



## **Summary of Significant NCQA PCMH 2014 Clarifications**

**Released November 2016**

### **Changes to ISS Survey Tool:**

Added questions to the Practice Information tab of the Organizational Background, including Practice Ownership, Patient Population and Participation in Initiatives.

### **Changes to the Standards and Guidelines:**

Added the following language to the documentation section of Elements 1A, 2C, 3A-E, 5B and 5C: NCQA reviews the Organizational Background “Practice Information” in the ISS Survey Tool, to gain a better understanding of the patient population and how the practice functions. Completing this information is recommended, but is not required.

### **Element 1C Documentation & Explanation:**

Removed the following text in the explanation: ~~Practices with a website or patient portal provide the URL to their patients.~~

Modified the following text in the documentation: Practices with a website or patient portal provide the URL to NCQA as part of the documentation. Reports submitted must be based on at least three months of recent data in the practice’s electronic system and must include the reporting period, rate, numerator and denominator.

### **Element 2C Documentation & Explanation:**

Added the following text to the documentation for factor 1:

Note: If the practice selects an aspect of diversity in factor 1 that is not used to evaluate a potential health disparity in PCMH 6, it provides an explanation for the selection.

### **Element 3B Documentation & Explanation:**

Modified the following text in the explanation of factor 9:

If it is documented in a patient’s medical record that the patient does not take prescribed medications (“None”), the patient counts toward the numerator.

### **Element 5B Documentation & Explanation:**

Added the following text to the documentation for factor 1:

The practice uses available data on the performance of clinicians or practices to which it refers its patients

NCQA reviews the source or examples of the type of information the practice team has available on specialist performance.



Added the following text to the explanation for factors 3 and 4:

Note: Acceptable behavioral healthcare providers for factors 3-4 include:

- Doctors of medicine (MD) and Doctors of osteopathy (DO) who are state certified or licensed in psychiatry and/or addiction medicine.
- Physician assistants (PA) who are state licensed and are practicing under the supervision of an MD or DO as listed above.
- Advanced practice registered nurses (APRN) (including nurse practitioners and clinical nurse specialists who are state certified or licensed as nurses and credentialed as either psychiatric nurses or psychiatric mental health practitioners.
- Doctoral or master's-level psychologists who are state certified or licensed.
- Doctoral or master's-level clinical social workers who are state certified or licensed.
- Doctoral or master's-level marriage and family counselors who are state certified, registered or licensed by the state to practice independently.
- Doctoral or master's-level alcohol and drug counselors who are state certified, registered or licensed by the state to practice independently.

**Removed the following text from the explanation for factor 7: Summary of care record does not need to be electronic itself to meet this factor, it just needs to be produced electronically.**

**Element 5C Documentation & Explanation:**

**Removed the following text from the explanation for factor 7: Summary of care record does not need to be electronic itself to meet this factor, it just needs to be produced electronically.**

**Element 6A and 6B Documentation & Explanation**

Added the following text to the documentation for factors 1-4: **The practice provides a brief explanation or identifies the nationally-recognized source for each selected measure.**

**Element 6D Documentation & Explanation**

Added the following notes to the documentation: The PCMH Quality Measurement and Improvement Worksheet is an optional reporting method; however, practices are encouraged to consult the worksheet for reporting guidelines for this element and examples. Note: Practices renewing under the streamlined renewal process and attesting to Elements 6A and 6C must provide baseline data, including at least the measurement period and rate (percent).