

# INTERACTIVE SURVEY SYSTEM

*User's Manual*



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# WELCOME TO THE INTERACTIVE SURVEY SYSTEM!

The NCQA Interactive Survey System (ISS) improves and streamlines the survey process and makes it faster, more efficient and more supportive of quality improvement efforts. Moreover, the ISS features communication and data collection management and tracking capabilities that support and simplify survey preparations.

There are two ISS Web publications available for each NCQA evaluation program: the **Standards and Guidelines** and the **Survey Tool**.

- The **Standards and Guidelines** publication includes the *Policies and Procedures*, standards information and other program details in a searchable, read-only format.
- The **Survey Tool** is an interactive version of the **Standards and Guidelines** publication that is designed to help you evaluate your organization's readiness to undergo a full survey against NCQA's standards. During your readiness evaluation, the Survey Tool can be used to self-score elements, attach and reference supporting documentation, access and complete supplemental worksheets, and provide notes on your self-evaluation. Organizations applying for NCQA Accreditation, Certification or Recognition must submit a completed Survey Tool to NCQA to begin the survey process.

NCQA is proud to offer you the best in survey technology, and we look forward to working with you to create a productive and successful survey experience.

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## BEFORE YOU BEGIN

This manual is intended for organizations that have purchased (ISS) Web publications for readiness evaluation or NCQA survey and provides instructions on how to conduct a readiness evaluation of your organization against NCQA standards using the Survey Tool and the Document Library.

Refer to the *Interactive Survey System Administrative User's Manual* for information on the ISS.

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## FEATURES



**Notes:** Draw attention to, or offer additional insight into, ISS features.

**Cautions:** Advise users to pay close attention.



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## SYSTEM REQUIREMENTS

The ISS is accessible through an Internet connection, does not require you to load software onto your computer or server, and places no constraints on RAM or disk space. The system requirements listed below give users full Internet browser capabilities.

<b>Component</b>	<b>Minimum Windows Requirement</b>	<b>Minimum Mac Requirement</b>
Operating system	Windows 98 or later	Mac OS x 10.1 and later
Hard drive	52 MB hard disk space	72 MB hard disk space
Memory	64 MB RAM	64 MB RAM
Internet access	56k modem, T1, T2 preferred	56k modem, T1, T2 preferred
Color resolution	256 VGA	256 VGA
Screen resolution	800 x 600	800 x 600
Processor	Pentium 233 MHZ	PowerPC 604e 266 MHZ
Web browser	Internet Explorer 5.5+ or Netscape 6.0+	Internet Explorer 5.5+ or Netscape 6.0+

# **PART I: INTRODUCTION AND CORE ISS FEATURES**

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## ACCESSING THE ISS

The ISS is a Web-based system that NCQA licenses to organizations. An organization may purchase a license for one or more users. Each user accesses the ISS with a unique User ID and Password, which are managed by the organization after purchase.

### Temporary User ID and Password

To access the ISS for the first time after purchase, use the temporary User ID and Password that NCQA e-mailed to you. Your User ID is your unique identifier to enter the ISS. When you log in using your temporary User ID and Password, you will be prompted to change your Password. Data entered under your temporary User ID will automatically transfer to your permanent User ID. See the *Changing Your Password* section of this manual for more information.

**Note:** Even if you purchase a multi-user license, you are only assigned *one* temporary User ID.

### Logging In

1. Navigate your Web browser to <https://iss.ncqa.org/> (Figure 1). NCQA recommends that you bookmark the ISS *Log In* page or add it to your browser Favorites list.
2. Enter your User ID and Password in the spaces provided.
3. Click the **Log in** button.

**Caution:** Passwords are case sensitive.

**Figure 1. Login screen**

**Interactive Survey System**

**NEW!** Online demonstrations under Help & Instructions for the Document Library Upgrade.

**ISS Maintenance Schedule**

The ISS will not be available for the following time periods.

- From 7/27/2012 8:30pm to 7/30/2012 8:30am
- From 11/16/2012 8:30pm to 11/19/2012 8:30am

**PLEASE LOG IN**

User ID:

Password:

If you have forgotten your Password, enter your User ID above and [click here](#) to continue.

To purchase a license to access this system, [click here](#) for details.

© 2002 – 2012 by National Committee for Quality Assurance, Patent Pending  
Use of this Web site/application constitutes acceptance of the [License Agreement](#) and [Privacy Policy](#)

## Invalid Login

If you enter incorrect login information, you will see this message:

**The User ID or Password does not match our records. Please [click here](#) or use the Back button to try again.**

1. Click the link provided in the message or use the Back button on your Web browser to return to the *Login* screen.
2. Enter your correct User ID and Password.
3. If you enter correct login information and are still not able to log in successfully, contact NCQA Customer Support at [customersupport@ncqa.org](mailto:customersupport@ncqa.org) or call, toll free, 888-275-7585 for assistance.

## If You Forget Your Password

If you forget your Password, you may request that the ISS e-mail it to you:

1. Navigate your Web browser to <https://iss.ncqa.org/> to open the *Login* screen.
2. Enter your User ID in the space provided.
3. Click the link in the following message beneath the Login box:

If you have forgotten your Password, enter your User ID above and [click here](#) to continue.

4. The following message box will appear:

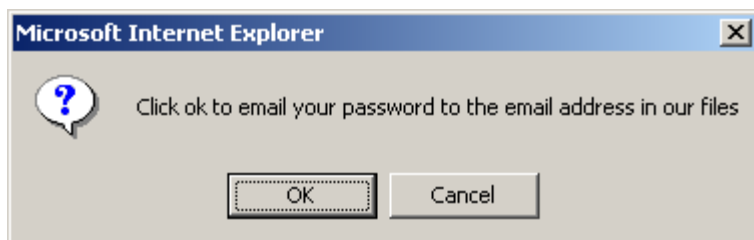


Figure 2. Password reminder e-mail message box

5. Click **OK**.
6. The ISS will e-mail your Password to the e-mail address on file. If you do not receive an e-mail within one day, contact [customersupport@ncqa.org](mailto:customersupport@ncqa.org) or call, toll free, 888-275-7585.

## ISS Sessions

The ISS will “time-out” a user’s session after 30 minutes of inactivity and all unsaved data entry will be lost. Remember to save your work regularly and log out of the system if you will be away from it for more than 30 minutes.

## Session in Use

If the system timed you out, you did not log out of the system during your previous session, or if someone else is logged in under your User ID and Password, you will see this message:

The User ID you have entered is currently in use. If you continue with the log in, the session in use will be cancelled and any unsaved data will be lost. To continue with the log in, select 'Continue Log in'.

**Caution:** Multiple users cannot use the same User ID and Password to log in to ISS at the same time. If you share a User ID and Password with someone in your organization who is logged in to ISS, selecting Continue Log in will discontinue that user’s session and all unsaved data will be lost.

## Logging Out

Always use the **LOGOUT** link on the Top Navigation Bar to end your ISS session (Figure 3).



**Figure 3. LOGOUT link on the Top Navigation Bar**

**Caution:** If you quit the ISS by closing your browser window instead of using the LOGOUT link, the system cannot tell that the browser has closed and your session remains active.

## LICENSE AGREEMENT

The Active Server Pages (ASP) Software License Agreement is a legal agreement between your organization and NCQA, and permits you to access and use the ISS. You will be required to accept the ASP License Agreement each time you log in to the ISS.

Upon logging in to the ISS, the ASP Software License Agreement will display (Figure 4).

1. Use the scroll bar to read the entire license agreement.
2. You can also download and view a PDF version of the license agreement by clicking the Download License Agreement in PDF format link at the top of the screen.
3. Click the **I Accept** button to indicate agreement and enter the ISS.
4. Click the **I Do Not Accept** button to indicate disagreement. You will not have access to the ISS.

**Caution:** Read the ASP Software License Agreement carefully! If you do not agree to the terms, you will not be permitted to access the ISS.

Figure 4. ASP Software License Agreement screen

[Download License Agreement in PDF format](#)

The list below indicates the products for which you have purchased licenses.

**ASP SOFTWARE LICENSE AGREEMENT FOR**

- Health Information Products comp for fridie - License 18060
- Standards and Guidelines for the Accreditation of Health Plans comp for fridie - License 18048
- Standards and Guidelines for the Accreditation of Health Plans comp for fridie - License 18171
- MBHO comp for fridie - License 18058
- Patient-Centered Medical Home comp for fridie - License 18046

**IMPORTANT PLEASE READ CAREFULLY**

This ASP Software License Agreement, along with all materials referenced herein ("Agreement") is a legal agreement between an entity ("User") and The National Committee for Quality Assurance ("NCQA") to permit User to access and use, subject to the terms of this Agreement,

(i) NCQA's software identified on the license agreement page, <http://www.ncqa.org/tabid/673/Default.aspx> and accompanying documentation provided electronically ("Software") and

(ii) Services relating to User's access and use of the Software, including the

# THE WELCOME SCREEN

When you accept the ASP Software License Agreement, you gain access to the ISS and the *Welcome* screen displays (Figure 5). The *Welcome* screen includes the following sections, also explained in detail below:

- an index of the **Standards and Guidelines** and **Survey Tools** that your ISS Administrator has given you access to
- an *Administration* section where you can change your Password and, if you are an Administrator, manage user access to the **Standards and Guidelines** and **Survey Tool**. See the supplemental *Interactive Survey System Administrator User's Manual* for information on the ISS administrative functions and managing your system.

**Note:** You can return to the *Welcome* screen from anywhere in the ISS by clicking the **HOME** link on the Top Navigation Bar.

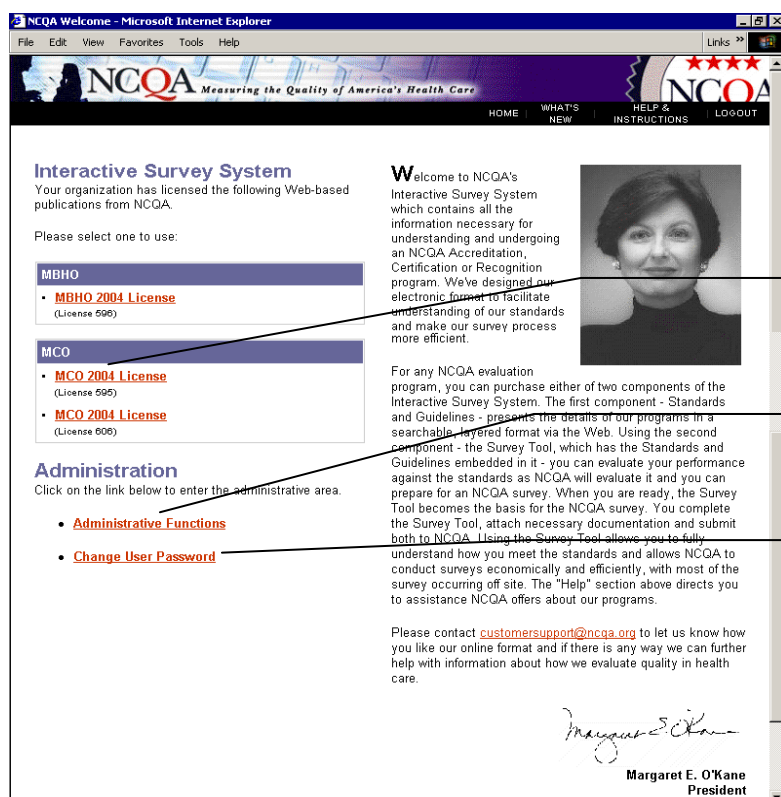


Figure 5. *Welcome* screen

Click a link to go to a publication

Only ISS Administrators have this link

Click here to change your Password



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## Accessing the Standards and Guidelines and Survey Tool

Publications to which you have access will display on the *Welcome* screen (Figure 5), including:

- **Standards and Guidelines:** Standards and Guidelines information is organized into categories of functions and include standards; elements that specify how NCQA evaluates and scores standards; specific scoring rules for elements; data sources needed to support scoring; the scope of review for each element; and additional explanations and examples.
- **Survey Tools:** Interactive assessment tools based on the information in the **Standards and Guidelines** that enables an organization to evaluate itself against NCQA standards at its own pace. The organization scores elements, references supporting documentation and provides evaluation notes. Following its readiness evaluation, the organization can submit the tool to NCQA and begin the formal survey process for NCQA Accreditation, Certification or Recognition during the time period in which the standards are current.

An organization applying for accreditation, certification or recognition must complete a **Survey Tool** and submit it to NCQA to begin the survey process. During the survey, NCQA verifies the readiness evaluation results and determines the organization's performance against the standards.

To access a **Survey Tool** or **Standards and Guidelines** publication:

1. Scroll to the *Interactive Survey System* section of the *Welcome* screen (Figure 5).
2. Click on a hyperlinked **Survey Tool** or **Standards and Guidelines** name to enter a publication.

## Changing Your Password

Once you log in to the system, you may change your Password using the *Administration* section of the *Welcome* screen.

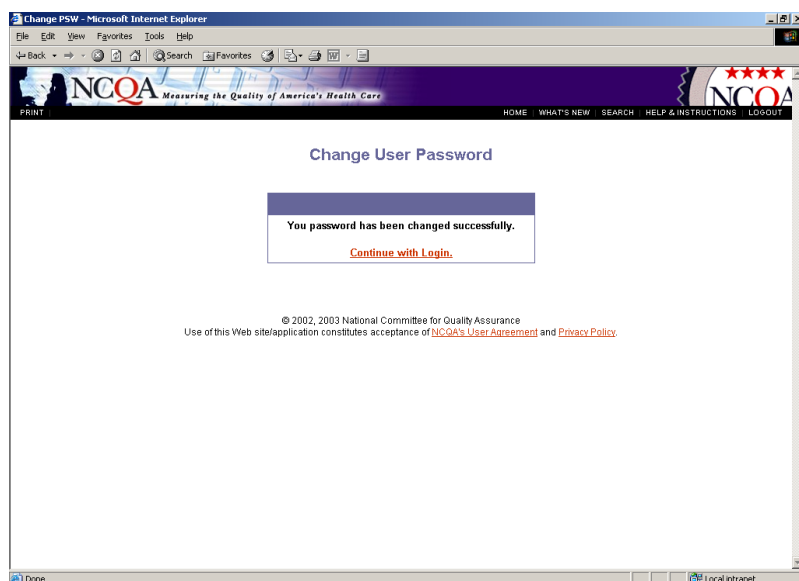
1. Under the *Administration* section, click the **Change User Password** link to open the *Change User Password* screen (Figure 6).
2. Complete all fields:
  - a. **User ID:** Enter your User ID.
  - b. **Current Password:** Enter your current Password.
  - c. **New Password:** Enter a new Password.
  - d. **Confirm New Password:** Re-enter the new Password.
  - e. Click the **Save/Update** button.

**Note:** Passwords must be at least 8 characters in length and have at least 3 of the following 4 characteristics:

- one uppercase letter
- one lowercase letter
- one numeric character
- one symbol (#, \$, &, etc.)

