
Effective April 13, 2012

Structure &
Process
Measures,
Guidelines
for the
Evaluation
of Special
Needs
Plans

CMS Contract No. HHSM-500-2006-00060C

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Introduction

The National Committee for Quality Assurance (NCQA) is pleased to release the 2012 *Structure & Process Measures for Medicare Advantage Special Needs Plans (SNPs)*, effective April 13, 2012. The *Structure & Process measures* are available via the Web-based Interactive Survey System (ISS).

SNPs have been given specific legislative and regulatory authority that allows them to focus on specific subsets of the Medicare population with the intent to improve care and control costs for these beneficiaries. Consistent and comparable measures that reflect the service delivery and outcomes important to these populations and to promote quality improvement and maturation of SNP products are necessary.

The Centers for Medicare & Medicaid Services (CMS) and the National Committee for Quality Assurance (NCQA) are presenting a strategy to evaluate SNPs. CMS and NCQA look forward to working with all stakeholders to continue to develop meaningful approaches to evaluating the

performance of SNPs in providing high quality care and improving the health outcomes of beneficiaries.

We are engaged in a multi-year strategy to evaluate SNPs. Over time, we seek to incorporate measures that capture the vital structures and processes SNPs have in place to ensure their members receive comprehensive, coordinated care that reflects their special populations' needs and experiences. In 2008, the first year of this effort focused on core SNP requirements—those that apply to all SNPs, regardless of type (i.e., dual eligible, chronic care, institutional)—using existing measures validated in other health plan settings. The focus of the second and third years was on measures that address the special needs of specific SNP populations and on more mature quality improvement efforts. In 2009, NCQA included three new Structure & Process measures and two additional elements for the existing Structure & Process measures. In 2010, NCQA continued to focus on the Structure & Process measures introduced in 2009. The focus in 2011, centered on assessing SNP's performance against the entire complement of core and SNP-specific requirements once more. For the next reporting period that begins October 15, 2012, the Structure & Process measures include specific requirements that focus more on evidence of implementation and actions by SNPs and some new requirements for plans that completed the previous year's assessment.

The NCQA process used to develop these structure and process measures included: field-testing, public comment and approval by the NCQA Geriatric Measurement Advisory Panel (GMAP), which includes plan, physician and consumer representatives.

We wish to thank, in particular, the Geriatrics Measurement Advisory Panel for providing guidance on all past and our future development of measures for this assessment program.

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Overview

NCQA is pleased to release the 2012 *Structure & Process Measures for Special Needs Plans*, effective April 13, 2012.

Structure & Process Measures and Guidelines

Each measure includes the following information.

Measure statement	A statement about acceptable performance or results.
Intent statement	A sentence that describes the importance of the measure.
Element	The component of a measure that is scored and provides details about performance expectations. NCQA evaluates each element within a measure to determine the degree to which the organization has met the requirements within the measure.
Factor	An item within an element that is scored. For example, an element may require the organization to demonstrate that a specific document includes four items. Each item is a factor.
Scoring	The level of performance the organization must demonstrate to receive a specified percentage of element points. Each element has up to five possible scoring levels (100%, 80%, 50%, 20%, and 0%).
Data source	Types of documentation or evidence that the organization uses to demonstrate performance on an element. NCQA defines four types of data sources. <ol style="list-style-type: none"> 1. Documented process—Policies and procedures, process flow charts, protocols and other mechanisms that describe an actual process used by the organization 2. Reports—Aggregated sources of evidence of action or compliance with an element, including management reports; key indicator reports; summary reports from member reviews; system output giving information like number of member appeals; minutes; and other documentation of actions that the organization has taken 3. Materials—Prepared materials or content that the organization provides to its members and practitioners, including written communication, Web sites, scripts, brochures, reviews and clinical guidelines

4. **Records or files**—Actual records or files, such as denial, appeal or credentialing files that show direct evidence of action or compliance with an element

Scope of review	The extent of the organization’s services evaluated during an NCQA survey. The scope of review varies depending on elements and how product lines/ products are administered.
Look-back period	The period of time for which NCQA evaluates an individual or organization’s documentation to assess performance against an element. Under certain circumstances, NCQA may expand the look-back period.
Explanation	Guidance for demonstrating performance against the element.
Examples	Descriptive information illustrating performance against an element’s requirements. Examples are for guidance and are not intended to be all-inclusive.

