

NAVIGATING NCQA'S Q-PASS

(QUALITY PERFORMANCE ASSESSMENT SUPPORT SYSTEM)

Corinne Torgesen

ENROLLMENT CHECKLIST

- Organization's information
 - Legal entity name
 - Address, City, State, Zip
 - Primary contact name and email address
 - Secondary contact name and email address
- Practice location(s) (Link multiple clinics from one organization to each other during enrollment)
- List of specialties
- Practice's primary and secondary points of contact information
- Each practice site's tax ID number & NPI number
- Each clinicians' information (full name, date of birth, specialty, board certification number, and NPI number)
- Representative from organization that has the legal authority to sign business agreements with NCQA
- Method of payment for fees (credit card or check)

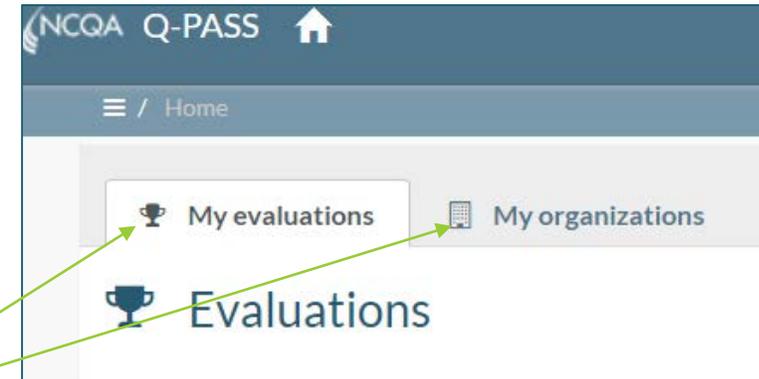
HOW TO ENROLL IN Q-PASS

1. Go to <https://qpass.ncqa.org/spa/#!/sign-in/>
2. Create a user account. (FYI: If you have an NCQA account already, your NCQA log in will work for Q-PASS as well).
3. Enroll your practice by following the required steps.
 - ***Note: You will search for your clinic. If your clinic is new to NCQA, NCQA will have to approve it before you can move forward with the enrollment process. (Can take up to 2 business days).**
 - A) Add practice sites (You will need site tax ID # and NPI #). HRSA grantees will need to enter their H code. **Make sure you have completed the necessary steps with HRSA.**
 - **If you have two clinics from one organization, make sure to connect them during the enrollment process. Select the primary site.**
 - B) Add the recognition program for which you want to be recognized.
 - C) Set up clinicians (You will need clinicians', full name, birthdate, National Board Certification #, and NPI #).
 - D) Add Users (generally only those who upload documents to Q-PASS or sign the legal agreement).
 - E) Sign legal agreements.
 - F) Generate the invoice and pay. **(Don't forget to enter the SHIP discount code: GIDDHI for 20% off at check out, or the Healthy Connections discount code: GIDDHB for 20% off after 1/31/19).**
 - G) Review your information and complete enrollment. Remember to fill out the "Getting to Know Your Clinic" under Program Dashboard.
4. Once clinic is enrolled, your NCQA representative will contact you for a kick-off call, and your year for achieving recognition begins. **NOTE: You'll want to make sure your clinic will be able to achieve recognition within the year before enrolling. If you haven't been assigned a NCQA Rep within 14 days of completing enrollment, follow-up (by asking a question on MyNCQA or QPASS, and/or call NCQA customer service 888-275-7585).**
5. Upload EMR Pre-Validation Letter (Can be uploaded before initial call with NCQA Rep so the Rep can approve it during kick-off call). Go to "Organization Dashboard" → "Transfer Credits" → Select EMR → Upload Pre-Validation Letter. Once approved by Rep, those criteria will be marked as complete (in green) on the upload page for each pre-validated criteria.

