

Qualified Health Plan Issuer Application Instructions

2021

**Extracted section:
Section 1D: Accreditation**

[05/2020]

Version 1.1

PY2021 QHP Instructions: Version 1.1 Revisions

- Reference to the Quality Improvement Strategy (QIS) submission requirement for PY2021 QHP Application has been removed from “Data Requirements.”
- Update to “Quick Reference: Key Changes for 2021” to note that CMS is suspending activities related to collection and reporting of QIS for PY2021.

Section 1D: Accreditation

1. Introduction

In the Accreditation section, issuers enter information to satisfy the accreditation QHP certification requirement. Issuers can provide information for an accredited product in the Commercial, Medicaid, or Exchange markets. These instructions apply only to FFE QHP issuers filing through HIOS.

Issuers in states performing plan management functions and State-based Exchanges on the Federal Platform should comply with the requirements for accreditation data collection specified by their state.

2. Data Requirements

To complete this section, an issuer needs information about which accrediting entity the issuer is accredited by—the National Committee for Quality Assurance (NCQA), URAC, or the Accreditation Association for Ambulatory Health Care (AAAHC).

3. Quick Reference

Key Changes for 2021

- ◆ CMS suspended activities related to the collection and reporting of quality improvement information for the Quality Improvement Strategy (QIS) for the Plan Year 2021 QHP Certification Period. Additional information is available in the [COVID-19 Marketplace Quality Initiatives Memo \(PDF\)](#).

Tips for the Accreditation Section

- ◆ If an issuer is entering its initial year of QHP certification, it must schedule (or plan to schedule) a review with a recognized accrediting entity (i.e., AAAHC, NCQA, or URAC). An issuer is not required to be accredited in its initial year of QHP certification.
- ◆ Any information provided on accredited products must be for the same legal entity in the same state that submits the QHP Application.
- ◆ If an issuer is entering its fourth consecutive year of QHP participation, it must be accredited in the Exchange market and with one of the following statuses:
 - AAAHC: Accredited
 - NCQA: Excellent, Commendable, Accredited, or Provisional
 - URAC: Full or Conditional.
- ◆ An issuer must provide its accrediting entities with the issuer legal name and HIOS Issuer ID used in its QHP Application to ensure the HIOS Issuer ID is included in the data file provided by the accrediting entity to CMS.
- ◆ Second year issuers who are not yet accredited can meet the second year requirement by submitting documentation from their accrediting entity that indicates the issuer completed the policies and procedures review and are scheduled or in process for additional review.
- ◆ Use the following naming convention for the accreditation certificate: [HIOS Issuer ID]_[Name of Accrediting entity], for example, “12345_NCQA.pdf.”

4. Detailed Section Instructions

Accreditation Questions	Steps
Does the applicant currently have any Commercial, Medicaid, or Marketplace health plans in this state, [state of issuer identified], accredited by an HHS-recognized accrediting entity?	Choose from the following options: <ul style="list-style-type: none">◆ Yes—if the issuer has existing health plan accreditations on any products in the Exchange, Commercial, or Medicaid market from NCQA or URAC. Dual-product issuers with an accredited medical plan should also select Yes. Proceed to the next step.◆ No—if the issuer is accredited by AAAHC, is offering SADPs, or is not currently accredited by NCQA or URAC.

Accreditation Questions	Steps
Issuers who respond Yes to the above question must then select the accrediting entity.	Choose from the following options: <ul style="list-style-type: none"> ◆ NCQA—if the issuer is accredited by NCQA. ◆ URAC—if the issuer is accredited by URAC. ◆ NCQA & URAC—if the issuer is accredited by both NCQA and URAC.

After responding to the above question, issuers will be asked to complete the Terms and Conditions attestation, regardless of whether they are accredited.

Accreditation Attestation	Step
Terms and Conditions	Check the “I agree to the terms and conditions” box.

An issuer may upload copies of its accreditation certificates into HIOS.