Survey Tool

The Survey Tool guides the organization through documenting performance against the Structure & Process measures and enables electronic submission of information, streamlining the evaluation process. The organization can use the Survey Tool, which contains fields for entering data and calculating results, to perform a readiness evaluation prior to the NCQA survey.

Reporting

NCQA is collecting this data for CMS under Contract No. HHSM-500-2006-0006C. NCQA will analyze the data and submit a report to CMS September 28, 2013.

Where to Find Specific Information

The *Structure & Process Measures* include *Policies and Procedures*, measures and elements, scoring guidelines and appendices.

See the Policies and Procedures for...

- Information on organizations required by CMS to participate in Special Needs Plan Evaluation
- The responsibilities of organizations seeking evaluation
- Information on the Survey Tool and readiness evaluation
- Information on reporting evaluation results to organizations
- Information on the evaluation Survey process
- Information on attaching documents and submitting the Survey Tool

See the Structure & Process Measures for...

- The Structure & Process measures
- The intent of the Structure & Process measures
- Elements and scoring guidelines that describe the requirements for an organization to achieve different performance levels for each element
- Data sources used to demonstrate compliance with an element
- Scope of review
- Look-back period
- An explanation of expectations for demonstrating performance against the element's requirements

See the Appendices for...

- A glossary (Appendix 1)

Other Important NCQA Information

The Interactive Survey System (ISS) is the Web-based data collection tool that NCQA uses to collect health plan data for its evaluation surveys. In addition to the ISS, NCQA provides a variety of information to help organizations prepare for Evaluation Surveys.

- Policy clarifications can be obtained by accessing the NCQA Policy Clarification Support (PCS) system on the NCQA Web page (http://app04.ncqa.org/pcs/web/asp/TIL_ClientLogin.asp). NCQA staff generally respond to PCS inquiries within three business days.
- NCQA training seminars provide valuable information on SNP Structure & Process measures and the survey process. Information about specific training seminars can be obtained by visiting the NCQA SNP Web page (www.ncqa.org/snp) or by calling NCQA Customer Support at 888-275-7585.

Policies and Procedures

Policies and Procedures

Section 1: Determining Eligibility and Organization Readiness

Eligibility for Evaluation

As required by the Centers for Medicare & Medicaid Services (CMS), all Special Needs Plans that were effective as of January 1, 2011 and have renewed their contracts for 2012 must submit data based on the Structure & Process measures through NCQA's Interactive Survey System.

- The organization must provide a separate submission for each SNP benefit package (Combination of CMS H-number and Plan ID).
- NCQA offers an evaluation option to national or regional organizations that provide centralized functions for health plans at the benefit package level. The organization must have at least four (4) SNP benefit packages of the same SNP type (i.e., dual eligible, chronic or institutional) that operate under the same primary entity (e.g., share the same policies and procedures, case management systems or clinical quality improvement programs). The functions potentially eligible for this evaluation option include functions developed or performed at the SNP primary entity level and implemented uniformly at the benefit package level (Plan ID).

SNPs must document where the function or process required by each structure and process measure is performed (i.e. primary or benefit package level) and provide a detailed but concise explanation regarding why a specific structure and process measure should be surveyed once at the SNP primary level. NCQA will make all final determinations on whether an organization is eligible for a primary entity review.

How NCQA Defines a Health Plan for Evaluation

For purposes of the SNP Evaluation program, NCQA, under CMS's direction, will be evaluating plans at the SNP benefit package level (combination of H-number and Plan ID from CMS).

