

### State Agencies Are Expected to Provide Oversight for Medicaid Managed Care Organizations.

## Why not let AAAHC Help Ease the Burden?

With CFR 438.360<sup>\*</sup> stipulating that a national accrediting organization may be used by state agencies to assist in the review of Medicaid managed care, the Accreditation Association (AAAHC) stands ready to help. As a leading health care accrediting body, AAAHC is ideally suited to shoulder a significant portion of the burden now placed on state agencies to determine organization compliance to the Federal guidelines. Let us be your partner in this endeavor.



#### For Partnering Information

To learn more about how the AAAHC can help your state oversight of Medicare managed care plans, contact Ron Smothers, Assistant Director, Accreditation Services at **847-853-6060**; via e-mail at **rsmothers@aaahc.org**; or visit us on the web at **www.aaahc.org**.

#### **AAAHC Standards conform to Federal Regulations**

To confirm that AAAHC standards are at least as stringent as Federal regulation, AAAHC has created a crosswalk of its standards compared to Federal Medicaid managed care regulations for the following areas: *Quality Measurement and Improvement; Access to Care; and Structure and Operations.* 

### Our crosswalk confirmed that the majority of AAAHC standards meet Federal regulations

Quality Measurement and Improvement 438.236, 240, 242	<b>100%</b> of AAAHC standards are comparable to Federal regulation.
Access to Care 438.206, 207, 208, 210	<b>82%</b> of AAAHC standards are comparable to Federal regulation.
<b>Structure and Operations</b> 438.214, 218, 224, 226, 228, 230	<b>50%</b> of AAAHC standards are comparable to Federal regulation.

The above determination includes AAAHC standards that are equivalent and those that meet the intent of the CMS regulation. Regulations that were not applicable to AAAHC accreditation were excluded from the calculation.

\* CFR 438.360: In place of a Medicaid review by the state, its agent, or External Quality Review Organization (EQRO), states can use information obtained from a national accrediting organization review for mandatory external quality review.

# **AAAHC Can Help**



The Accreditation Association for Ambulatory Health Care (AAAHC) has a 30-plus year history of helping organizations improve the quality of care provided to its members/patients. To date, over 4,600 organizations have chosen the AAAHC to help in their quality improvement efforts.

**AAAHC will ensure** that the highest level of member/patient care is being delivered at organizational and provider network levels. We require organizations to maintain an active, integrated, peer-based program of quality management and improvement that links peer-review, quality improvement activities and risk management. While the process may be rigorous, it is well within reach for managed care organizations, and the end result ensures delivery of high quality member/patient care.

**AAAHC is exceedingly thorough** in the implementation and oversight of quality improvement related activities; in fact there are over 55 indicators related to quality improvement alone.

**Following are just a few examples** of quality improvement related requirements with which organizations are expected to comply:

- The quality improvement program must include participation in external performance benchmarking activities that allow for the comparison of key performance measures with other similar organizations, or with recognized best practices of national or professional targets.
- The organization provides ongoing monitoring of important aspects of care provided by physicians, dentists and other health care professionals. (Monitoring important aspects of care by practitioners in the aggregate is necessary for monitoring individual performance and establishing internal benchmarks.)
- Data related to established criteria are collected in an ongoing manner and are periodically evaluated to identify acceptable or unacceptable trends or occurrences that affect member/patient care.
- Elements of a risk management program must address safety of member/ patient and other important issues.
- Development of processes to identify important problems or concerns that are appropriate to address for improving the quality of services provided by the organization.

For the complete listing of Quality Management and Improvement indicators, contact Ron Smothers, Assistant Director, Accreditation services at **847-853-6060**; via e-mail at **rsmothers@aaahc.org**; or at **info@aaahc.org**.



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