**Figure 6. Change User Password screen**

3. You will receive a message indicating that your Password change was successful (Figure 7). Click the **Continue with Login** link to return to the *Welcome* screen. Your old Password is now inactive and you must use your new Password to log in.



**Figure 7. Change User Password screen, after a successful Password change**

4. If your Password change was not successful, you will see one of the four error messages shown in Figure 8 below. Click on the **Return to the Change User Password screen** link to re-enter the information listed in step 2.

<p><b>Password Change Error</b></p> <p><b>You must enter a new password.</b></p> <p><a href="#">Return to the Change User Password screen</a></p>
<p><b>Password Change Error</b></p> <p><b>Please enter your current password.</b></p> <p><a href="#">Return to the Change User Password screen</a></p>
<p><b>Password Change Error</b></p> <p><b>Your new password does not meet password criteria. Please choose another password.</b></p> <p><a href="#">Return to the Change User Password screen</a></p>
<p><b>Password Change Error</b></p> <p><b>The passwords you typed do not match. Please type the new password in both textboxes.</b></p> <p><a href="#">Return to the Change User Password screen</a></p>

**Figure 8. Change User Password error messages**

## WHAT'S NEW

The first time you log into the ISS, and each time there is a new system notice or NCQA policy or publication update, the *What's New Notice* alert window will open in front of the *Welcome* screen and prompt you to check the *What's New* screen.

**Note:** Until you open the *What's New* screen, The *What's New Notice* alert window will pop up each time you log in to the ISS or visit the *Welcome* screen.

1. There are two ways to open the *What's New* screen:
  - Click the **"What's New" page** link in the *What's New Notice* alert window
  - Click the **WHAT'S NEW** link on the Top Navigation Bar.
2. The *What's New* screen will open and display system notices and policy and publication updates.

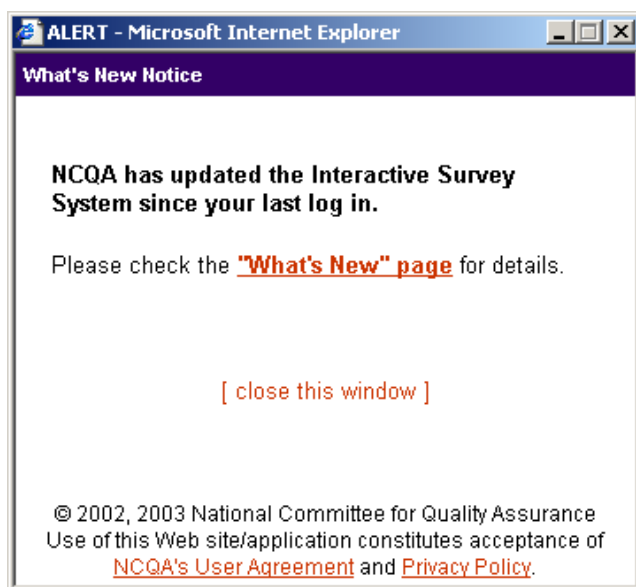


Figure 9. *What's New Notice* pop-up window

# **PART II: OVERVIEW OF THE STANDARDS AND GUIDELINES AND SURVEY TOOL MENU OPTIONS**

# INTRODUCTION TO THE ISS MENUS

The following two ISS menu bars are located below the NCQA banner:

- **Top Navigation Bar** which includes ISS functions, and
- **Blue Navigation Bar** which includes the contents of the publication

The menu options available on each navigation bar depend on:

- where you are in the ISS - the farther you drill down in a publication, the more new functions are available
- whether you purchased the **Survey Tool** or the **Standards and Guidelines** - the **Survey Tool**, which supports data entry and documentation for survey, has more menu functions
- which product's **Survey Tool** you purchased (e.g., MCO, MBHO, DM)

The following is a brief overview of all ISS menu options. More detail on each menu option can be found in later sections of this manual as indicated within each option's description.

## Top Navigation Bar

The menu options on the Top Navigation Bar (Figures 10, 11, and 12) depend on where you are in the ISS and what type of publication you have purchased (e.g. the **Standards and Guidelines** or the **Survey Tool**).

## Core Menu Options

Beginning on the *Welcome* Screen and throughout the ISS, the Top Navigation Bar displays the following menu options:

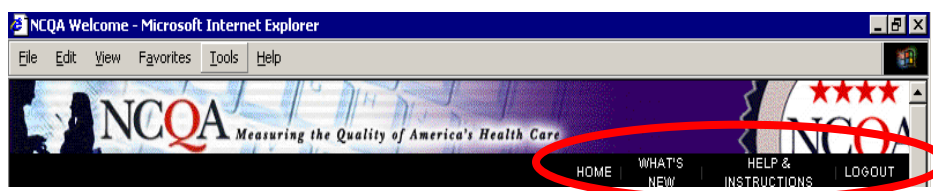


Figure 10. Top Navigation Bar, Core Menu Options

- **HOME:** Use this link to return to the *Welcome* screen at any time and from anywhere in the ISS. See *The Welcome Screen* section of this manual for more information.
- **WHAT'S NEW:** Use this link to view NCQA policy and publication updates and system notices. See the *What's New* section of this manual for more information.
- **HELP & INSTRUCTIONS:** Use this link to access help resources for the ISS. See the *Support* section of this manual for more information.

- **LOGOUT:** Always use this link to end your ISS session.

## Standards and Guidelines and Survey Tool Menu Options

After you enter the **Standards and Guidelines** or **Survey Tool**, the Top Navigation Bar displays the following two additional links:



Figure 11.  
Top Navig.  
Bar, after  
entering a  
publication

- **PRINT:** Use this link to print numeric results or access printable versions of Web publications or a printer-friendly version of the **Survey Tool**. See the *Printing* section of this manual for more information.
- **SEARCH:** Use this link to navigate to the *Search* screen, where you can enter a word or phrase for which to search the publication.

## Survey Tool Only Menu Options

Finally, the Top Navigation Bar displays the following additional links only after entering the **Survey Tool** publication:

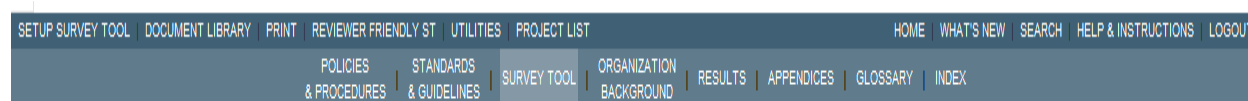


Figure 12.  
Top Navig.  
Bar,  
SURVEY  
TOOL only

- **SETUP SURVEY TOOL:** Use this link to make your Units of Assessment and Evaluation Options selections according to the accreditation, certification or recognition program requirements. See the *Setting Up the Survey Tool* section of this manual for more information.

**Caution:** Not all NCQA Accreditation, Certification and Recognition programs require you to select specific Units of Assessment and/or Evaluation Options. If not, the **SETUP SURVEY TOOL** menu option will not display on the Top Navigation Bar.

- **DOCUMENT LIBRARY:** Use this link to view and manage all the documents linked to your **Survey Tool**. See the *Using the Document Library* section of this manual for more information.

- **UPLOAD DOCUMENTS –** Use this link to attach and upload copies of final documents to the ISS Server for NCQA to review upon submission of your Survey Tool. *See the Upload Documents section of this manual for more information.*
- **SUBMIT SURVEY TOOL:** Use this link to submit your **Survey Tool** to NCQA for survey. See the *Submitting the Survey Tool for NCQA Survey* section of this manual for more information.
- **UTILITIES:** Use this link to access the ISS *Utilities* features, including a View All Support Text/Notes feature and a Completeness Check feature, which are provided to help you review your **Survey Tool** data. See the *Utilities* section of this manual for more information.

## Blue Navigation Bar

The Blue Navigation Bar appears beneath the Top Navigation Bar once you've accessed a publication, and displays options to help you navigate the publication. The currently selected menu option on the Blue Navigation Bar will highlight to show your location (Figure 13).

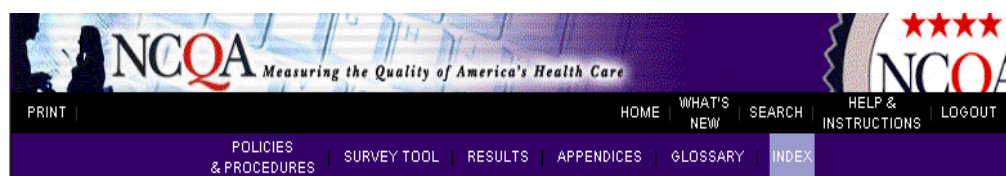


Figure 13. Blue Navigation Bar, Index screen is displayed

The Blue Navigation Bar displays the following menu options:

- **POLICIES & PROCEDURES:** This section includes an overview of the accreditation, certification or recognition program selected and a description of the *Policies and Procedures* for the program. See the *Policies and Procedures* section of this manual for more information.
- **SURVEY TOOL** or **STANDARDS AND GUIDELINES:** This link will depend on whether you have purchased the **Standards and Guidelines** or the **Survey Tool**.
  - If you have purchased the **Standards and Guidelines**, use this link to access the **Standards and Guidelines** publication.
  - If you have purchased the **Survey Tool**, use this link to access the **Survey Tool** for the purpose of readiness evaluation or survey.
- **ORGANIZATION BACKGROUND: (Applies only to the Survey Tool)** Use this link to open the *Organization Background* screen, where you can input information about your organization. See the *Organization Background* section of this manual for more information.

**Note:** The *Organization Background* section is not applicable for all NCQA Accreditation, Certification and Recognition programs. If it is not applicable, the **ORGANIZATION BACKGROUND** link will not appear on the Blue Navigation Bar.



- **RESULTS:** (Applies only to the Survey Tool) Use this link to view summary and detailed numeric results, results on must-pass elements, and recommendations. See the *Results* section of this manual for more information.
- **APPENDICES:** Use this link to read additional information on your accreditation, certification or recognition program. See the *Appendices* section of this manual for more information.
- **GLOSSARY:** Use this link to view terms and definitions used in the publication. See the *Glossary* section of this manual for more information.
- **INDEX:** Use this link to return to the *Index* screen (Figure 14) for the publication, which contains descriptions of each of the Blue Navigation Bar options and links to navigate them.

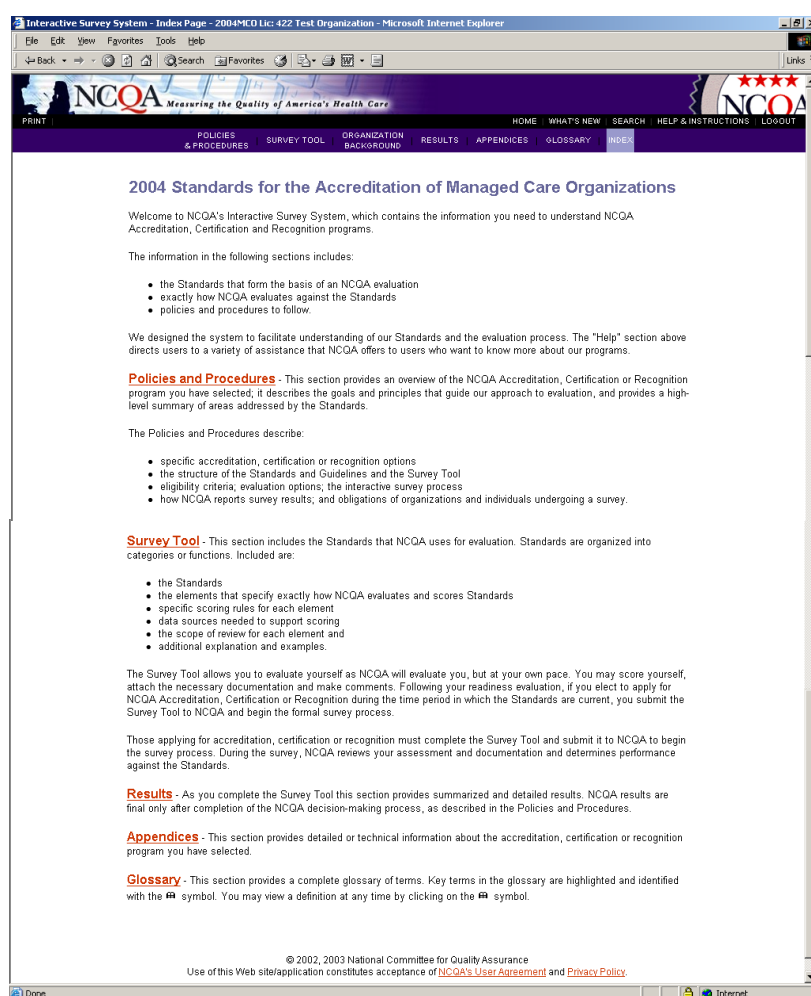


Figure 14. *Index* screen

# **PART III: NAVIGATING THE STANDARDS AND GUIDELINES AND SURVEY TOOL**

## POLICIES AND PROCEDURES

This section of a **Survey Tool** or **Standards and Guidelines** publication includes an overview of the accreditation, certification or recognition program and a description of the *Policies and Procedures* for the program.

The *Policies and Procedures* are provided in Adobe Acrobat PDF format. You must have Adobe Acrobat Reader to view a PDF. You can download Adobe Acrobat Reader, free of charge, at [www.adobe.com](http://www.adobe.com).

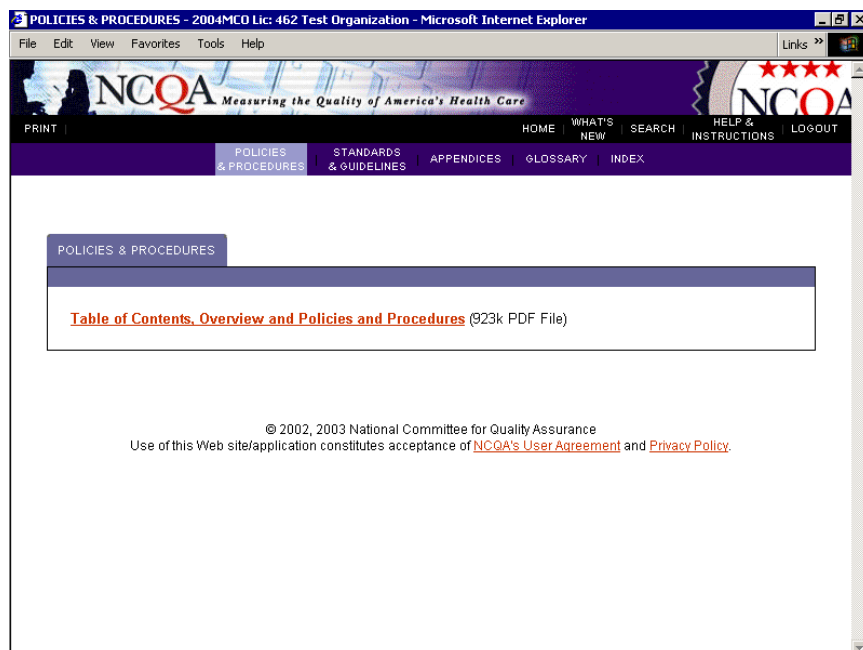


Figure 15. *Policies & Procedures* screen

# CATEGORIES, STANDARDS & ELEMENTS

The evaluation standards for NCQA's Accreditation, Certification and Recognition programs are organized into categories or functions and are also broken down into the elements that make up each standard. At the core of the ISS Web publications are these categories, standards and elements.