ADDITIONAL INFORMATION

- Once PCMH recognized by NCQA, clinics will have an annual review to keep their PCMH recognition status. NCQA reviews the required annual review documents 30 days prior to the clinic's anniversary date. **Clinics should begin early to upload their required annual review documents.**
- Do not use the “back” button when uploading documents, because information can be lost. Instead, use the “home” icon along with other navigation icons on the light blue section.
- The EMR Pre-Validation Letter is uploaded by going to “Organization Dashboard” → “Transfer Credits” → click to upload the pre-validation letter. The letter will be approved by NCQA, and then the criteria(s) it covers will be marked as complete or partially complete.
- Clinics can use the “Ask a Question” tab on the “Program Dashboard” to ask a question specific to their Q-PASS, documents, recognition, etc. (rather than go to www.my.ncqa.org). Questions go directly to clinic's Rep and are distributed as needed.

NAVIGATING Q-PASS



There are two tabs on the top of the home page.

- 1) “My Organizations”

- Used for enrolling the clinic in Q-PASS (i.e. adding users, adding clinicians, signing legal agreements, making payment, etc.).
- There is a check list within this section that assists clinics in enrollment process and lets them know when the process is complete.

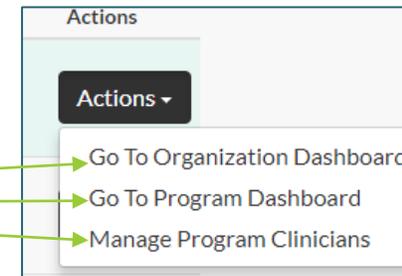
- 2) “My Evaluations”

- Used for uploading documentation for each completed criteria.
- To the right of the clinic name, click on the dark gray tab labeled “Actions.”

- 3 dashboard options are available

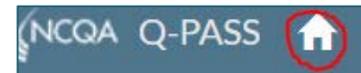
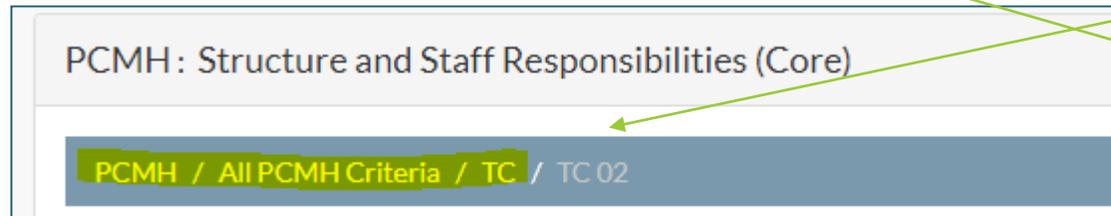
- 1) “Organization Dashboard”

- Click here to transfer credits by uploading EMR pre-validation letter, to use the “share credits” tab to transfer policies used in multiple clinics from the same organization, and to manage people and roles.
- The “Get Help” section under this tab has additional resource tools and a helpful video about navigating through Q-PASS.

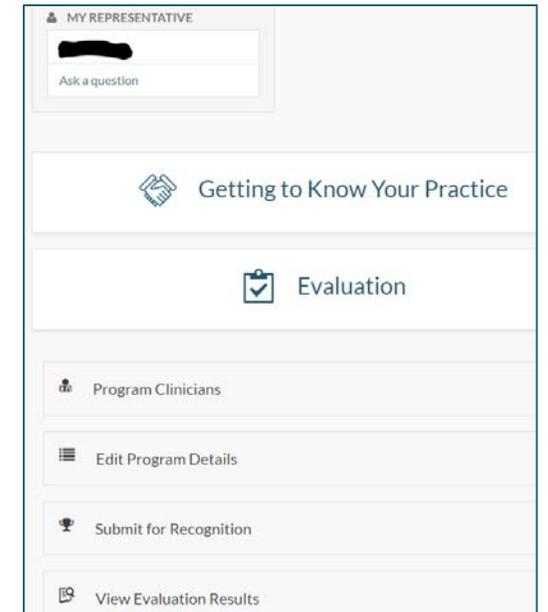


NAVIGATING Q-PASS CONTINUED

- 2) "Program Dashboard"
 - This dashboard is where the clinic fills out the "Getting to Know Your Practice" document before the kick-off call with NCQA. **FYI: This document asks for the number of Medicaid and Medicare patients your practice sees. It can be an estimate.**
 - The name of your NCQA Rep and section to ask a question are also on this dashboard.
 - The "Get Help" section under this tab has additional resource tools and a helpful video about navigating through Q-PASS.
 - This is the dashboard where the clinic's check-in results will be available. (See slide 13 for process instructions).
 - By clicking on the "Evaluation" tab on this dashboard, the clinic can go into the area where they upload their documentation.
 - Click on "PCMH: Patient-Centered Medical Home Recognition Criteria" and then select concept area to start with.
 - DO NOT use "back" button during the uploading process. Use the home icon and words on the light blue section.



