
3. On-site audit - 5% of practices
4. Executive reviewer conducts a secondary review
5. Survey Tool is referred to a trained Review Oversight Committee (ROC) member for a peer review
6. Final decision and status determined
7. Report results with Level 1, 2, or 3
  - Recognition posted on NCQA Web site
  - Not passed - not reported
8. PPC-PCMH certificate and recognition packet
9. Practice achieving Level 1 or 2 can do add-on survey within the 3 year recognition time period

# Training and Resources

- Training

- Scheduled audio-conference workshops on standards and meeting the documentation requirements
- WebEx demonstrating the Interactive Survey System software (ISS)
- Recorded versions of both training programs and short “just in time” help sessions covering:
  - Getting started
  - NCQA’s Record Review Workbook
  - Documentation
  - Final Steps to Submission
- Live training presentations may be arranged

- Resources

- Customer Support 888-275-7585
- Dedicated email address [ppc-pcmh@ncqa.org](mailto:ppc-pcmh@ncqa.org) for on-going Q&A
- FAQs posted on web site covering each standard
- Guided multi-site application process for large practices sharing systems across multiple sites

# NCQA Contact Information

## Contact NCQA Customer Support to:

- Acquire standards documents, application materials, and survey tools
- Questions about your user ID, password, access
- 1-888-275-7585

## Visit NCQA Web Site to:

- View Frequently Asked Questions
- View Recognition Programs Training Schedule

## Submit to questions to [ppc-pcmh@ncqa.org](mailto:ppc-pcmh@ncqa.org)

Please use this e-mail box to:

- Ask about interpretation of standards or elements
- Submit application materials (physician workbook and application)
- Request registration for ISS Survey Tool demonstration (Web-ex)