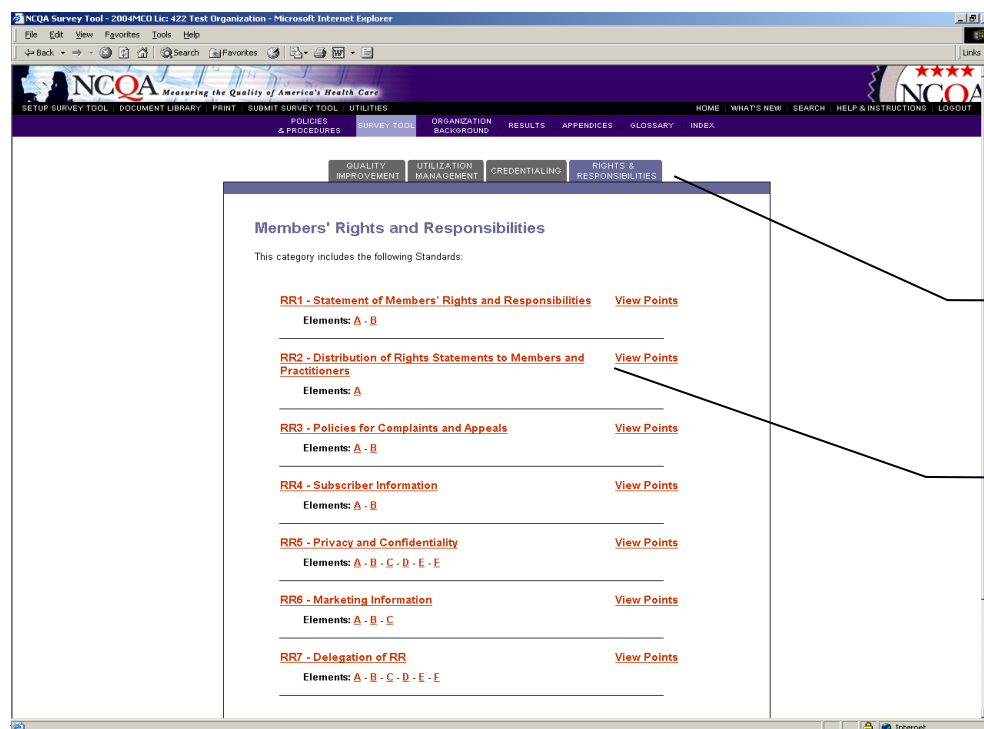
The following information explains how to navigate categories, standards and elements in both the **Standards and Guidelines** and **Survey Tool**.

## Standards Categories

To view the standards categories in a selected publication:

1. After selecting a publication from the *Welcome* screen, select the **STANDARDS AND GUIDELINES** or **SURVEY TOOL** link on the Blue Navigation Bar.
2. The *Survey Tool* or *Standards and Guidelines* screen displays, showing the standards categories for the selected program in a tab format.
3. Click on a category tab to view the *Category Index* screen (Figure 16), which lists the standards in the category.

**Note:** Category tabs will vary by NCQA Accreditation, Certification and Recognition program.



**Figure 16.**  
**Category Index**  
**screen, Members'**  
**Rights &**  
**Responsibilities**  
**Category**

**Standards**  
**Categories**

**Standards and**  
**Elements in the**  
**Category**

## Standard and Element Screen

From the *Category Index* screen, you can drill down further by clicking on an individual standard or element link to display the *Standard and Element* screen (Figure 17 and 18). Each standard and all of its elements are displayed on one *Standard and Element* screen, which includes all information necessary for evaluation. The information included on the *Standard and Element* screen for both the **Standards and Guidelines** and **Survey Tool** publications is provided below. Some information will not be included for every element.

Information included on both the **Standards and Guidelines** and **Survey Tool** *Standard and Element* screen (Figure 17), includes:

- **Standard Name / Text.** Located at the top of the screen. Provides context for the elements.
- **Element Name(s) / Text.** Each standard and all of its elements are displayed on one screen. Each element will be displayed as read-only if it is not included in the Evaluation Product (EP).
- **Summary of Changes.** Use the **Summary of Changes** link to launch a pop-up window that includes a summary of changes to this standard from the previous year's standards.
- **View Points.** Use the **View Points** link to the right of the element or standard name to see possible points information.
- **Clear Data.** Use the **Clear Data** button to clear element values for rescoring.
- **Scoring Guidelines.** Scoring details are provided in a table format.
- **Data Source.** Lists the resources NCQA reviews to locate information to support the score.
- **Scope of Review.** Describes how the element's score affects the overall score.
  - For example, NCQA may evaluate the whole organization or only a sample of programs, products or other relevant sub-units of the organization.
- **Reference Information.**
  - **Explanation.** Use this link to launch a pop-up window with information explaining the element in further detail.
  - **Examples.** Use this link to launch a pop-up window with examples on how to comply with the element.
  - **Look-back Period.** Use this link to launch a pop-up window with information on how far back NCQA looks to determine compliance for the element.

**Figure 17. Standard and Element screen for a Standards and Guidelines publication**

QUALITY IMPROVEMENT UTILIZATION MANAGEMENT CREDENTIALING RIGHTS & RESPONSIBILITIES MEMBER CONNECTIONS MEDICAID MEDICARE ADVANTAGE

← PREVIOUS STANDARD Save NEXT STANDARD →

**UM2: Clinical Criteria for UM Decisions** [View Points](#)

To make utilization decisions, the organization uses written criteria based on sound clinical evidence and specifies procedures for appropriately applying the criteria.

**Intent**

The organization applies objective and evidence-based criteria and takes individual circumstances and the local delivery system into account when determining the medical appropriateness of health care services.

[Summary of changes](#)

**ELEMENT A - UM Criteria** [View Points](#) [Clear Data](#)

The organization:

	Yes	No	NA
1. Has written UM decision-making criteria that are objective and based on medical evidence.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Has written policies for applying the criteria based on individual needs.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has written policies for applying the criteria based on an assessment of the local delivery system.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Involves appropriate practitioners in developing, adopting and reviewing criteria.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Annually reviews the UM criteria and the procedures for applying them, and updates the criteria when appropriate.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

Standard Name and Text

Element Name and Text

View Points Information

Clear Data Button

Scoring Guidelines

Data Source Information

Scoring:

100%	80%	50%	20%	0%
The organization meets all 5 factors	The organization meets 4 factors	The organization meets 3 factors	The organization meets 2 factors	The organization meets 0-1 factors

Data Source:

Documented process, Reports

Scope of Review:

NCQA reviews and scores this element once for all product lines/products brought forward for accreditation that are administered the same. If HMO and POS products are administered differently, NCQA reviews each product using one Survey Tool, and the score for the element is based on the average of the scores for each product.

If PPO products are administered differently from HMO or POS products, NCQA uses a separate Survey Tool to review and score the PPO products.

If product lines are administered differently in any product (e.g., HMO, POS, PPO), NCQA reviews each product line, and the score for the element is based on the average of the scores for each product line.

Reference Information:

[Explanation](#) | [Examples](#) | [Look-back period](#)

ELEMENT SCORE

DOCUMENTS

SUPPORT TEXT / NOTES

REVIEW PREVIOUS STAGES

Scope of Review

Reference Information

---

## Additional Features in the Survey Tool

Figure 18 shows the additional features included on the *Standard and Element* screen for the **Survey Tool**. See the *Using the Survey Tool for Readiness Evaluation* section of this manual for more information on using the **Survey Tool**. The additional **Survey Tool** features include:

- **Data Input Items.** One or more data input areas are provided for each element, the format of which vary depending on the type of data required to evaluate and score the element, and may include:
  - Yes/No radio buttons
  - Multiple choice radio buttons
  - Entering a percentage or number
  - Selecting “High/Medium/Low” from a drop-down list to reflect file review performance.
- An Element **Score** button to view your readiness evaluation scores for the element. See the *Results* section of this manual for more information on viewing results.
- A **Documents** button to link documents to the element to support your readiness evaluation. See the *Linking and Managing Documents from the Standard and Element Screen* section of this manual for more information.
- A **Support Text/Notes** button to enter, edit and review statements in support of your readiness evaluation. See the *Support Text / Notes* section of this manual for more information.
- A **Supplemental Worksheet** button to download and open supplemental worksheets. See the *Supplemental Worksheets* section of this manual for more information.

**Note:** The **Supplemental Worksheet** button only appears on elements that involve file review or use a worksheet.



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PREVIOUS STANDARD
Save
NEXT STANDARD

### UM2: Clinical Criteria for UM Decisions [View Points](#)

To make utilization decisions, the organization uses written criteria based on sound clinical evidence and specifies procedures for appropriately applying the criteria.

**Intent**

The organization applies objective and evidence-based criteria and takes individual circumstances and the local delivery system into account when determining the medical appropriateness of health care services.

[Summary of changes](#)

**ELEMENT A - UM Criteria**
[View Points](#)
Clear Data

The organization:

	Yes	No	NA
1. Has written UM decision-making criteria that are objective and based on medical evidence.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Has written policies for applying the criteria based on individual needs.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has written policies for applying the criteria based on an assessment of the local delivery system.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Involves appropriate practitioners in developing, adopting and reviewing criteria.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Annually reviews the UM criteria and the procedures for applying them, and updates the criteria when appropriate.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

**Figure 18. Standard and Element screen for a Survey Tool**

**Scoring:**

100%	80%	50%	20%	0%
The organization meets all 5 factors	The organization meets 4 factors	The organization meets 3 factors	The organization meets 2 factors	The organization meets 0-1 factors

**Data Source:** Documented process, Reports

**Scope of Review:**

NCQA reviews and scores this element once for all product lines/products brought forward for accreditation that are administered the same. If HMO and POS products are administered differently, NCQA reviews each product using one Survey Tool, and the score for the element is based on the average of the scores for each product.

If PPO products are administered differently from HMO or POS products, NCQA uses a separate Survey Tool to review and score the PPO products.

If product lines are administered differently in any product (e.g., HMO, POS, PPO), NCQA reviews each product line, and the score for the element is based on the average of the scores for each product line.

**Reference Information:**
[Explanation](#) | [Examples](#) | [Look-back period](#)

ELEMENT SCORE
DOCUMENTS
SUPPORT TEXT / NOTES
REVIEW PREVIOUS STAGES

Data input area

Element Score button

Document button

Support Text/Notes button

## APPENDICES

The *Appendices* screen (Figure 19) includes links to detailed or technical information about the accreditation, certification or recognition program you have selected. *Appendices* documents are presented in PDF, Word and Excel formats.



You must have Adobe Acrobat Reader to view a PDF. You can download Adobe Acrobat Reader, free of charge, at [www.adobe.com](http://www.adobe.com).



**Figure 19. Appendices screen**

# GLOSSARY

The *Glossary* screen (Figure 20) includes a complete list of relevant terms.

**Note:** Key glossary terms, referred to as *Dynamic Glossary Terms*, are highlighted and identified with the  symbol throughout the ISS. View the definition of a dynamic glossary term by clicking on the  symbol at any time.

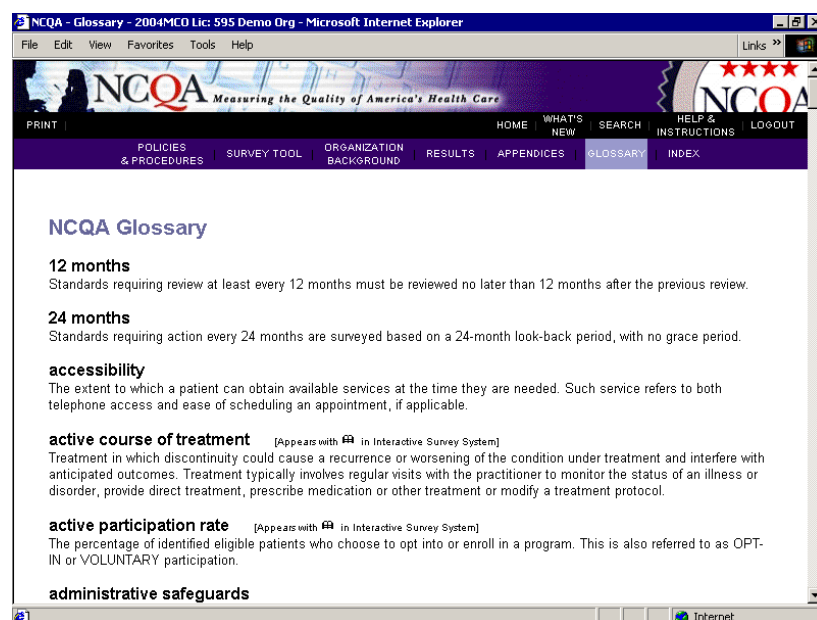


Figure 20. *Glossary* screen

# **PART IV: USING THE SURVEY TOOL FOR READINESS EVALUATION**

## SETTING UP THE SURVEY TOOL

You must set up your **Survey Tool** before you begin your readiness evaluation, including making Unit of Assessment and Evaluation Option selections for your organization.

To set up your **Survey Tool**, navigate to the *Setup Survey Tool* screen as follows:

1. Enter a **Survey Tool** publication and click the **SURVEY TOOL** link on the Blue Navigation Bar.
2. Then click the **SETUP SURVEY TOOL** link on the Top Navigation Bar.

The *Setup Survey Tool* screen (Figure 21) will display showing the following four links, as applicable:

- **Select [Unit of Assessment]**
- **Select Evaluation Options**
- **Upload Documents**
- **Submit Survey Tool to NCQA**

**Caution:** Not all NCQA Accreditation, Certification and Recognition programs require you to select specific Evaluation Options or Units of Assessment. However, if the **SETUP SURVEY TOOL** menu option appears on the Blue Navigation Bar in your Survey Tool, you must complete the *Setup Survey Tool* section before conducting your readiness evaluation and submitting your Survey Tool.

If one of these features is not needed for your Survey Tool, its link will not display.

If neither feature is needed, the **SETUP SURVEY TOOL** menu option will not appear on the Blue Navigation Bar.