Survey Tool and Readiness Evaluation

All organizations undergoing SNP Structure & Process measure evaluation must use the NCQA ISS Web-based **Survey Tool** and agree to NCQA's standard license terms. The Survey Tool guides the organization through documenting performance against the Structure & Process measures. It contains fields for entering data and calculating results. The organization can use the Survey Tool to perform a readiness evaluation prior to the NCQA survey and determine what information it needs to demonstrate how it meets the SNP Structure & Process measures.

Reports and results Reports and numeric results generated or otherwise received from use of the Survey Tool are preliminary and do not constitute a final determination from NCQA.

The organization may only use the reports and numeric results from the readiness evaluation for internal business purposes to examine, review and otherwise analyze its business operations, and may not use, disclose,

represent or otherwise communicate these reports or numeric results to any third party for any other purpose. The organization may not represent that it is NCQA Accredited at any time.

Prohibited activities

- No individual or entity may purchase a license to use the Survey Tool from NCQA or use it, regardless of the source, to evaluate another organization against the SNP Structure & Process measures. This prohibition does not apply to individuals or entities that are assisting the organization with its readiness evaluation and preparation for the SNP Survey.
- The organization may not use the Survey Tool to evaluate another organization against the SNP Structure & Process measures except as part of its own internal preparation for an NCQA Survey, including specifically evaluating a delegate's performance in order to conduct oversight as required by the SNP Structure & Process measures.
- The organization may not allow a third party to use the Survey Tool it has licensed to evaluate another organization against the SNP Structure & Process measures.

Section 2: The Evaluation Process

How Organizations Are Evaluated

NCQA evaluates the organization, by SNP benefit package, on its performance against the SNP Structure & Process measures.

The organization's responsibility

- Bring forward for evaluation all SNP plan benefit packages effective as of January 1, 2011 and renewed for 2012. This includes products that may be offered under either an HMO or PPO license. The organization must include all members enrolled in all eligible SNP plan benefit packages.

Reporting Results

NCQA will provide a report to CMS highlighting individual plan performance against the Structure & Process measures. This evaluation is not an accreditation survey and NCQA will not issue an accreditation or overall evaluation status. NCQA will review the initial Survey Tool after the October 15, 2012 submission date and then conduct a plan comment period as part of the formal review process sometime between October 15, 2012 and May 31, 2013. Once NCQA makes a scoring decision after the plan comment period, all scores are final.

Reporting Evaluation Status to the Public

NCQA will not publicly report results. NCQA will provide the evaluation results and raw data to CMS as part of its contractual obligations. CMS will make all decisions regarding whether and how plan-level data will be publicly reported.

Section 3: The Survey Process

The Survey Process

Scheduling

NCQA will provide all SNPs with the names and affiliations of all the surveyors who will perform Structure & Process evaluation surveys. The organization has the opportunity to declare if it believes any surveyors have a conflict of interest. Conflict of interest may be based on direct or indirect financial relationships or economic competition.³

An organization that objects to an individual's participation based on a perceived conflict of interest must notify NCQA in writing of any such objection, and the reason for the objection, within two weeks following receipt of the NCQA notification. NCQA may select and present alternative surveyors. NCQA reserves the right to make a final determination regarding a conflict of interest.

³A surveyor is deemed to have a "direct financial relationship" with the organization if he or she is a beneficial owner of more than 1 percent of the equity or control of the organization, is a director or officer of the organization, is an employee of the organization, engages in the sale or lease of real estate or personal property to the organization, furnishes services (including management or consultant services) to the organization within two years preceding the date of the organization's survey by NCQA or has a creditor-debtor relationship with the organization. An organization is considered in "direct economic competition" with the organization being surveyed if it operates in the same local market.

