

URAC Disease Management Accreditation

Third National DM Summit
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About URAC

Founded in 1990

Private, non-profit 501c3

Originally focused on utilization review
accreditation

Now accredits a full range of managed care
offerings

Broad representation on Board of Directors –
industry, provider, public representatives

Committee driven



Achievements

- URAC accreditation programs cover the entire range of health insurance products
- URAC has issued over 2,000 accreditation certificates to more than 500 different health care programs
- URAC-accredited companies serve over 120 million Americans and do business in every state
- URAC accreditation is recognized in 30 states and by OPM, BCBSA, VA



URAC Accreditation Programs

- Utilization Management and Case Management
- Health Plan and Health Network
- Credentialing and CVO
- Health Call Center
- Workers' Compensation UM and Network
- External Review
- Core and Core with Certification
- Health Web Site
- Claims Review
- Disease Management
- HIPAA Privacy and Security



DM Accredited Companies

FutureHealth Corporation

American Healthways, Inc.

First Health Group Corp

SHPS, Inc.

Cost Care, Inc. (dba UNICARE/Cost Care)

National Health Services, Inc. a BCE Emergis
Company

Wausau Benefits, Inc.

Blue Cross and Blue Shield of Georgia, Inc.

Hines and Associates, Inc.

GlaxoSmithKline (certified)



IOM Quality Chasm Directives

Healthcare should be:

- Safe
- Effective
- Patient-centered
- Timely
- Efficient
- Equitable

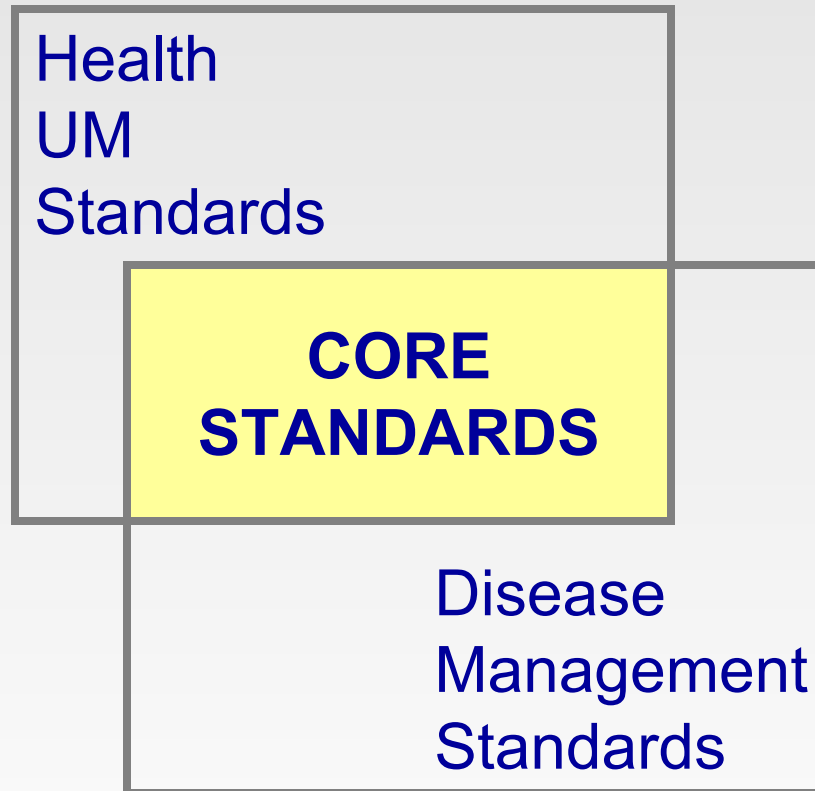


Goals for URAC DM Standards

- Promote evidence-based practice
(safe / effective / timely)
- Protect patient and provider rights
(equitable/ pt centered)
- Promote collaboration with treating providers
(effective / equitable/ timely)
- Enhance consumer education and shared-decision-making (pt centered / effective)
- Allow innovation in DM delivery models *(efficient)*
- Plus: Be consistent with but not exceed regulatory requirements



Modular Accreditation System



Core Standard Areas

Policies and Procedures

Staff Qualifications and Management

Clinical Oversight

Regulatory Compliance

Data-Driven QM Program

Consumer Protection

- Patient Safety
- Complaints and Appeals
- Financial Incentives

Oversight of Delegated Functions



DM Module

- Section 1.0 DM Program Scope and Objectives
- Section 2.0 Admin. and Staffing
- Section 3.0 Performance Measurement and Reporting
- Section 4.0 Consumer Rights and Responsibilities
- Section 5.0 Methods for Managing Eligible Populations
- Section 6.0 Disease Management Program Design

Section 1.0: DM Program Scope and Objectives

- DM 1 - Program Philosophy
- DM 2 - Evidence Based Practice
- DM 3 - Involvement of Practitioners
- DM 4 - Collaboration with Participating Providers
- DM 5 - Shared Decision-making with Consumers

Section 2.0: Administration and Staffing

- DM 6 - Staffing for Disease Management Programs
- DM 7 - Coordination of Services

Section 3.0: Performance Measurement and Reporting

- DM 8 - Methodology for Outcomes Measurement
- DM 9 - Requirements for Measuring Program Performance by Clinical Condition
- DM 10 - Financial Outcomes Reporting
- DM 11 - Consumer Reported Outcomes Measurement
- DM 12 - Provider Performance Feedback

Section 4.0: Consumer Rights and Responsibilities

- DM 13 - Communications Regarding Program Characteristics
- DM 14 - Participating Consumer Rights and Responsibilities

Section 5.0: Methods for Managing Eligible Populations

- DM 15 - Criteria for Identification of Eligible Consumers
- DM 16 - Stratification and Assessment of Eligible Consumers
- DM 17 - Predictive Risk Modeling
- DM 18 - Consumer Engagement

Section 6.0: DM Program Design

- DM 19 - Program Interventions
- DM 20 - Clinical Decision Support Tools
- DM 21 - Consumer Education
- DM 22 - Telephonic Access

DM Accreditation Information

Accreditation = Core + Full Module

Certification = Core + Selected Standards

- Applicability of DM review is to the DM program model
- Cost reflects number of sites, number of disease conditions
- Certificates specify disease conditions included in the review



Accreditation Process

Applicant self-evaluation

Submission of application

Desk-top review

- Scoring – mandatory and non-mandatory standards
- Treatment of delegated functions
- Additional information requested

Site visit

Accreditation and Executive Committee Approval

Certificate add-on



Patient Safety Approach

Implicit Standards

- Quality management and improvement
- Credentialing
- Complaints/grievances and appeals

Explicit Standards

- Required response to urgent situations posing immediate threat

Scoring Weights

- Primary sections – directly affect safety and welfare of consumers



URAC/AdvancePCS Patient Safety Project

Goal: Educate employers and health plans on DM's role promoting patient safety by highlighting effective and innovative approaches.

- Use the NQF framework for patient safety
- Call for innovative practices
- Education on models of effective DM patient safety strategies
- Roll out by June, 2003



DM Patient Safety Examples

- Adherence to Treatment Guidelines
- Medication Assessments (patient reported and electronic)
- Home/Environmental Safety Assessment

Contact Information

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