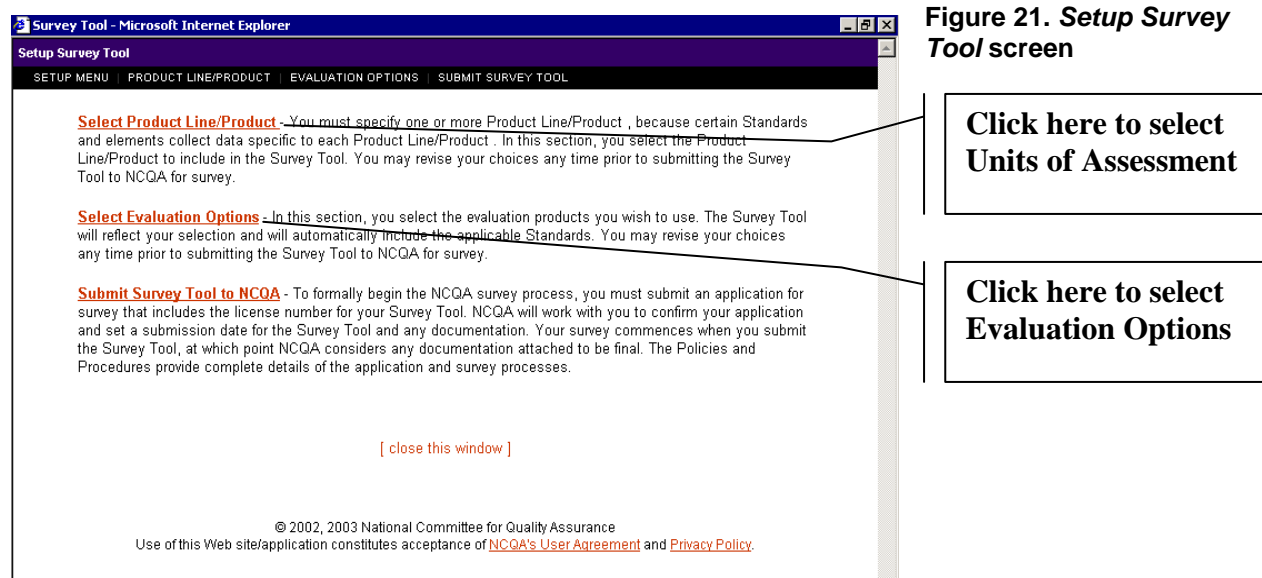


Figure 21. Setup Survey Tool screen

## Selecting Units of Assessment

Some NCQA Accreditation, Certification and Recognition programs collect data and evaluate an organization at a level below or within the organization as a whole. The level of evaluation is generically referred to as the Unit of Assessment. If your **Survey Tool** requires you to select Units of Assessment for your evaluation, it will include a **Select [Unit of Assessment]** link on the *Setup Survey Tool* screen.

**Note:** The Survey Tool uses terms specific to the accreditation, certification or recognition program to refer to Units of Assessment (e.g. product line / product, program, applicant, etc.). This manual uses the generic term Unit of Assessment.

To select Units of Assessment for your readiness evaluation and/or for NCQA survey:

1. On the *Setup Survey Tool* screen, click on the **Select [Unit of Assessment]** link. The exact link name will be specific to the Units of Assessment for the accreditation, certification or recognition program (e.g. product line / product, program, applicant, etc.).
2. The Units of Assessment for the program will display in a table format on the *Units of Assessment* screen (Figure 22). If your **Survey Tool** allows you the option of entering additional Units of Assessment, type your entries into the blank fields provided below the default Units of Assessment.
3. To select a Unit of Assessment for readiness evaluation, check its box in the "Select for Readiness Evaluation" column.

- To select a Unit of Assessment to submit for NCQA survey, check its box in the “Select to Submit for NCQA Survey” column.

**Note:** See the *Policies and Procedures* for details on how many Units of Assessment you should choose for your accreditation, certification or recognition program.

- To remove a Unit of Assessment, deselect the checkbox.

**Caution:** If you deselect a Unit of Assessment, it will be removed from view in your Survey Tool and any data entry you’ve completed for it will be removed from all results calculations. The Survey Tool saves your data entry and will recover it if you reselect the Unit of Assessment later.

- Click the **Save** button to save your selections.

The ISS will now set up your **Survey Tool** to collect data for each Unit of Assessment when required for an element. You may revise your selections at any time during your readiness evaluation; however, if you submit the **Survey Tool** to NCQA for survey, your final selections must match those in your application for accreditation, certification or recognition. See the *Policies and Procedures* for details on the application process.

Survey Tool - Microsoft Internet Explorer

Select Product Line/Product

SETUP MENU | PRODUCT LINE/PRODUCT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL

Certain Standards and elements ask questions and collect data specific to each Product Line/Product . You must select (or enter) at least one Product Line/Product to complete the Survey Tool.

You may revise these selections at any time prior to submission.

Save

Product Line/Product	Elements Complete	Select for Readiness Evaluation	Select to Submit for NCQA Survey
Commercial HMO	Complete	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Commercial POS	Complete	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Commercial HMO/POS Combined	Complete	<input type="checkbox"/>	<input type="checkbox"/>
Medicare HMO	Complete	<input type="checkbox"/>	<input type="checkbox"/>
Medicare POS	Complete	<input type="checkbox"/>	<input type="checkbox"/>
Medicare HMO/POS Combined	Complete	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid HMO	Complete	<input type="checkbox"/>	<input type="checkbox"/>

Save

[ close this window ]

**Figure 22. Units of Assessment screen**

Select Units of Assessment for Readiness Evaluation

Select Units of Assessment for NCQA Survey

---

## Selecting Evaluation Options

Some NCQA Accreditation, Certification or Recognition programs offer multiple Evaluation Options. If this feature applies to your organization, detailed instructions are available in the Policies and Procedures manual.

If the **Select Evaluation Options** link appears on the *Setup Survey Tool* screen, select your evaluation options as follows:

1. Click the **Select Evaluation Options** link.
2. The Evaluation Options for the program will display in a table format on the *Evaluation Options* screen (Figure 23).
3. To select an Evaluation Option for readiness evaluation, check its box in the “Select for Readiness Evaluation” column.
4. To select an Evaluation Option for submission to NCQA for survey, check its box in the “Select to Submit for NCQA Survey” column.

**Note:** See the *Policies and Procedures* for details on how many Evaluation Options you should choose for the program you selected.

5. To remove an Evaluation Option, deselect the checkbox.

**Caution:** If you deselect an Evaluation Option, it will be removed from your Survey Tool and any data entry you’ve completed for it will be removed from all results calculations. The Survey Tool saves your data entry and will recover it if you reselect the Evaluation Option later.

6. Click the **Save** button to save your selections.

The ISS will update your **Survey Tool** to reflect your selections.

You may revise your selections at any time during your readiness evaluation; however, if you submit the **Survey Tool** to NCQA for survey, your final selections must match those in your application for accreditation, certification or recognition. See the *Policies and Procedures* for details on the application process.



Figure 23. *Evaluation Options* screen

[Instructions](#)

To conduct a readiness evaluation, and undergo survey, you must select from the evaluation options below. For additional information on selecting evaluation options, click on the instructions link above.

To select evaluation options for readiness evaluation, check the box for the product line for Readiness Evaluation" column. To select evaluation options to submit for survey, check the options in the "Select to Submit for Survey" column.

**You may revise these selections at any time during your readiness evaluation.**

Evaluation Option	Survey Tool Complete	Select for Readiness Evaluation	Select to Submit for Survey
<b>You may select <u>any one</u> of the following evaluation options:</b>			
Interim Survey	Not Complete	<input type="checkbox"/>	<input type="checkbox"/>
<b>OR</b>			
<b>You may select <u>one or more</u> of the following evaluation options:</b>			
First Survey	<span style="color: red;">Not Complete</span>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Renewal Survey	Not Complete	<input type="checkbox"/>	<input type="checkbox"/>

## ELEMENT SCORING AND DATA ENTRY

Once you have set up your **Survey Tool** (see the *Setting Up the Survey Tool* section of this manual for more information), you can begin entering data for your readiness evaluation. During readiness evaluation, you self-score each element, link supporting documentation, enter evaluation notes and view your overall readiness evaluation results. You can make changes to your **Survey Tool** (i.e. change data input for elements, Units of Assessment selections, Evaluation Option selections, written evaluations or linked documents) and perform a reevaluation at any time prior to submission of the **Survey Tool** to NCQA for survey.

All data entry to complete standards and elements is done on the *Standard and Element* screen. Each standard and all of its elements are displayed on one *Standard and Element* screen. To navigate to the *Standard and Element* screen for a particular standard:

1. Select your publication from the *Welcome* screen.
2. Click the **SURVEY TOOL** link on the Blue Navigation Bar.
3. Click a category tab to select the standards category you want to complete. A list of the standards in the category will display.
4. Click on a standard or element link to open the *Standard and Element* screen.

## Scoring the Elements in a Standard

This section includes instructions on how to use the **Survey Tool** to score an element. Please note that some elements are scored for each Unit of Assessment or multiple times (See the *Setting Up the Survey Tool* section of this manual for more information). Instructions on how to use the **Survey Tool** to score each Unit of Assessment or multiple item are also included below.

**Caution:** Only one ISS user at a time may have a given *Standard and Element* screen open within the Survey Tool. If you attempt to open a *Standard and Element* screen that is already in use by another user, the system will display a message such as the following:

Standard CR1 is currently in use by User2; please try  
again later.  
Click [here](#) to close and return to the previous screen.

**Please coordinate closely with the other ISS users in your organization during your readiness evaluation.**

To score the elements in a standard:

1. Review the element text, Summary of Changes, Explanations, Examples and Look Back Period reference information.
2. Complete the element data input items. The data input area may contain one or more types of input items, which vary depending on the type of data required to evaluate and score the element. The types of input items may include:
  - Yes/No radio buttons (Figure 24)
  - Multiple choice radio buttons (Figure 25)
  - Entering a percentage or number (Figure 26)
  - Selecting “High/Medium/Low” from a drop-down list to reflect file review performance (Figure 27).
3. Use the **Element Score** button to view your percentage score for the element. See the *Results* section of this manual for more information on viewing results.
4. Use the **Support Text/Notes** button to input or edit evaluation notes to support your score or private notes. See the *Support Text/Notes* section of this manual for more information.
5. Use the **Documents** button to link or edit supporting documentation. See the *Linking and Managing Documents from the Standard and Element Screen* section of this manual for more information.
6. Use the **Supplemental Worksheet** button to download and complete a worksheet for the element as required. See the *Supplemental Worksheet* section of this manual for more information.
7. Complete the above steps for each element in the standard.
8. Save your work. There are four ways to save your data input:
  - Click the **Save** button at the top or bottom of the screen
  - Click the **Previous Standard** button at the top or bottom of the screen.
  - Click the **Next Standard** button at the top or bottom of the screen.
  - Click the **Element Score** button under the element. The element score will display in a pop-up window. Close the window to return to the *Standard and Element* screen.

**Caution:** Remember to save your data before you exit the *Standard and Element* screen, including but not limited to, navigating to a different category tab, logging out or closing your browser.

**ELEMENT A - Policies and Procedures** [View Points](#) [Clear Data](#)

The M+C organization's written policies and procedures on advance directives:

	Yes	No
1. allow a member's representative to manage care or treatment decisions when the member is incapacitated and unable to do so	<input type="radio"/>	<input type="radio"/>
2. comply with state law	<input type="radio"/>	<input type="radio"/>
3. state that the M+C organization is not required to provide care that conflicts with an advance directive	<input type="radio"/>	<input type="radio"/>
4. allow a member or the member's representative to be involved in decisions about withholding resuscitative services or declining/withdrawing life-sustaining treatment.	<input type="radio"/>	<input type="radio"/>

Scoring:

100%	80%	50%	20%	0%
Met	No scoring option.	No scoring option.	No scoring option.	Not met

Data Source: Documented process

Scope of Review: NCQA scores this element once for the organization.

Reference Information: [Explanation](#) | [Examples](#) | [Look-back period](#)

[ELEMENT SCORE](#) [DOCUMENTS](#) [SUPPORT TEXT / NOTES](#)

Figure 24. Data Input - Yes/No

**ELEMENT B - QI Committee Minutes** [View Points](#) [Clear Data](#)

QI Committee meeting minutes reflect all committee decisions and actions, and are signed and dated.

Select the choice that most closely reflects the organization's performance.

☐ Minutes are signed and dated

☐ Minutes are either signed or dated

☐ Minutes are not signed or dated

☐ Minutes are not present

Scoring:

100%	80%	50%	20%	0%
Minutes are signed and dated	Minutes are either signed or dated	No scoring option.	Minutes are not signed or dated	Minutes are not present

Data Source: Reports

Scope of Review: NCQA scores this element once for all product lines/products brought forward for accreditation.

Reference Information: [Explanation](#) | [Examples](#) | [Look-back period](#)

[ELEMENT SCORE](#) [DOCUMENTS](#) [SUPPORT TEXT / NOTES](#)

Figure 25. Data Input - Multiple choice

**ELEMENT A** [View Points](#) [Clear Data](#)

The organization provides interventions<sup>aa</sup> to patients based on stratification<sup>aa</sup> and patient assessment.

Enter the percent (without % sign) of files compliant after completing the supplemental worksheet.  ☐ NA

Note: When submitting the ST to NCQA at the start of a review, enter "NA". NCQA will complete this element after reviewing a sample of files.

Scoring:

100%	75%	50%	0%
90-100% compliant on file review.	No scoring option.	60-89% compliant on file review.	0-59% compliant on file review.

Data Source: Documented Process<sup>aa</sup>, Records or files<sup>aa</sup>

Scope of Review: ONCE-NCQA scores this element once for the organization.

Reference Information: [Explanation](#) | [Examples](#)

[ELEMENT SCORE](#) [DOCUMENTS](#) [SUPPORT TEXT / NOTES](#) [SUPPLEMENTAL WORKSHEET](#)

Figure 26. Data Input - Percentage or number

**ELEMENT D - Non-BH Notice of Appeals Rights/Process** [View Points](#) [Clear Data](#)

The organization provides written notification of the non-behavioral health denial that contains the following:

During the onsite survey NCQA enters High, Medium, or Low based on the file review results. The organization may do so in its readiness evaluation. However, please mark this field "NA" for submission.

1. description of appeal rights, including the right to submit written comments, documents or other information relevant to the appeal  ☐ NA

2. explanation of the appeal process, including the right to member representation and time frames for deciding appeals  ☐ NA

3. if a denial is an urgent preservice or urgent concurrent denial, a description of the expedited appeal process.  ☐ NA

Scoring:

100%	80%	50%	20%	0%
High (90-100%) on file review for all 3 factors	High (90-100%) on file review for 2 factors; medium (60-89%) on file review for 1 factor	High (90-100%) on file review for 1 factor; medium (60-89%) on file review for 2 factors or high (90-100%) on file review for 2 factors; low (0-59%) on file review for 1 factor or medium (60-89%) on file review for 3 factors	High (90-100%) or medium (60-89%) on file review for 1 factor; low (0-59%) on file review for 2 factors	Low (0-59%) on file review for 3 factors

Data Source: Records or files

Scope of Review: NCQA scores this element once based on an assessment of a sample of randomly selected files from all product lines/products brought forward for accreditation.