- 3) "Manage Program Clinicians"
 - This dashboard is where the clinic can add or remove clinicians.



UPLOADING EVIDENCE TO Q-PASS

- 1. Go to “My Evaluations” tab, click on dark gray box labeled “Actions,” then click on “Program Dashboard.”
- 3. Click on “Evaluation” tab, then on “PCMH: Patient-Centered Medical Home Recognition Criteria.”
- 4. Select the concept area you will be uploading a document for, then select specific criteria.
- 5. Click on “evidence” or “documented process” to add your documentation. Locate the document from your computer file, then add. If document has already been uploaded for a different criteria, click “link evidence,” and select document from your Q-PASS library. ***Tip: Save documents as a PDF so the format does not change depending on the computer that opens it.**
- 6. If document has potential PHI, mark “Let’s do a virtual review,” and indicate whether you will show a report or a demonstration.
- 7. If you’ve uploaded everything for the check-in on a criteria, mark it as “ready for check-in.” Make sure number of components checked in under “preliminary results” at top of page increased.
- 8. Once all of the documentation for a check-in have been added, mark “check-in components for review” under the “Evaluation” tab. You will then be able to select date/time options for check-in.

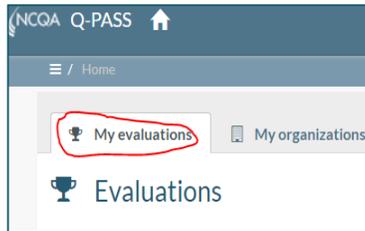
UPLOADING EVIDENCE TO Q-PASS TIPS

- Tips:

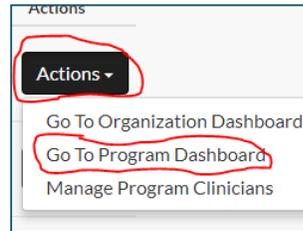
- Use the “link evidence” button to connect one document (usually a policy) that fulfills the requirements for multiple criteria once the document has been uploaded to Q-PASS library, rather than uploading the document to Q-PASS multiple times. (Library is under Organization Dashboard → Upload Evidence to check which documents have already been uploaded).
- You can leave comments about a document to tell the evaluator which page(s) to focus on for a specific criteria, especially if the policy covers multiple criteria.
- A document can be unlinked if it is uploaded to the wrong criteria.
- For criteria that require documentation that contains PHI, click the “let’s do a virtual review” button, and indicate whether you will show a report or a demonstration. This lets the evaluator know the process, screenshot, report, etc. will be shown to them during the check-in. **DO NOT upload a document with potential PHI, even if you black out patient information.**
- If PHI is accidentally uploaded, it can be flagged using the “Flag PHI” button.
- If a criteria does not apply to your practice (i.e. KM-02 H is N/A for practices with no pediatric population, and I is N/A for pediatric populations), there is a box on Q-PASS to select, “this is not applicable to us.”

UPLOADING EVIDENCE TO Q-PASS CONTINUED

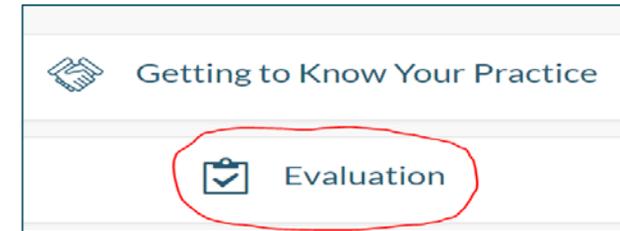
1.



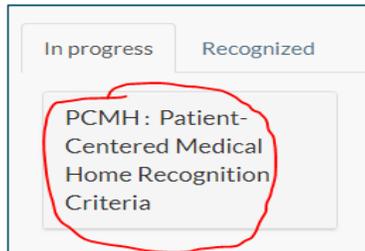
2.



