

TABLE 4

Comparison NCQA 2017 PCMH and CPC + Requirements: Summary Table

NCQA PCMH Concept	NCQA PCMH Competency	Comparison with CPC+ Track 2	Alignment
Team-Based Care and Practice Organization	A: The practice is committed to transforming the practice into a sustainable medical home. Members of the care team serve specific roles as defined by the practice's organizational structure and are equipped with the knowledge and training necessary to perform those functions.	Both NCQA and CPC+ require demonstration of leadership support, definition of practice organizational structure and staff roles, involvement of patients/families/caregivers in governance, and use of a certified EHR.	Fully or mostly aligned
	B: Communication among staff is organized to ensure that patient care is coordinated, safe and effective.	Both NCQA and CPC+ require regular care team meetings and include an option for behavioral health care management. NCQA requires care team meetings focused on individual patient care which is not specified in CPC+.	Fully or mostly aligned
	C: The practice communicates and engages patients on expectations and their role in the medical home model of care.	This competency is not specified in CPC+.	Not in CPC+
Knowing and Managing your Patients	A: Practice routinely collects comprehensive data on patients to understand background and health risks of patients. Practice uses information on the population to implement needed interventions, tools and supports for the practice as a whole and for specific individuals.	NCQA requires documentation of an up-to-date problem list and specifies items to be included in a comprehensive health assessment; these are not included in CPC+. Depression screening is required in NCQA and optional as one of the possible reporting measures in CPC+. Elective NCQA criteria on oral health assessment and evaluation of communication preferences are not specified in CPC+.	Partially aligned
	B: The practice seeks to meet the needs of a diverse patient population by understanding the population's unique characteristics and language needs. The practice uses this information to ensure linguistic and other patient needs are met.	This competency is not specified in CPC+.	Not in CPC+
	C: The practice proactively addresses the care needs of the patient population to ensure needs are met.	This competency is not specified in CPC+, though measures on preventive care service delivery and chronic and acute care services may incentivize proactive reminders.	Not in CPC+
	D: The practice addresses medication safety and adherence by providing information to the patient and establishing processes for medication documentation, reconciliation and assessment of barriers.	Both NCQA and CPC+ require medication reconciliation as part of care transitions. NCQA additionally requires maintenance of up-to-date medication lists and has elective criteria that include assessment of understanding to medications, barriers to adherence, and obtaining prescription claims data.	Partially aligned
	E: The practice incorporates evidence-based clinical decision support across a variety of conditions to ensure effective and efficient care is provided to patients.	This competency is not specified in CPC+.	Not in CPC+
	F: The practice identifies/considers and establishes connections to community resources to collaborate and direct patients to needed support.	Both NCQA and CPC+ require assessment of psychosocial needs, maintenance of a community resource list, and provision of self-management support. NCQA includes elective criteria on assessing usefulness of community supports, provision of oral health resources, and use of shared decision-making aids.	Fully or mostly aligned

NCQA PCMH Concept	NCQA PCMH Competency	Comparison with CPC+ Track 2	Alignment
Patient-centered Access and Continuity	A: The practice seeks to enhance access by providing appointments and clinical advice based on patients' needs.	Both NCQA and CPC+ require enhanced patient access. NCQA also requires specification for same day appointment availability and providing timely advice by telephone. NCQA elective criteria include availability of electronic system for two-way communication, scheduling appointments, and refills.	Fully or mostly aligned
	B: Practices support continuity through empanelment and systematic access to the patient's medical record.	Both NCQA and CPC+ include criteria for empanelment, continuity, and access to medical record information after hours. NCQA includes elective criteria on panel size management and reconciliation with plan attribution.	Fully or mostly aligned
Care Management and Support	A: The practice systematically identifies patients that would benefit most from care management.	Both NCQA and CPC+ require risk-stratification for determination of which patients will benefit from care management.	Fully or mostly aligned
	B: For patients identified for care management, the practice consistently uses patient information and collaborates with patients/families/caregivers to develop care plans that address barriers and incorporates patient preferences and lifestyle goals documented in the patient's chart. Demonstration of such may be through reports, file review or live demonstration of case examples.	Both NCQA and CPC+ require personalized, written care plans for patients identified for care management that document patient preferences, include self-management goals and are accessible across care settings. NCQA includes an elective criterion on identification of barriers to goals.	Fully or mostly aligned
Care Coordination and Care Transitions	A: The practice effectively tracks and manages laboratory and imaging tests important for patient care and informs patients of the result.	This competency is not specified in CPC+.	Not in CPC+
	B: The practice provides important information in referrals to specialists and tracks referrals until the report is received.	Both NCQA and CPC+ require identification of specialists most commonly used by the practice, setting expectations for information sharing, and behavioral health integration (elective in NCQA). NCQA additionally requires referral tracking and specific information to be included in referrals, and other elective criteria include determination of appropriateness of referrals and consideration of specialist performance in making referrals.	Partially aligned
	C: The practice connects with other health care facilities to support patient safety throughout care transitions. The practice receives and shares necessary patient treatment information to coordinate comprehensive patient care.	Both NCQA and CPC+ require identification of patients seen in the ED or hospital, information exchange with EDs or admitting hospitals, contacting patients for follow up, and ability to access patient information after hours. NCQA has additional elective criteria on information exchange with external entities and care plans for complex patients transitioning out of the practice.	Fully or mostly aligned
Performance Measurement and Quality Improvement	A: The practice measures to understand current performance and to identify opportunities for improvement.	Both NCQA and CPC+ require monitoring of quality, utilization, and patient experience. NCQA requires monitoring of types of access and has an elective criterion on monitoring health disparities.	Fully or mostly aligned
	B: The practice evaluates its performance against goals or benchmarks and uses the results to prioritize and implement improvement strategies.	Both NCQA and CPC+ require acting upon the above data types to improve population health management. (NCQA requires this for measures of access which is not specified in CPC+.)	Fully or mostly aligned
	C: The practice is accountable for performance. The practice shares performance data with the practice, patients and/or publicly for the measures and patient populations identified in the previous section.	Both NCQA and CPC+ require sharing performance data within the practice, value-based contracting, and inclusion of patients in quality improvement activities. NCQA includes an elective criterion on sharing data with patients or the public.	Fully or mostly aligned