Reference Information: [Explanation](#) | [Examples](#) | [Look-back period](#)

[ELEMENT SCORE](#) [DOCUMENTS](#) [SUPPORT TEXT / NOTES](#) [SUPPLEMENTAL WORKSHEET](#)

Figure 27. Data Input - High/Medium/Low

## Scoring Elements by Unit of Assessment

**Caution:** This section only applies to NCQA Accreditation, Certification or Recognition programs that include data collection and element evaluation by Units of Assessment. See the *Setting Up the Survey Tool* section of this manual for more information

Some NCQA Accreditation, Certification or Recognition programs collect element data and present scores for each Unit of Assessment selected under the *Set Up Survey Tool* screen. These elements display the current Unit of Assessment being scored on the *Standard and Element* screen (Figure 28) and include a **Score All**, **Score Next**, **Score Previous** buttons for navigation to score the other Units of Assessment.

To score this type of element **Score Next** / **Score Previous** buttons:

1. Complete the data input items for the Unit of Assessment initially displayed.
2. Click on the **Score Next** button below the data input area to refresh the screen to allow data entry for the next Unit of Assessment.
3. Complete the data input items for the Unit of Assessment.
4. Repeat steps 2 and 3 until you have reviewed and scored the element for each Unit of Assessment (e.g. 4 of 4).
5. The **Score Next** button will be replaced by a **Score Previous** button when you reach the final Unit of Assessment. Use the **Score Next** and **Score Previous** buttons provided therein to review your scoring of each Unit of Assessment.
6. Scroll to the top or bottom of the *Standard and Element* screen and click on the **Save** button.

**ELEMENT A** [View Points](#) [Clear Data](#)

**Note:** The element is scored for each Disease Program selected in [SETUP SURVEY TOOL](#). Please score: **ASTHMA**

The organization has a program design for patient interventions<sup>SM</sup> that:

	Yes	No	NA
1. is based on the stratification <sup>SM</sup> levels or results of patient assessments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. designates different interventions <sup>SM</sup> for each stratification <sup>SM</sup> level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. obtains consumer input in developing program content <sup>SM</sup> for patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. includes special considerations and exceptions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

[Score Next](#)

**Scoring:**

100%	75%	50%	0%
The program design includes 4 factors.	The program design includes 3 factors.	The program design includes 2 factors.	The program design includes 0-1 factor(s).

**Data Source:** Documented Process<sup>SM</sup>

**Scope of Review:** ALL PROGRAMS--NCQA scores this element for each program the organization brings forward when seeking accreditation or certification.

**Reference Information:** [Explanation](#) | [Examples](#)

[ELEMENT SCORE](#) [DOCUMENTS](#) [SUPPORT TEXT / NOTES](#)

**Unit of Assessment currently being scored**

**Click here to score the next Unit of Assessment**

## Scoring Elements Multiple Times

**Caution:** Not all NCQA Accreditation, Certification or Recognition programs include elements that are scored multiple times.

Some elements require entering data for scoring multiple times (Figure 29). This is accomplished in the **Survey Tool** in a similar manner to scoring by Unit of Assessment; however, elements are not prepopulated with the name of the item being scored. Instead, the **Survey Tool** prompts you to identify the item being scored. For example, NCQA may only require that a sample of the Unit of Assessment be scored, or the element may score something other than the Unit of Assessment, such as a sample of delegate or provider contracts.

To score this type of element:

1. Type the first item into the input box provided.
2. Complete the data input items for the element.
3. Click on the **Score Next** button.
4. Repeat steps 2 and 3 until you have reviewed and scored all items (e.g. 4 of 4).
5. The **Score Next** button will be replaced by a **Score Previous** button when you reach the final item. Use the **Score Next** and **Score Previous** buttons provided therein to review your scoring of each item.
6. Scroll to the top or bottom of the *Standard and Element* screen and click the **Save** button.

To score this type of element using the **Score All** button:

The **Score All** button is the alternative to the Score Next / Score Previous buttons. Use this button if you would like to score all Units of Assessments on a single screen. (Figure 29)

1. Click the **Score All** button, to open the pop up window for scoring all Units of Assessments.
2. Enter entity names and score each Unit of Assessment. Click the Save button, to populate your selections to the selected element in the Survey Tool. (Figure 29a)
3. Click the **Push** button to populate the scoring entity name for each element in the standard that requires a scoring entity. (Figure 29a)

**Note:** The Push button is only available in the first Unit of Assessment of the standard for elements that NCQA scores multiple times.

**Note:** If you have fewer items to score than you are prompted to enter (e.g. you are asked to present data on a sample of four delegates, but you only delegate to one entity), type “Not Applicable” in each remaining input box and click the **Save** button.



ELEMENT A - Written Delegation Agreement

View Points

Clear Data

NCQA evaluates this element for up to four delegates. Enter the name of each delegate in the box to the right, using the "Next" and "Previous" buttons to move from delegate to delegate.

If your organization has less than four delegates, enter the name of each delegate for as many as you have, then, using the "Next" button, enter "Not Applicable" in the remaining boxes.

If this element is not applicable, enter "Not Applicable" in all four boxes.

For any evaluation where you enter "Not Applicable", enter "NA" for all element responses.  [1 of 4]

There is a written delegation document that :

	Yes	No	NA
1. is mutually agreed upon	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
2. describes the responsibilities of the organization and the delegated entity	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
3. describes the delegated activities	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
4. requires at least semiannual reporting to the organization	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
5. describes the process by which the organization evaluates the delegated entity's performance	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
6. describes the remedies, including revocation of the delegation, available to the organization if the delegated entity does not fulfill its obligations	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

Score All

Score Next

Scoring:

100%	80%	50%	20%	0%
The delegation document meets 5-	The delegation document meets 4	The delegation document meets 3	The delegation document meets 1	The delegation document meets 0

Type in the item name here

Click here to score the next item

Score All – Score all elements on a single screen

Figure 29. Element Scored Multiple Times

Score all for QH4 Element A

There is a written delegation document that :

Scoring Entities	NOT APPLICABLE			NOT APPLICABLE			NOT APPLICABLE			NOT APPLICABLE		
	Yes	No	NA	Yes	No	NA	Yes	No	NA	Yes	No	NA
1. is mutually agreed upon	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. describes the responsibilities of the organization and the delegated entity	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. describes the delegated activities	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
4. requires at least semiannual reporting to the organization	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
5. describes the process by which the organization evaluates the delegated entity's performance	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
6. describes the remedies, including revocation of the delegation, available to the organization if the delegated entity does not fulfill its obligations	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Save

If you would like to make the scoring entities the same throughout this standard based on your current scoring entity entries, please click  button.

Click here to push item names to all elements in the standard

Figure 29a. Score All Element window

---

# SUPPORT TEXT/NOTES

## Overview

The **Support Text/Notes** button under each element can be used to add evaluation text about scoring, comments and private notes for each element. As the **Survey Tool** progresses through the various stages of the survey process, this screen also provides a **View Previous Stage** link to view notes from previous stages. See the *Policies and Procedures* for details on survey stages.

The *Support Text/Notes* screen (Figure 30) includes four content areas. Not all content areas are visible at all times and some are read only as noted below.

## Evaluation Notes

The *Evaluation* notes area is used in two ways:

1. During your readiness evaluation, you may use this area to provide additional information to support how you scored an element. When you undergo a survey, this information is submitted to NCQA with the **Survey Tool**.
2. Once the survey starts, NCQA uses this area to provide additional information to clarify or explain your organization's performance evaluation.

## Comments

The *Comments* area is only accessible during the comment period of the NCQA survey. During the comment period, you have the opportunity to review the preliminary performance evaluation and numeric results and provide comments on errors or omissions. Comments should be concise and relate directly to the NCQA element. For most accreditation, certification and recognition programs, you may not introduce information that was not available at the time of the offsite or onsite survey. See the *Policies and Procedures* for details about information you may provide during the comment period.

NCQA will notify you when your **Survey Tool** is available for comment and the date by which comments must be completed. After the comment period is over, NCQA analyzes the comments and makes relevant changes in the **Survey Tool**.

**Caution:** Comments are only available after certain stages of the survey process and are not applicable for the purposes of readiness evaluation. In addition, not all NCQA Accreditation, Certification or Recognition programs include a comment period. See the *Policies and Procedures* for details.



---

## Recommendations

**Recommendations** are included by NCQA for each element that scores below a threshold defined in the *Policies and Procedures* upon the completion of the survey. Recommendations are intended to help you identify how to improve your performance. This area is read only.

**Caution:** Not all NCQA Accreditation, Certification or Recognition programs provide Recommendations; however, this tab is always present in the Survey Tool. See the *Policies and Procedures* for details about whether your program provides Recommendations.

See the *Results* section of this manual for information on how to view Recommendations for all applicable elements.

## Organization Private Notes

This area is for your organization's internal use only and is not visible to NCQA surveyors. This area allows the individuals in your organization who are working on the **Survey Tool** to communicate during the readiness evaluation and survey process. Each note in this area is stamped with the date, time and author's User ID. Users may edit or delete notes that they have entered into this area; however, only an organization ISS Administrator may edit or delete another user's note. NCQA surveyors cannot view private notes, even after the **Survey Tool** is submitted to NCQA.

Figure 30. *Supporting Text/Notes* pop up window

**Evaluation Box (QI1 - Element A)**

Use this space to provide any additional explanation of the element evaluation.

None

Edit

**Recommendations (QI1 - Element A)**

NCQA recommends the following actions for improvement on this element:

**Comments to Preliminary Results (QI1 - Element A)**

Use this space to provide any comments on preliminary results.

None

Edit

**Private Notes (QI1 - Element A)**

Your private notes are for internal use only and not visible to NCQA.

To read the full text for a note below, click the "more" link after the note's lead-in. Or you may view all the text for all notes via [View Complete Notes](#).

Add New Note

Date	User	Notes (Lead In)	Edit	Delete
[ close this window ]				

© 2002, 2003 National Committee for Quality Assurance  
Use of this Web site/application constitutes acceptance of [NCQA's User Agreement](#) and [Privacy Policy](#).

**Include Evaluation Notes here**

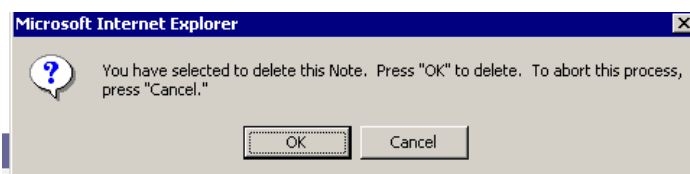
**Recommendations are read only**

**This area is only available for use during the Comments period**

**Add Private Notes here**

## Entering Evaluation Notes, Private Notes and Comments

1. Click the **Support/Text Notes** button, located below the element text.
2. Navigate to the area of the *Support/Text Notes* screen you want to edit. Click the **Edit** or **Add New Note** (for Private Notes) button.
3. Enter text into the scrollable text field (e.g. see Figure 31).
4. Click the **Save** button to return to the *Support/Text Notes* screen to view your note or click the **Cancel** button to cancel the entry.
5. After clicking **Save**, your changes will be verified on the Support/Text Notes screen with the following message “Successfully Updated” for Private Notes, and Evaluation Notes. (e.g. see Figure 32)
6. **(Private Notes Only)** Each Private Note is stamped with the date, time and author’s User ID. To read the full text of a Private Note, click the **"more"** link after the note's lead-in or click on the **View Complete Notes** link to view all text for all notes.
7. **(Private Notes Only)** To edit or delete a Private Note that you have entered in this area, use the **Edit** and **Delete** links provided for the note. When you click on the **Delete** link, you will be prompted to confirm that you want to delete the note as follows:



8. **(Private Notes Only)** Click **OK** to delete the note. Click **Cancel** to abort the process of deleting the note.

**Figure 31.**  
**Evaluation note**  
**screen**

Evaluation / Comments / Notes - Microsoft Internet Explorer provided by NCQA

**Successfully Updated**

**Evaluation (UM4 - Element A)**

Use this space to provide any additional explanation of the element evaluation.

Asthma

**Private Notes (UM4 - Element A)**

Your private notes are for internal use only and not visible to surveyors.

To read the full text for a note below, click the "more" link after the note's lead-in. Or you may view all the text for all notes via [View Complete Notes](#).

Date	User	Notes (Lead In)	Edit	Delete
10/7/2004 2:40:24 PM	sttexad01	Diabetes... <a href="#">more</a>	<a href="#">Edit</a>	<a href="#">Delete</a>
10/7/2004 12:54:46 PM	sttexad01	Privacy Certification... <a href="#">more</a>	<a href="#">Edit</a>	<a href="#">Delete</a>

**Figure 32. Saved Evaluation note screen**

---

## SUPPLEMENTAL WORKSHEETS

**Caution:** Not all elements have Supplemental Worksheets.

Supplemental Worksheets are usually Microsoft Word or Excel documents. NCQA uses Supplemental Worksheets to provide:

- a mechanism to submit required supporting data for an NCQA survey
- tools to aggregate more detailed data (such as reviews of individual files), which is then used to complete an element.

To use a Supplemental Worksheet:

1. Click on the **Supplemental Worksheet** button below the element.
2. Download the worksheet and save it to a local drive, directory or disk.
3. Follow the instructions on the first page of the worksheet.

**Caution:** Some worksheets are for NCQA use only; some should be completed and returned to NCQA with your Survey Tool submission. Worksheets include specific instructions about what should be completed when you submit your Survey Tool. Read and follow all instructions carefully.

4. If required, link the completed worksheet to all applicable elements via the Document Library. See the *Using the Document Library* section of this manual for more information.

**Note:** Some completed worksheets will need to be linked to multiple elements.

# INTRODUCTION TO MANAGING DOCUMENTS

## Supporting Documents

The **Survey Tool** includes features to allow you to reference (“link”) documentation to specific elements to support data entry and evaluation. During your NCQA survey, you will submit (“upload”) these documents to NCQA with your **Survey Tool**.

**Note:** In most cases, referencing a maximum of three documents for each element is sufficient to demonstrate compliance.

Documents linked to the **Survey Tool** during your readiness evaluation are for your organization’s reference only. You may update reference information or revise linked documents any time during your readiness evaluation (e.g., modify, move, rename). When you submit your **Survey Tool** for NCQA survey, the verified and linked documents are presented to NCQA for review. Refer to *Submitting the Survey Tool for NCQA Survey* for information.

During the readiness evaluation, you can link, unlink and view documents linked to any element using the either of the following two areas of the **Survey Tool** (also described in detail below):

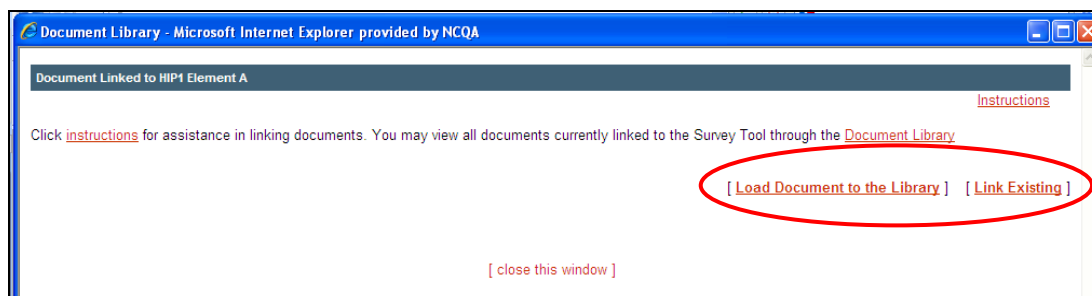
1. The *Standard and Element* screen, *or*
2. The Document Library.