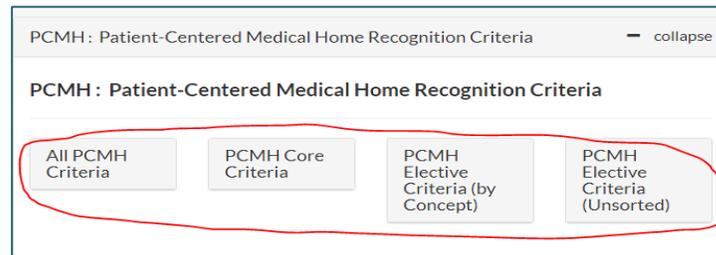
3.



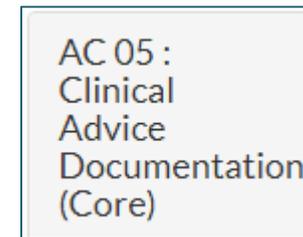
4.



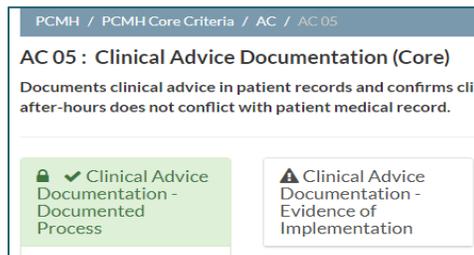
5.



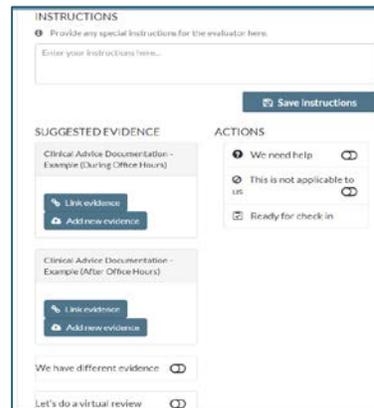
6.



7.



8.



9.



CHECK-INS

- Once the clinic is enrolled in Q-PASS, they have a year to submit the required documentation and become PCMH recognized.
- Clinics are given up to 3 virtual check-ins with their Evaluator (different from NCQA Rep assigned at enrollment) during their year submission period. A 4th check-in can be purchased for half the price of the original enrollment fee if an additional check-in is needed. *FYI: The kick-off call with NCQA Rep **DOES NOT** count as one of your 3 check-ins.*
- As of February 2018, practices are required to check-in a minimum number of components for each check-in, and will not be able to check in more than a maximum number of components. *(Note that each criteria has one or more components)*
 - Check-in #1: Minimum 30, Maximum 70
 - Check-in #2: Minimum 5, Maximum 80
 - Check-in #3: Minimum 1, Maximum N/A
 - ***Note: The count does not include any auto-credit provided through pre-validated EMR vendors.***
 - **Component = Documentation submitted for proof of implementation.** If a Criteria requires a documented process and evidence of implementation, that counts as 2 components. For Criteria like KM-02 where there are reporting requirements, A-I, the Criteria has 10 components: 1 Documented process (include process for A-I in one policy), and 9 Evidence of Implementation.

CHECK-INS CONTINUED

- The “Check in Components for Review” button (under “Evaluation Tab”) is to be clicked when the clinic is ready for a check-in call. Everything marked as “ready for check-in” at that point is locked in and cannot be changed.
- NCQA has a “Suggested Pathway” document with their recommendations of which criteria to complete/submit for each check-in. It doesn’t have to be followed completely, but try to stick to the number of criteria/components (cores in particular) they recommend. Check-in all cores during the 1st and 2nd check-ins. This allows time to fix them during the 3rd check-in, if necessary.
- Once “Check-in Components for Review” has been selected, a calendar will come up on the screen, where the clinic chooses three possible dates/times for their check-in. Check-ins are scheduled at least 30 days out. This gives the Evaluator time to review the clinic’s submitted documents. **If you’d like to try and have the check-in earlier than 30 days out, send a question to your NCQA Rep from your program dashboard after selecting options 30 days out. Ask if it is possible to have your check-in earlier. If it is possible, they will ask your evaluator and then ask you for a few additional dates/times earlier than 30 days out.**
- Check-ins are scheduled for 2 hours, but do not always take the full time.
- The clinic will have the same Rep throughout the recognition process and the same Evaluator throughout their check-in process
- It is suggested that clinics schedule their first check-in within the first 3-4 months of enrolling in Q-PASS.
- If your EMR doesn’t have the capability to generate a required report, a chart audit, using at least 30 patients can be conducted.