Accreditation Certificate	Steps
Scan Certificate	Scan each accreditation certificate (one per accredited market type). If an issuer is accredited by NCQA and does not have a copy of its accreditation certificate, use the NCQA Interactive Survey System (ISS) to get a copy of the survey results. Log into ISS, click on the Results tab, view the survey results, and print the results screen.
Name File	Use the following naming convention for the certificate: [HIOS Issuer ID]_[Name of Accrediting entity]. For example: “12345_NCQA.pdf.”
Upload Certificate	Upload the saved files in the Accreditation section of the HIOS Issuer Module. Refer to the Issuer Module User Guide for details on how to complete this.

Figure 1D-1 through Figure 1D-3 show sample accreditation certificates.

Figure 1D-1. Sample NCQA Accreditation Certificate



Figure 1D-2. Sample URAC Accreditation Certificate

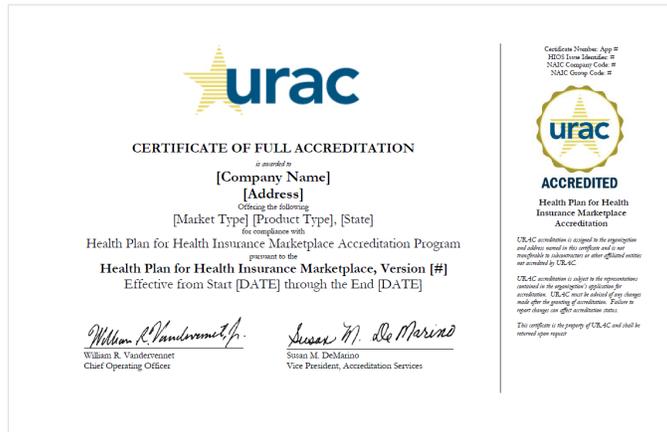


Figure 1D-3. Sample AAHC Accreditation Certificate



If an issuer is unable to locate the NCQA certificate, use the NCQA ISS to obtain a copy of the survey results. Log into ISS, click on the Results tab, view the survey results, and print the results screen. **Figure 1D-4** and **Figure 1D-5** show sample NCQA ISS survey results.

Figure 1D-4. Sample NCQA ISS Survey Results, Page 1

How to View Results?

Step 1: *Login to ISS*

Step 2: *Click Results Tab to View*



2013 Standards and Guidelines for the Accreditation of Health Plans

Welcome to the Interactive Survey System!

The information in the following sections includes:

- the complete Standards
- information about how your organization will be evaluated against the Standards
- policies and procedures

We designed the system to facilitate understanding of our Standards and the evaluation process. The "Help and Instructions" section above directs users to assistance.

Policies and Procedures - This section provides an overview of the survey option you have selected; it describes the goals and principles that guide our approach to evaluation, and provides a high-level summary of areas addressed by the Standards.

The Policies and Procedures describe:

- eligibility criteria; evaluation options; the interactive survey process
- the structure of the Standards and Guidelines and the Survey Tool
- how we report survey results; and obligations of organizations and individuals undergoing a survey.

Standards and Guidelines - This section allows you to open or download printable versions of publications.

Survey Tool - This section includes the Standards used for evaluation. Standards are organized into categories or functions. Included are:

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

The Survey Tool allows you to evaluate yourself just as we will evaluate you, 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 and undergo a survey you submit the Survey Tool and begin the process. During the survey, your assessment and documentation will be reviewed to determine your performance against the Standards.

Organization Background - This section allows you to provide background, historical and other contextual information to us to assist during a survey. This information is not evaluated or scored but is used to help us understand your organization.

Results - As you complete the Survey Tool this section provides summarized and detailed results. Results are final only

Figure 1D-5. Sample NCQA ISS Survey Results, Page 2

Step 3: View Results Page

2013 Standards and Guidelines for the Accreditation of Health Plans

Select an evaluation option for which to view results.

Name:

Evaluation Option: Interim Survey

Standards Year: 2013

Product Line/Product	Overall Score	Status	Valid Dates
<small>*Reports and numeric results are not final and may not be made public until NCQA's Review Oversight Committee evaluates them. The organization may not represent that it has achieved any endorsement or approval, or that it is in compliance with any standards or is NCQA Accredited based on reports or numeric results from the readiness evaluation without a final decision as described in the Policies and Procedures.</small>			

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