**Note:** The maximum file size for uploading a document is 80 MB.

## Linking and Managing Documents From the Standard and Element Screen

1. Click the **Documents** button, located below an element. The *Document Linked* screen opens (Figure 33). From this screen you can upload and link a new document (one that has not already been linked to another location of your Survey Tool) or link an existing document from the Document Library.

**Figure 33.** *Document Linked* screen



## Linking a New Document

1. On the *Document Linked* screen (Figure 33), click the **Load Document to the Library** link.
2. Complete all fields (Figure 34):
  - **\*Document Name:** Give the document a unique name. (required)
  - **Reference Pages:** The location of evidence that supports your evaluation. Enter a page number, or a range of page numbers, and a paragraph (e.g., page 2, paragraph 3).
  - **Relevance Level:** Indicate whether the document is Primary, Secondary or Supporting.
  - **\*Document File Path:** Where the document resides on the drive. The Survey Tool will link to this document. (required)

Figure 34. *Link Document* screen

The screenshot shows a web form titled "Link to Element". It contains three identical sections for adding documents. Each section has the following fields:

- \*Document Name:** A text input field.
- Reference Pages:** A text input field.
- Relevance Level:** A dropdown menu with "--Select Relevance--" as the selected option.
- \*Document File Path:** A text input field followed by a "Browse..." button. Below the field is a note: "(Use the Browse button to locate the document)".

At the bottom of the form, there are three buttons: "Save and Close", "Save and Load More Elements", and "Cancel and Return to Document Library". A red asterisk is visible at the bottom left of the form area.

**Note:** Multiple documents can be uploaded and linked to an element from the *Link Document* screen.

3. To complete the Document File Path field, use the **Browse** button to launch the file "look-in" prompt of your local drives.
4. Locate and select the document from the directory.
5. Double click the document name to open the document, or single click the document name to highlight the document.
6. Click the **Open** button located on the file "look-in" prompt.
7. Click the **Save and Close** button. The *Link New Document* window will close and the linked document title will display with the file path on the *Document Linked* screen. (Figure 34)

## Linking an Existing Document

1. Click **Link Existing** on the *Document Linked* screen. (Figure 35)

Figure 35. *Document link* screen

Document Linked to HIP1 Element A

[Instructions](#)

Click [instructions](#) for assistance in linking documents. You may view all documents currently linked to the Survey Tool through the [Document Library](#).

[ [Load Document to the Library](#) ] [ [Link Existing](#) ]

Document Name ↑ (Click to View)	File Path ↑ (Click to Edit)	Date Attached ↑	Stage Attached	Reference Pages	Relevance	Unlink
<a href="#">Policy and Procedure</a>	G:\ISS Documents\Policy and Procedures.doc	01/03/2012	0	1	Primary	<a href="#">Unlink</a>

2. The *Link Document Screen* displays. (Figure 36)

Figure 36. *Link Document* screen

Link Document to HIP1 Element A

[Instructions](#)

Select the document you want to link to this element.

Document Name ↑ (Click to View)	File Path ↑	Reference Pages	Relevance	Link to Element
<a href="#">Attestations</a>	G:\Attestations Redesign\Attestation Redesign.doc		--Select Relevance--	<a href="#">Link to Element</a>
<a href="#">E-Signatures</a>	G:\HEDIS 2012 E-Signature Memo v5.doc		--Select Relevance--	<a href="#">Link to Element</a>
<a href="#">Extract</a>	G:\VA Extract Error.doc		--Select Relevance--	<a href="#">Link to Element</a>
<a href="#">Issues</a>	G:\Issues List.xls		--Select Relevance--	<a href="#">Link to Element</a>
<a href="#">Submission</a>	H:\Information Technology & Information Products\Data Collection Operations\HOQ\HOQ 2011\Documents\DummySubs2010_20100720.xlsx		--Select Relevance--	<a href="#">Link to Element</a>
<a href="#">Testing</a>	H:\Information Technology & Information Products\Data Collection Operations\IDSS\IDSS 2011\DM Reporting Tool\Testing\Testing Findings CP.docx		--Select Relevance--	<a href="#">Link to Element</a>

**Note:** The screen displays all documents that have been uploaded into the Document Library but are not linked to a specific element.

3. Complete all fields:
  - **Reference Pages**
  - **Relevance Level**
4. Click **Link to Element**.
5. Click **OK** when the pop-up message appears. The document is now linked to the element. (Figure 37)



Figure 37. Additional linked document displayed

Document Linked to HIP1 Element A						
						<a href="#">Instructions</a>
Click <a href="#">instructions</a> for assistance in linking documents. You may view all documents currently linked to the Survey Tool through the <a href="#">Document Library</a> .						
[ <a href="#">Load Document to the Library</a> ] [ <a href="#">Link Existing</a> ]						
Document Name ↑ (Click to View)	File Path ↑ (Click to Edit)	Date Attached ↑	Stage Attached ↑	Reference Pages	Relevance	Unlink
<a href="#">Policy and Procedure</a>	<a href="#">G:\SS Documents\Policy and Procedures.doc</a>	01/03/2012	0	1	Primary	<a href="#">Unlink</a>
<a href="#">Submission</a>	<a href="#">H:\Information Technology &amp; Information Products\Data Collection Operations\HOQ\HOQ 2011\Documents\DummySubs2010_20100720.xlsx</a>	11/16/2011	0	6	Primary	<a href="#">Unlink</a>

## Opening a Linked Document

1. Click the **Documents** button, located below the element text.
2. Click the document link on the *Documents Linked* screen.
3. Click the document name to view the document.

## Editing a Linked Document's Name, Reference Information and Document File Path

1. Click the **Documents** button, located below the element text.
2. Click the document's file path on the *Documents Linked* screen. The *Link Document* screen displays. (Figure 38)

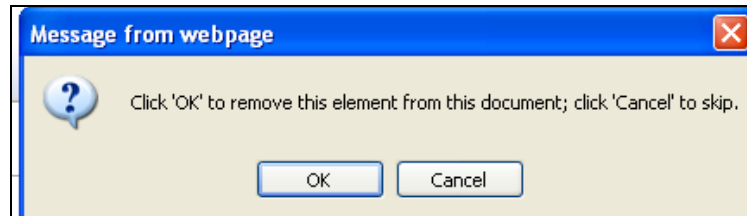
Figure 38. *Link Document* screen

Link Document to Element	
<a href="#">Instructions</a>	
<div> <div>Link to Element</div> <div> Document Name: <input type="text" value="Policy and Procedure"/> </div> <div> Reference Pages: <input type="text" value="1"/> </div> <div> Relevance Level: <input type="text" value="Primary"/> </div> <div> Document File Path: <input type="text" value="G:\SS Documents\Policy and Procedures.doc"/> <input type="button" value="Browse..."/> </div> <div> (Use Browse if you need to edit the file) </div> </div>	
<input type="button" value="Save and Close"/>	<input type="button" value="Cancel and Return to Document Library"/>

4. Change the document name, reference pages or reference level, or update the document file path.
5. Click the **Save and Close** button. The *Document Library* screen will reflect the changes.

## Unlinking a Document

1. Click the **Documents** button, located below the element text.
2. Click **Unlink** on the *Documents Linked* screen. A prompt displays.



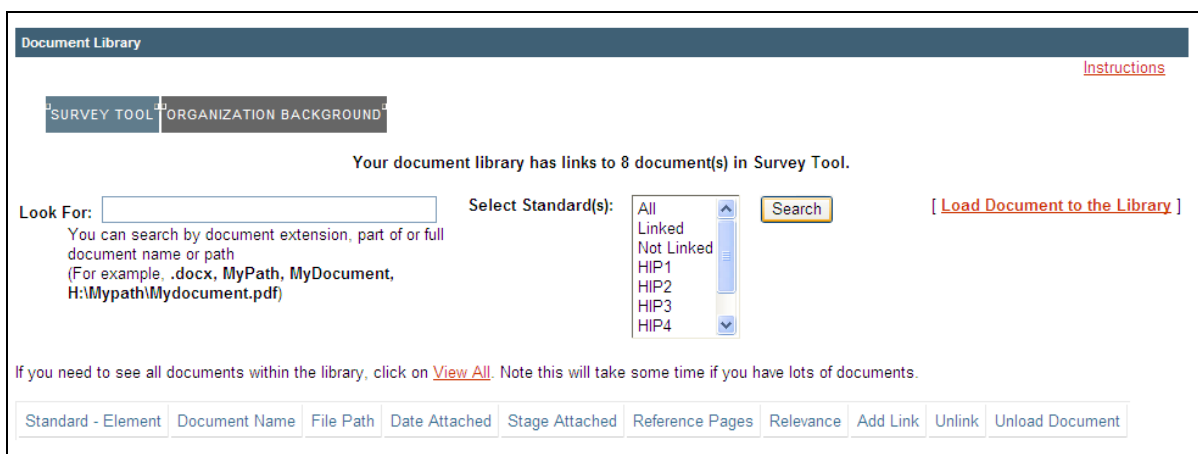
3. Click **OK**. The document will be unlinked from the element but remain in your Document Library. Refer to *Using the Document Library* for more information.

## Using the Document Library

The Document Library provides a central location for viewing, linking, unlinking or editing a document linked to the Survey Tool. A one-step process lets users upload and view documents. Follow these steps to access the Document Library.

1. After you select your publication from the *Welcome* screen and enter the Survey Tool, click **Document Library** on the Top Navigation Bar. The *Document Library* screen opens. (Figure 39)

Figure 39. *Document Library* screen



2. Click **View All** to see all documents in the Document Library. (Figure 40)

Figure 40. **View All** documents

**Document Library** [Instructions](#)

**SURVEY TOOL** **ORGANIZATION BACKGROUND**

Your document library has links to 6 document(s) in Survey Tool.

Look For:  Select Standard(s):  Search [\[ Load Document to the Library \]](#)

You can search by document extension, part of or full document name or path  
(For example, .docx, MyPath, MyDocument, H:\Mypath\Mydocument.pdf)

If you need to see all documents within the library, click on **View All**. Note this will take some time if you have lots of documents.

Standard Element ↑	Document Name (Click to View) ↑	File Path (Click to Edit) ↑	Date Attached ↑	Stage Attached ↑	Reference Pages	Relevance	Add Link	Unlink	Unload Document
Not Linked	<a href="#">Change Control</a>	<a href="#">G:\SS Documents\Change Control Documents.doc</a>	01/05/2012	0			<a href="#">Add Link</a>	<a href="#">Unlink</a>	<a href="#">Unload</a>
HIP1 - B	<a href="#">Extract</a>	<a href="#">G:\VA Extract Error.doc</a>	11/16/2011	0	3	Supporting	<a href="#">Add Link</a>	<a href="#">Unlink</a>	<a href="#">Unload</a>
HIP1 - B	<a href="#">Findings</a>	<a href="#">C:\Documents and Settings\pacheco\Desktop\DL Load Link Text.docx</a>	11/16/2011	0	4	Primary	<a href="#">Add Link</a>	<a href="#">Unlink</a>	<a href="#">Unload</a>

## Sort by Element, Document Name, File Path, Date and Stage Attached

There are five ways to view the Document Library. (Figure 41)

1. **Sort by Standard Element.** Lists only documents linked to each element, by standard order. This view lets users view documents linked to a specific category or subset of categories. View document relevancy by selecting the document during attachment.
2. **Sort by Document Name.** Lists documents in alphabetical order by document name, and lists the elements to which each document is linked. Users can filter by the following document types: .csv, .doc, .gif, .jpg, .mpp, .pdf, .ppt, .rtf, .txt, .vsd, .xls, .xlsx, .docx.
3. **Sort by File Path.** Sort by the full document file path in ascending order; restricted to the license mode of a survey.
4. **Sort by Date Attached.** Displays the date when the document was attached. This screen can be accessed in both license and project modes. (i.e., Document, Standard, File Path, Date Attached) Documents are sorted in descending order, with the most recent document first (regardless of document type).
5. **Sort by Stage Attached.** Displays the stage attached for each document. The page can be accessed in Project Mode (i.e., Document, Standard, File Path, Date Attached). Documents are sorted in descending order, with the most recent document first (regardless of document type).

**Note:** Use the Select Standard(s) box to view documents attached to a specific standard. (Figure 41)

Figure 41: Document Library sorting

The screenshot shows the 'Document Library' interface. At the top, there are tabs for 'SURVEY TOOL' and 'ORGANIZATION BACKGROUND'. Below these, a message states: 'Your document library has links to 6 document(s) in Survey Tool.' There is a search section with a 'Look For:' text box, a 'Select Standard(s):' dropdown menu (showing options: All, Linked, Not Linked, HIP1, HIP2, HIP3, HIP4), a 'Search' button, and a '[ Load Document to the Library ]' link. Below the search section, a note says: 'If you need to see all documents within the library, click on [View All](#). Note this will take some time if you have lots of documents.'

Standard - Element ↑	Document Name (Click to View) ↑	File Path (Click to Edit) ↑	Date Attached ↑	Stage Attached ↑	Reference Pages	Relevance	Add Link	Unlink	Unload Document
Not Linked	<a href="#">Change Control</a>	<a href="#">G:\SS Documents\Change Control Documents.doc</a>	01/05/2012	0			<a href="#">Add Link</a>	<a href="#">Unlink</a>	<a href="#">Unload</a>
HIP1 - A	<a href="#">Policy and Procedure</a>	<a href="#">G:\SS Documents\Policy and Procedures.doc</a>	01/03/2012	0	1	Primary	<a href="#">Add Link</a>	<a href="#">Unlink</a>	<a href="#">Unload</a>
HIP1 - B	<a href="#">Extract</a>	<a href="#">G:\VA Extract Error.doc</a>	11/16/2011	0	3	Supporting	<a href="#">Add Link</a>	<a href="#">Unlink</a>	<a href="#">Unload</a>

## Sort by Standard Element (Default Sorting)

1. Click the **Standard Element** column head on the *Document Library* screen. Uploaded documents are sorted by standard element in ascending order, and grouped by element. (Figure 41)

**Note:** Rows shaded in gray indicate documents attached to different elements.

## Sort by Document Name

1. Click the **Document Name** column head on the *Document Library* screen. Uploaded documents are sorted by document name in ascending order, and grouped by document. (Figure 41)

**Note:** Alternate gray shading is applied for different documents.

## Sort by File Path

1. Click the **File Path** column head on the *Document Library* screen. Uploaded documents are sorted by file path. (Figure 41)

**Note:** Rows shaded in gray indicate documents saved at same paths.

## Sort by Date Attached

1. Click the **Date Attached** column head on the *Document Library* screen. Uploaded documents are sorted by upload date. (Figure 41)

**Note:** Rows shaded in gray are documents uploaded on the same date.

## Sort by Stage Attached

1. Click the **Stage Attached** column head on the *Document Library* screen. Uploaded documents are sorted by upload stage in Project Mode. (Figure 42)

*Note: Rows shaded in gray are documents uploaded at a specific stage.*

**Figure 42: Sort by Stage Attached**

(For example, .docx, MyPath, MyDocument, H:\Mypath\Mydocument.pdf)

PCMH1  
PCMH2  
PCMH3  
PCMH4

If you need to see all documents within the library, click on [View All](#). Note this will take some time if you have lots of documents.