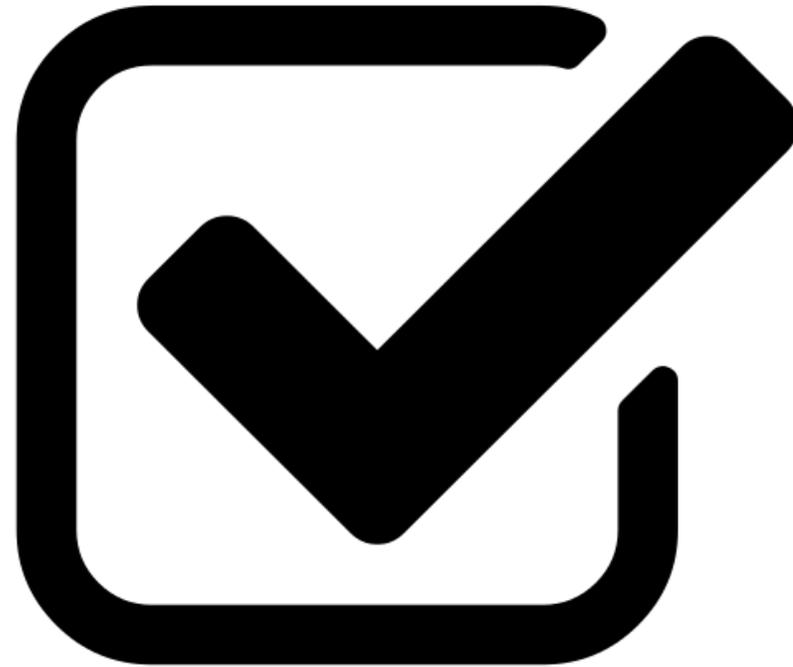
CHECK-IN TIPS

- Check-in Core Criteria and policies during the first and second check-ins. This allows time to fix anything that the Evaluator marked as “not met” by the third check-in.
- Have all of the necessary reports/screenshots/other documents for virtual review opened or easily accessible for check-in.
- Know where to find any materials that were uploaded for non-virtual review criteria and have the NCQA standards close by in case the Evaluator has a question about any of your documentation and whether or not it fulfills a requirement.
- If you have two clinics from the same organization doing Q-PASS, upload the same documentation for each check-in so you can do the check-ins together. ***Be sure to connect clinics during enrollment process.***
- Consider using the “Record Review Workbook” (RRWB) for CM-04 to CM-08, and the “QI Worksheet” for QI-05 and QI-08 to QI-14 for less questions from NCQA on those reports.

VIEWING EVALUATION (CHECK-IN) RESULTS

To see notes from your Evaluator:

1. From Action Tab, go to “Program Dashboard.”
2. Scroll down, and click on the tab, “View Evaluation Results.”
3. Filter results to show “not met” and/or “met”, and your evaluator’s notes will appear.