Survey Tool	<p>The ISS allows the organization to perform a readiness evaluation against the Structure & Process measures at its own pace. The organization uses the same tool to submit data to NCQA for a Survey. The Survey Tool and readiness evaluation period are designed to educate the organization about NCQA requirements and to gather documentation of organization performance against the SNP Structure & Process measures.</p> <p>The organization uses the Survey Tool to document its performance against the Structure & Process measures and attaches supporting documentation. During this time, prior to submission of the completed Survey Tool, only the organization accesses the Survey Tool and attached documentation. NCQA does not access the organization’s Survey Tool or information during this period except for system maintenance purposes. The organization may revise its readiness evaluation, enter comments and update or change attached documents as often as it wishes.</p> <p>The Survey Tool prompts the organization for answers to direct questions tied to scoring for each element. The organization attaches documents that demonstrate how it meets element requirements, referencing the appropriate page in the document to facilitate the survey process. The organization may also enter comments in the space provided in the Survey Tool. The organization should provide an explanation for any element checked NA.</p>
Survey Tool set-up	<p>Because NCQA is surveying new and returning SNP plans, the organization must determine which option it needs to use for the survey:</p> <ul style="list-style-type: none">• Returning Survey: SNP benefit packages that completed the survey in 2011 must select the “Returning Survey” option• Initial Survey: SNP benefit packages that are completing a survey for the first time in 2012 must select the “Initial Survey” option <p>The Survey Tool refers to these options as Evaluation Options. The Set Up Survey Tool button on the menu bar of the Survey Tool opens a set of options. Among these is <i>Select Evaluation Options</i>, which allows the organization to choose the correct option. The Survey Tool uses the organization’s selections to collect and score data only for measures and elements included in the selected option.</p> <p>An email notifying each SNP about the availability of SNP-specific survey tools will be sent to each SNP by June 1, 2012. . This email will provide the SNP with information on how to access their survey tool and submit the required information by October 15, 2012.</p>
Attaching documents	<p>Each element indicates the recommended data source. NCQA requests that the organization attach <i>no more than three documents</i> to support performance against each element (if a single document demonstrates compliance with more than one element, the organization should attach only one copy of the</p>

document). Attached documents may include instructions for accessing the organization's Web site to view materials, or may instruct surveyors about remote access to the organization's computer system.

If supporting documents are not already in electronic format, the organization may scan them and attach them as portable document format (PDF) files. For security reasons and to reduce the risk of viruses, NCQA limits the format of electronic documents that may be submitted. The Survey Tool contains detailed information about the type of electronic documents permitted and recommended formats for scanning to maximize readability.

The organization should not attach documents containing Protected Health Information (PHI) to the Survey Tool.

If the organization's documentation includes policies and procedures, NCQA does not require it to attach signed copies of policies and procedures to the Survey Tool as evidence of meeting the intent of a specific element or as evidence of policy review and update. The organization can demonstrate that it has reviewed and updated a policy by including appropriate information on the effective date and subsequent revision dates in a header, cover sheet or addendum.

Submitting the Survey Tool

The organization submits its completed Survey Tool and related documentation to NCQA via the Web. For survey purposes, the copy sent to NCQA and the attached documents are final upon submission; however, the organization will have access to a copy of the tool with the data it submitted.

Once the survey begins, the organization may not withdraw from the evaluation process.

Submitting the Survey Tool involves several steps. The time needed to copy and send documents varies, depending on the number and size of documents and speed of Internet connection. The organization must allow sufficient time to meet the survey due date.

Note: NCQA encourages the organization to print the Survey Tool's Submission Instructions, which describe the process and provide suggestions on how to send documents efficiently.

Survey team composition

For the SNP surveys, there will be one surveyor.

Surveyors typically have experience in and responsibility for quality management in their own organizations. Many are medical directors and are either senior clinicians or senior administrators. All surveyors complete a surveyor-training program and annual update training.

Systems and materials reviewed and performance assessment

- NCQA reviews the organization’s quality-related systems and assesses performance against applicable SNP Structure & Process measures.

NCQA’s assessment of performance against Structure & Process measures and elements includes, but is not limited to, the following.

- Written documentation and records provided by the organization in the Survey Tool

Offsite survey and plan comment

NCQA’s documentation review occurs during an offsite review period. The survey begins once NCQA formally receives the completed Survey Tool and supporting documentation. NCQA restricts the organization’s access to the Survey Tool after submission and does not grant additional access rights to the organization until the final report phase of the survey process.