Standard - Element ↓	Document Name ↓ (Click to View)	File Path ↓ (Click to Edit)	Date Attached ↓	Stage Attached ↓	Reference Pages	Relevant
PCMH5 - A	<a href="#">Change Control</a>	G:\ISS Documents\Change Control Documents.doc	01/06/2012	3	1	Primary
PCMH4 - A	<a href="#">Policy and Procedure</a>	G:\ISS Documents\Policy and Procedures.doc	01/06/2012	3	1	Primary
PCMH1 - A	<a href="#">test1</a>	C:\Documents and Settings\who\Desktop\Extracts_ToRun_2011PCMH.xlsx	08/21/2011	1	2	Secondary
Not Linked	<a href="#">test2</a>	C:\Documents and Settings\who\Desktop\2008PCMH4Bob.txt	08/21/2011	1		
Not Linked	<a href="#">test2</a>	C:\Documents and Settings\who\Desktop\Extracts_ToRun_2011PCMH.xlsx	08/21/2011	1		
PCMH1 - A	<a href="#">test2</a>	C:\Documents and Settings\who\Desktop\Extracts_ToRun_2011PCMH.xlsx	08/22/2011	1		
PCMH1 - A	<a href="#">test3</a>	C:\Documents and Settings\who\Desktop\Apress.Pro.WCF.Practical.Microsoft.SOA.Implementation.Jan.2007.pdf	08/22/2011	1		

## Linking Documents to the Library

**Note:** You can load a document directly to the Document Library and link it to individual elements later. After a document is loaded to the Document Library, it is immediately uploaded to NCQA's ISS server.

To upload a document to the Document Library:

1. Click the **Document Library** link on the Top Navigation Bar.
2. Click the **Load Document to the Library** link to open the *Add Document to Document Library* screen. (Figure 43)
3. Complete both fields:
  - **Document Name.** Give the document a unique name.
  - **Document File Path.** Where the document resides on the drive. The Survey Tool will link to this document.
4. To complete the **File Path** field, use the **Browse** button to launch the file "look-in" prompt of your local drives.

5. Click the **Open** button located on the file “look-in” prompt.
6. Click the **Save and Attach More** button to add documents.
7. Click the **Save and Close** button to save your changes and return to the Document Library.

**Figure 43. Add Documents to Document Library screen**

## Linking a Document to an Element

1. Click the **Document Library** link on the Top Navigation Bar.
2. Click the **View All** link to view all documents. Standard Element is the default sort. Scroll down to locate the document you want to link.
3. Click **Add Link** in the document’s table. The *Link Document to Element* screen displays. (Figure 44)
4. Complete these fields:
  - **Reference Pages.**
  - **Relevance Level.**
  - **Please pick an element to link:** Use the drop-down list to select an element.
5. Click the **Save and Close** button. The document is now linked to the element.

**Figure 44. Link Document to Element screen**

## Editing a Linked Document's Name, Reference Information or File Path

1. Click the **Document Library** link on the Top Navigation Bar.
2. Click the **View All** link to view all documents. Standard Element is the default sort. Scroll down the screen to locate the document you want to link.
3. Click the **File Path Link** of the document you want to edit.
4. Update one or all of the following fields:
  - **Document Name.**
  - **Reference Name.**
  - **Reference Level.**
  - **Document File Path.**
5. Click the **Save and Close** button when complete.

**Figure 45.** *Link Document to Element screen*

Link Document to Element

[Instructions](#)

Link to Element

Document Name:

Reference Pages:

Relevance Level:

Document File Path:

(Use Browse if you need to edit the file)

## Unlinking a Document From an Element

**Note:** Unlinking a document from the Document Library *does not* remove the document from the ISS server.

1. Click the **Document Library** link on the Top Navigation Bar.
2. Click **View All** to view all documents. Standard Element is the default sort. Scroll down the screen to locate the document you want to unlink.
3. Click **Unlink** for the selected document.
4. Click **OK** on the confirmation prompt.

## Unloading a Document from the Document Library

**Note:** Unloading a document from the Document Library will completely remove the document from NCQA's ISS server. The Unload link does not appear if the document is linked to an element.

1. Click the Document Library link on the Top Navigation Bar
2. Click View All to view all documents. Standard Element is the default sort. Scroll down the screen to locate the document you want to unload.
3. Click Unload for the selected document
4. Click OK on the confirmation prompt.

## Upload Documents

**Note:** This section only applies to documents that were linked to ISS before March 26, 2012, but were not uploaded to NCQA's ISS server.

After a document is loaded, it is automatically uploaded to NCQA's ISS server. NCQA does not have access to uploaded documents until the Survey Tool is submitted.

**Caution:** Documents that were attached but not uploaded before March 26, 2012, will appear in the Document Library but cannot be viewed until they are uploaded to NCQA's ISS server.

To upload documents linked to the Survey Tool:

1. From the Survey Tool menu, click UPLOAD DOCUMENTS on the Top Menu Bar to open the *Document Verification and Upload* screen. (Figure 46) The screen shows all documents linked to your Survey Tool by document name, in alphabetical order. If your Survey Tool has an Organization Background section, documents for that section are on the lower part of the screen.



**Figure 46. Document Verification and Upload screen**

Verify and Upload Documents

Instructions

On this screen you will verify and upload copies of documents to the ISS Server. Click [Instructions](#) for instructions and assistance.

**Upload Reminder**

Please remember to upload completed documents from your document library to the ISS periodically. Uploading completed documents periodically will help avoid any issues with potentially lengthy, last minute uploads as your submission deadline approaches. Moreover, uploading documents periodically will give you an opportunity to familiarize yourself with the process.

Please see the [instructions](#) for more information.

Uploaded documents remain *inaccessible* to surveyors until you have submitted your Survey Tool.

Supporting Documents from the Survey Tool Document Library

Document Name	Document File Path	Referenced in Elements	Verify Document File Path	Upload Complete	Remove Document
Change Control	G:\ISS Documents\Change Control Documents.doc	PCMH1 - A	<input type="text"/> <input type="button" value="Browse"/>	No	
Policy and Procedures	G:\ISS Documents\Policy and Procedures.doc	None	<input type="text"/> <input type="button" value="Browse"/>	No	

- Complete the **Verify Document File Path** field for all documents to be uploaded. There are three ways to verify the document file path and link a document:
  - Type the full name of the document, including the file path, in the box in the **Verify Document File Path** column.
  - Use the mouse to highlight the document file path in the **Document File Path** column and copy and paste it into the **Verify Document File Path** column. *Make sure the file path is correct.*
  - Click the **Browse** button in the **Verify Document File Path** column, locate the document on the drive or server and double click on it to open it, or single click on it to highlight it.
- Repeat step 2 until all documents that you want to upload in the current batch are verified and listed in the **Verify Document File Path** column.
- Click the **Upload Documents** button to upload the verified batch of files.
- A *Document Upload* indicator screen displays. When a document has been successfully uploaded, the upload indicator closes and the screen refreshes. **Yes** displays in the **Upload Complete** column and the file path no longer appears in the **Verify Document Path File** column. When you receive confirmation of the successful upload of all files in a batch, you can continue with another batch.

**Note:** If you have trouble uploading a document from a network location, copy the document to a local (hard) drive and try uploading it from there. You do not need to change the document file path or element references if you did not rename the document when you move it.

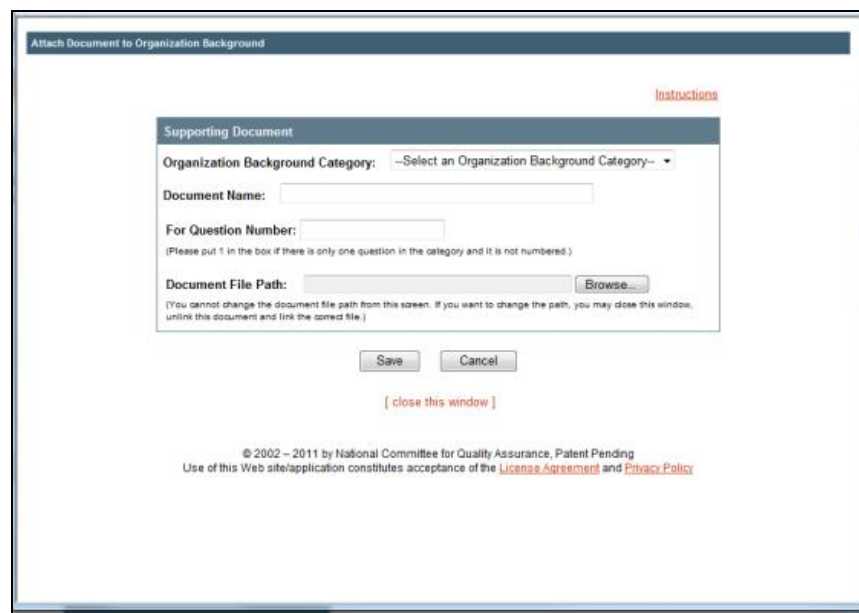
After a document is confirmed as successfully uploaded, there is no need to verify and upload it again, even if you choose to submit the Survey Tool at a later date.

# Loading Documents to the Organization Background Section

To link a downloaded worksheet or other reference material to the *Organization Background* section:

1. Click the **Load Document to the Library** link.
2. Complete all fields:
  - **Organization Background Category.**
  - **Document name.** Give the document a unique name.
  - **For Question Number.** The location of relevant information in the document (e.g., page 2, paragraph 3).
  - **Document file path.** Where the document resides on the drive. The Survey Tool will link to this document.
3. To complete the **Document File Path** field, use the **Browse** button to launch the file “look-in” prompt.
4. Locate and select the document.
5. Double click the document name to open it, or single click the document name to highlight it.
6. Click the **Open** button located on the file “look-in” prompt. Click the **Save and Upload** button.
5. Documents attached to each tab of the *Organization Background* section are listed at the bottom of the tab screen and are available in the Document Library.

**Figure 49. Example *Organization Background* form**



The screenshot shows a web form titled "Attach Document to Organization Background". At the top right is a link for "Instructions". The form is titled "Supporting Document" and contains the following fields and controls:

- Organization Background Category:** A dropdown menu with the text "--Select an Organization Background Category--".
- Document Name:** A text input field.
- For Question Number:** A text input field with a note below it: "(Please put 1 in the box if there is only one question in the category and it is not numbered.)"
- Document File Path:** A text input field with a "Browse..." button to its right. A note below this field states: "(You cannot change the document file path from this screen. If you want to change the path, you may close this window, unlink this document and link the correct file.)"

At the bottom of the form are "Save" and "Cancel" buttons, and a link that says "[ close this window ]". At the very bottom, there is a copyright notice: "© 2002 – 2011 by National Committee for Quality Assurance, Patent Pending" and a statement: "Use of this Web site/application constitutes acceptance of the [License Agreement](#) and [Privacy Policy](#)".

# **PART V: RESULTS**

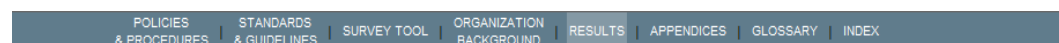
## ACCESSING YOUR RESULTS

Summary and detailed numeric results, results on must-pass elements, and recommendations are provided in the *Results* section of the **Survey Tool**. Numeric results are available overall and at the category, standard and element levels, and are based on standard and element points and on element scores resulting from your data input. To access your results:

1. Once you have selected your publication from the *Welcome* screen, click the **Results** link on the Blue Navigation Bar.

**Note:** The *Results Disclaimer* screen may take a few seconds to display since the system is aggregating Survey Tool data. Please be patient.

2. Read the disclaimer carefully (Figure 50).
3. Click **I Agree** to view the *Results Index* screen.
4. Click **I Do Not Agree** to return to the previous screen.



**Figure 50.**  
**Results**  
**Disclaimer**

### 2012 Standards and Guidelines for the Accreditation of Health Plans

Reports and numeric results generated by the Survey Tool are preliminary and do not constitute a final score or accreditation from NCQA. NCQA's Review Oversight Committee makes the final accreditation status decision. NCQA incorporates the decision, as well as any changes recommended by the Review Oversight Committee, to generate the final report with numeric results for the organization. NCQA reports and numeric results are not final until the Review Oversight Committee evaluates them.

You may only use the reports and numeric results from the readiness evaluation for internal business purposes to examine, review and otherwise analyze your business operations, and may not use, disclose, represent or otherwise communicate these reports or numeric results to any third party for any other purpose. The organization may not represent that it has achieved any endorsement or approval, is in compliance with any standards or is NCQA Accredited based on reports or numeric results without a final decision.

The following activities are prohibited in connection with the Survey Tool:

- no individual or entity may purchase the Survey Tool or use it, regardless of the source, to evaluate another organization against NCQA standards. This prohibition does not apply to individuals or entities that are assisting the organization with its readiness evaluation and preparation for its own survey.
- the organization may not use the Survey Tool to evaluate another organization against NCQA standards except as part of its own internal preparation for an NCQA Survey, including specifically evaluating a delegate's performance in order to conduct oversight as required by NCQA standards.
- the organization may not allow a third party to use the Survey Tool it has purchased to evaluate another organization against NCQA standards.

I have read and understand the above statement.