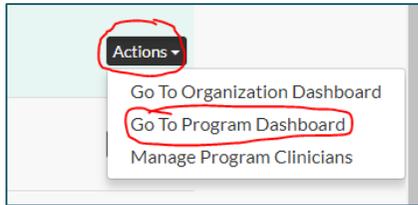


FINAL SUBMISSION FOR RECOGNITION

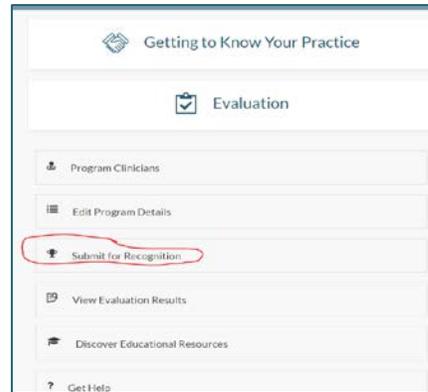
- **After the Executive Review following your final check-in, clinics need to complete a final submission to the “Review Oversight Committee” (ROC) for recognition.**
 1. From the black “Action” tab, click on “Program Dashboard.”
 2. Click on “Submit for Recognition.”
 3. If a preliminary notification in a green box indicates, “Our records indicate that all selected recognition programs have met the preliminary requirements for recognition,” click on “Next.”
 4. The next few pages will have you confirm information is correct about clinic, primary contact, clinicians, and that clinic balance is paid. Edits can be made on these pages, **then saved.**
 5. Submit to NCQA for final review with ROC (Review Oversight Committee) by clicking on “Submit for Recognition.”
 6. **Clinic will be notified of recognition status in Q-PASS within 30 days.** Contact NCQA Rep with any questions during this time period.

FINAL SUBMISSION FOR RECOGNITION

1.



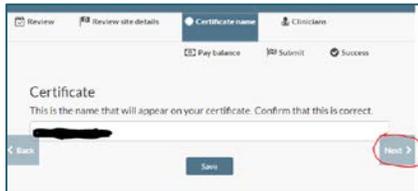
2.



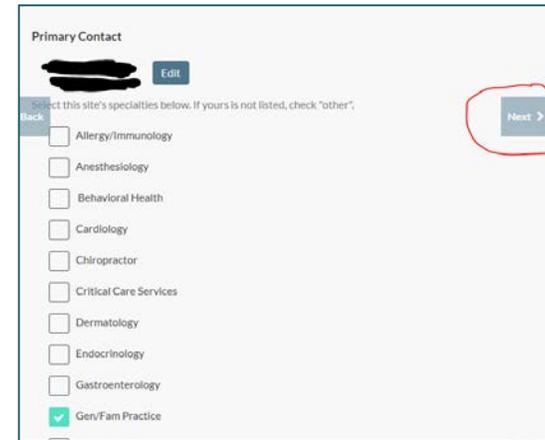
3.



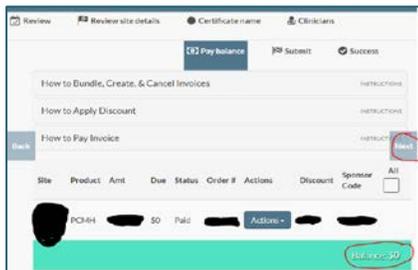
4.



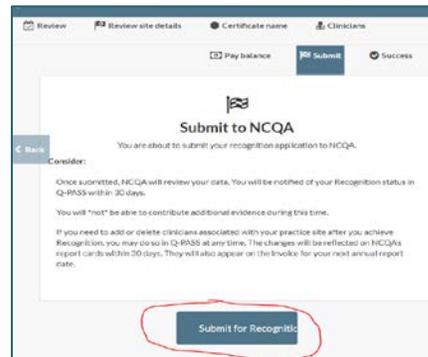
5.



6.



7.



TO VIEW AND PRINT RECOGNITION CERTIFICATE

- Once the ROC has finished their review, the main contact will receive an email that the clinic achieved recognition.
- Recognition, Anniversary, and Annual Reporting dates will be listed on the email and on Q-PASS.
- To view and print certificate: 1) Login to Q-PASS, 2) click on organization dashboard, 3) select “Manage Evaluations.” 4) Click on “Annual Reporting Evaluations” tab 5) Under “certificate” column, click on the starburst icon and the certificate will open. If you have any questions, contact your NCQA Rep.
- Your recognized clinic will be listed on NCQA’s Recognition Directory with a Recognition seal and recognition dates.
- The clinic can use the certificate/seals to advertise PCMH recognition on website, brochures, etc.

ANNUAL SUSTAINING REQUIREMENTS

- “PCMH Annual Sustaining Requirements” are listed in the clinic’s Program Dashboard under the “Get Help” tab.
- The clinic’s dashboard displays “Reporting date” and “Anniversary date.” Submit annual sustaining requirements by the clinic’s reporting date, not anniversary date.



QUESTIONS?

Corinne Torgesen



ctorgesen@eiph.idaho.gov

208-533-3191