NCQA surveyors access and review the Survey Tool and supporting documentation to evaluate the organization’s responses and to recommend a score for each applicable element. The organization can view a copy of the submitted Survey Tool and supporting documentation while the survey is in progress.

NCQA will conduct a plan comment period for any SNP where NCQA requires more information in order to properly assess a SNP’s ability to demonstrate performance against the requirements for the specified factors and elements of a measure. If NCQA determines that a plan comment period is warranted, NCQA will contact the organization via email and include an Outstanding Issues Form (OIF) to document preliminary survey results for review and comment. The organization will have a limited timeframe (no more than 3 business days) with which to respond to NCQA. The organization will be able to submit comments regarding factual errors or omissions and may provide additional documents to support its performance. The organization may only submit information that existed at the time of the original completed Survey Tool submission; it may not introduce information that did not exist at the time of the original submission.

NCQA reviews the organization’s comments and additional supporting documentation and then makes a final determination on the element’s score. Once NCQA makes this decision after the plan comment period, all scores are final. The plan comment period will take place after the survey submission date, October 15, 2012.

Findings that do not address SNP Structure & Process measures

If NCQA finds that an aspect of the organization’s operations may adversely affect the health and safety of members, the finding may be considered by NCQA, even if the SNP Structure & Process measures do not specifically address such operations.

If NCQA identifies a condition that poses a potential imminent threat to the health or safety of members or patients, it may relay the finding immediately to the SNP’s chief executive officer and CMS.

NCQA reserves the right to notify applicable regulatory agencies if it identifies aspects of the SNP's operations that pose a potential imminent threat to the health and safety of the organization's members. Prior to NCQA's notification to applicable regulatory agencies, NCQA will give the plan 24 hours in which the organization may correct the condition or rebut NCQA's findings. NCQA will consider the plan's correction of the condition or rebuttal of NCQA's findings and decide if a potential imminent threat to health or safety of the plan's members still exists.

Conflict with regulatory requirements

If federal or state regulation prohibits the organization from conducting an activity covered within a particular element, NCQA scores the activity NA. If the regulation includes an activity covered within a particular element, but there are slight differences (e.g., timeliness requirements, notification content), NCQA gives the organization credit if the organization demonstrates that it aligns its process to meet the measure's expectations to the extent possible within regulatory constraints.

The organization must present NCQA with documentation identifying the regulation and the conflict.

Scoring Guidelines

The scoring guidelines codify NCQA decision-making principles used to evaluate all organizations consistently against the SNP Structure & Process measures and can help the organization prepare more effectively for a survey.

NCQA uses the scoring guidelines to evaluate an organization's performance against each element. Scoring criteria are provided for 100%, 80%, 50%, 20% and 0%, as applicable.

Qualitative and quantitative elements

An **element** is a specific component of a measures that NCQA individually evaluates and scores.

Scoring elements

A measure may have one or multiple elements. Surveyors consider each element when evaluating performance. All elements have scoring guidelines for assigning 100%–0% performance associated with the element. Many elements do not have all five scoring levels; some may be scored 100% or 0% only. A scoring level that does not apply to an element is indicated by "No scoring option" in the appropriate box.

Disclaimer:

The evaluation results are based on the exercise of NCQA’s professional evaluative judgment. NCQA is not bound by any numerical or quantitative scoring system or other quantitative guidelines or indicators that, in its sole discretion, it may have used, consulted or issued to assist surveyors and others during the course of the evaluative process. Review by NCQA does not constitute a warranty or any other representation by NCQA to third parties (including, but not limited to, employers, consumers or organization members) regarding the quality or nature of the health services provided or arranged for by the organization. The provision of medical care is solely the responsibility of the organization and its practitioners/providers. NCQA review is not a replacement for the organization’s evaluation, assessment and monitoring of its programs and services.