**I Agree**

**I Do Not Agree**

## Results Index Screen

Some NCQA Accreditation, Certification and Recognition programs have multiple Evaluation Options and Units of Assessment. See the *Setting Up the Survey Tool* section of this manual for more information. This screen displays a list of the Units of Assessment and Evaluation Options for which you may view detailed numerical results. To view your results for a specific Evaluation Option or Unit of Assessment:

1. Click the results link for the option you wish to review.
2. Click on the tabs to navigate between the following results screens.
  - *Status Screen*
  - *Summarized and Detailed Results Screens*
  - *Performance Measures Screen*
  - *Must Pass Results Screen*
  - *Recommendations Screen*

**Figure 51. Results Index screen**

2011 Health Plan Accreditation				
Select an evaluation option for which to view results.				
Name: Capital District Physicians' Health Plan, Inc.				
Evaluation Option: Health Plan				
Standards Year: 2011				
Product Line/Product	Overall Score	Scored By	Status	Valid Dates
<a href="#">Commercial HMO</a> (Performance Measures Year: 2010)	94.65 out of 100.00	Standards/HEDIS/CAHPS	Commendable	7/1/2011 - 7/1/2014
<a href="#">Medicaid HMO</a> (Performance Measures Year: 2010)	92.04 out of 100.00	Standards/HEDIS/CAHPS	Denied	7/1/2011 - 7/1/2014
<a href="#">Medicare HMO</a> (Performance Measures Year: 2010)	96.20 out of 100.00	Standards/HEDIS/CAHPS	Denied	7/1/2011 - 7/1/2014

## Results Status Screen

The *Results Status* screen (Figure 52) displays the following:

- **Organization Name** (upon commencement of the NCQA Survey)
- **Status** (upon completion of the NCQA Survey)
- **Standards Year**
- **Valid Dates** (upon completion of the NCQA Survey)
- **Overall Score (Only displays the elements included in the EP)**
- **Unit of Assessment** evaluated (if applicable)
- NCQA seal (upon completion of an NCQA Survey and award of Accreditation, Certification or Recognition).

**Figure 52.**  
**Results Status screen**

[Return to Results Index](#)

STATUS SUMMARIZED & DETAILED RESULTS PERFORMANCE MEASURES MUST PASS RESULTS RECOMMENDATIONS HISTORY

### 2011 Health Plan Accreditation Commercial HMO

This section provides summary and detailed results and recommendations. Overall scoring results are available and at the category, Standard and element levels.

Based on information compiled during the recent review, We award the status listed below. Status descriptions can be found by clicking the Policies and Procedures tab.

Click on the Details link next to the status to view more details about the calculation of the Adjusted Score.

#### General Information

**Name:** Capital District Physicians' Health Plan, Inc.

**Status:** Commendable [Details](#)

**Scored By:** Standards/HEDIS/CAHPS

**Valid Dates:** 7/1/2011 - 7/1/2014

**Standards Year:** 2011 **Score:** 51.63

Use the heading tabs to navigate your results

## Summarized and Detailed Results

The *Summarized & Detailed Results* screens display your numeric results, including the Points Possible and your Points Received, at the category (Figure 53), standard (Figure 54) and element (Figure 55) levels.

A bar graph representation of the score (percentage of points received) is also provided on the *Results by Category* screen (Figure 53).

While on the *Results by Element* screen (Figure 55), you may go directly to the *Standard and Element* screen to view data entry detail for an element by clicking on the **View Survey Tool** link. To return to the *Results by Element* screen, use the "Back" button on your browser. If you change any data on the *Standard and Element* screen, make sure you recalculate your numeric results by clicking the **Recalculate** button on the *Results by Element* screen.

See the *Printing* section of this manual for instructions on how to print a copy of your numeric results.

**Caution:** Numeric results do not automatically recalculate when you use the Back button on your browser to return to the *Results by Element* screen. You must click the **Recalculate** button at the top of the screen to recalculate your results.

## Results by Category

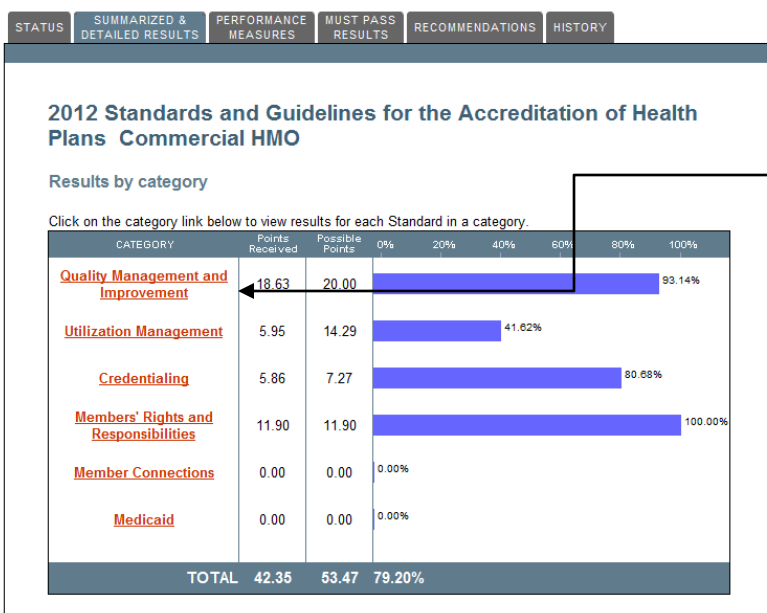


Figure 53. Results by Category

Click on category link to see results by standard detail.

## Results by Standard

Figure 54. Results by Standard screen

[Return to Results Index](#)

STATUS SUMMARIZED & DETAILED RESULTS PERFORMANCE MEASURES MUST PASS RESULTS RECOMMENDATIONS HISTORY

### 2012 Standards and Guidelines for the Accreditation of Health Plans Commercial HMO

[Return to category results](#)

#### Results by Standard

Note: The Possible Points below reflect any points reallocated as a result of any Not Applicable Standards or Elements (including delegation for example). Any Elements that are incomplete are scored as 0.00 points.

Click on the category link below to view results for each element in the category

[Quality Management and Improvement](#)

POINTS RECEIVED	POSSIBLE POINTS
0.82	0.82
0.82	0.82
1.37	1.48

Click on the category link to see results by element detail

QI1: Program Structure  
QI2: Program Operations  
QI3: Health Services Contracting

## Results by Element

Figure 55. Results by Element screen

STATUS SUMMARIZED & DETAILED RESULTS PERFORMANCE MEASURES MUST PASS RESULTS RECOMMENDATIONS HISTORY

### 2012 Standards and Guidelines for the Accreditation of Health Plans Commercial HMO

[Return to category results](#) | [Return to Standard results](#)

Note: The Possible Points below reflect any points reallocated as a result of any Not Applicable Standards or Elements (including delegation for example). Any Elements that are incomplete are scored as 0.00 points.

To view the Survey Tool, click on the link to the right of the Standard you wish to view.

To return directly to this page from the Survey Tool, use the "Back" button on your browser.

If you change any data in the Survey Tool when going back and forth, you may recalculate your numeric results by clicking the "Recalculate" button below:

[Recalculate](#)

[View Survey Tool](#)

**QI1: Program Structure**

POINTS RECEIVED	POSSIBLE POINTS	PERCENTAGE SCORES
NA	NA	NA
0.82	0.82	100.00

**QI2: Program Operations**

POINTS RECEIVED	POSSIBLE POINTS	PERCENTAGE SCORES
0.82	0.82	100.00
NA	NA	NA

Click here to view and change data entry detail on the Standard and Element screen

Remember to recalculate your results after making data entry changes



## Must-Pass Results

The *Must-Pass Results* screen (Figure 56) displays your results on all Must Pass elements. Must-pass elements denote specific levels of performance that must be met to achieve accreditation, certification or recognition. For example, in the MCO Accreditation Program, you *must* score at least 20% on Element C of Standard UM4 or you might not achieve accreditation.

The **Survey Tool** highlights any elements where your score is below the Must Pass Level.

**Caution:** Not all NCQA Accreditation, Certification or Recognition programs have must-pass elements; however, this tab is always present in the *Results* section of the Survey Tool. Review the *Policies and Procedures* for details about whether your program includes must-pass elements.

Figure 56. *Must-Pass Results* screen

STATUS   SUMMARIZED & DETAILED RESULTS   PERFORMANCE MEASURES   MUST PASS RESULTS   RECOMMENDATIONS   HISTORY						
<p><b>2012 Standards and Guidelines for the Accreditation of Health Plans Commercial HMO</b></p> <p><a href="#">Return to category results</a></p> <p>To achieve a specific status, organizations must achieve a minimum score on certain "Must Pass" elements. The results below detail your performance on these elements.</p> <p>An organization's status can be denied if the organization does not achieve the minimum required score on the "Must Pass" elements outlined below. Please note elements in which the "Must Pass" minimum score <u>not been met</u> are highlighted in yellow.</p>						
Standard	Element	Your Score	Minimum Score Required	Unit Of Assessment Affected	Maximum Status if Score not Met	
UM4	Element C	NA	20.00%	Commercial HMO	Denied	Yes
QI3	Element B	100.00%	20.00%	Commercial HMO	Denied	
UM9	Element D	NA	20.00%	Commercial HMO	Denied	Yes
UM7	Element C	NA	20.00%	Commercial HMO	Denied	Yes

## Recommendations

The *Recommendations* screen (Figure 57) includes NCQA's recommendations for improvement for specific elements if you score below a threshold defined in the *Policies and Procedures*. Recommendations are intended to help you identify how to improve your performance.

**Caution:** Not all NCQA Accreditation, Certification or Recognition programs provide recommendations; however, this tab is always present in the *Results* section of the Survey Tool. Review the *Policies and Procedures* for details about whether your program provides recommendations.

Figure 57. *Recommendations* screen

STATUS	SUMMARIZED & DETAILED RESULTS	PERFORMANCE MEASURES	MUST PASS RESULTS	RECOMMENDATIONS	HISTORY
<p>2012 Standards and Guidelines for the Accreditation of Health Plans Commercial HMO</p> <p><a href="#">Return to category results</a></p> <p>This section provides recommendations for improvement for specific elements.</p> <p><b>Recommendations</b></p>					
Element	Recommendation	Product Line Affected	<p>Recommendations for your organization will be listed here</p>		
QI7I	Measure the effectiveness of case management program using three measures. For each measure: - identify a relevant process or outcome (QI 7I.1), - use valid methods that provide quantitative results (QI 7I.2), - set a performance goal (QI 7I.3), - have clearly identified measure specifications (QI 7I.4), - analyze results (QI 7I.5), - identify opportunities for improvement (QI 7I.6), - develop a plan for intervention and remeasurement (QI 7I.7).	All			
QI7J	Act on the results of measurement and analysis of case management effectiveness by: - implementing at least one intervention to improve performance (QI 7J.1), - remeasuring to determine performance (QI 7J.2).	All			

# **PART VI: PRINTING**

# PRINT SCREEN

The *Print* screen provides links for printing your publications. If you purchased the **Survey Tool**, it also includes links to print numeric results and completed versions of the **Survey Tool** at various stages of the survey process.

To access the *Print* screen:

1. On the *Welcome* screen, click on a hyperlinked **Survey Tool** or **Standards and Guidelines** name.
2. Click the **Print** link on the Top Navigation Bar.
3. The *Print* screen (Figure 58) will open and display three sections:
  - Printer Friendly Completed Survey Tool (**Available only in the Survey Tool**)
  - Numeric Results (**Available only in the Survey Tool**)
  - Printable Versions of Publications

**Figure 58. Survey Tool *Print* screen**

## Printer Friendly Completed Survey Tool

This function produces Web pages formatted to print complete data from one page. Due to variations in browsers and user-defined browser settings, there may be variations in print format between Netscape and Internet Explorer. You may print data from the Survey Tool for any stage of survey to which you have access. Please see the Policies and Procedures for details on survey stages.

To print data from the Survey Tool stage other than the current one, select the Survey Tool stage from the choices below. After you have successfully changed stages, use the print links below.

## Stage Selector

- [Organization Readiness Evaluation](#)
- [Off-Site Survey](#) - currently displayed

[Entire Survey Tool \(all categories in one document\)](#)  
[Quality Management and Improvement](#)  
[Utilization Management](#)  
[Credentialing](#)  
[Members' Rights and Responsibilities](#)  
[Member Connections](#)  
[Medicaid](#)  
[Medicare Advantage](#)

## Numeric Results

Click on the link below to open a printer-friendly version of the numeric results.

[Print Numeric Results](#)  
[Print Numeric Results for PDF Writer](#) - (Must have Adobe Professional. Available on Citrix)

## Printer-Friendly Completed Survey Tool

(Available only in the Survey Tool)

The printer-friendly completed **Survey Tool** displays all the standards, elements and data you have entered in the **Survey Tool** on a single Web page for printing.

To print a printer-friendly completed **Survey Tool**:

1. Click a document link under the *Printer Friendly Completed Survey Tool* section of the *Print* screen.
2. Click **I Agree** on the *Disclaimer* screen to open the printable page. Click **I Do Not Agree** to cancel. Click **OK** on the prompt message to return to the Disclaimer, or click **Cancel** to cancel the print request and return to the *Index* screen.
3. When the *Printer Friendly Completed Survey Tool* screen has loaded, click the **Click Here to Print** button or click the Print icon on your Web browser.
4. Click the ☒ icon on your Browser to close this screen and return to the *Print* screen

**To print a completed Survey Tool with data from a Survey Tool stage other than the current one:**

1. On the *Print* screen, select the **Survey Tool** stage from the listed choices.
2. The *Print* screen will refresh and the stage you selected will be listed as “Currently Displayed.”
3. Follow Steps 1 through 4 above.

## Printing Numeric Results


(Available only in the Survey Tool)

This feature provides printer-friendly pages of the numeric results of all standards and elements.

To print Numeric Results:

1. Click the **Print Numeric Results** link.
2. Click **I Agree** on the *Disclaimer* screen to open the printable page. Click **I Do Not Agree** to cancel. Click **OK** on the prompt message to return to the Disclaimer, or click **Cancel** to cancel the print request and return to the *Index* screen.
3. Click the link for the Evaluation Option for which you want to print scoring data.

**Note:** Some NCQA Evaluation Options present scoring results for individual Units of Assessment. In this case, you have the option to select the link to view results for a specific Unit of Assessment.

4. When the *Printer Friendly Results* screen is finished loading, click the **Click Here to Print** button *or* click the Print icon on your Web browser.
5. Click the  icon on your toolbar to close this screen and return to the *Print* screen.

**To print Numeric Results with data from a Survey Tool stage other than the current one:**

1. On the *Print* screen, select the **Survey Tool** stage from the listed choices.
2. The *Print* screen will refresh and the stage you selected will be listed as “Currently Displayed.”
3. Follow Steps 1 through 6 above.

## Printable Publications

This section provides a PDF version of the **Standards and Guidelines** or **Survey Tool** for reference. They do not include any data entered into the **Survey Tool**. To print a publication:

1. Click a document link under the *Printable Versions of Publications* section of the *Print* screen.
2. When the publication screen has loaded, click the Print icon on your Web browser or on the Adobe Acrobat Toolbar.

**Note:** You must have Adobe Acrobat Reader to be able to view and print publications in Adobe® Acrobat® PDF format. If you do not have this program, download it free of charge from [www.adobe.com](http://www.adobe.com).

**Publications in PDF format will be opened automatically by Adobe Acrobat Reader. Use the Adobe Acrobat tool bar (not your Web browser tool bar) to print, save, navigate or access other functions of a PDF-format document.**

3. Click the  icon to close this screen and return to the *Print* screen.

# **PART VII: SUBMITTING THE SURVEY TOOL FOR NCQA SURVEY**

---

## BEFORE YOU SUBMIT YOUR SURVEY TOOL

There are several steps you need to complete before submitting a **Survey Tool** for survey, including:

### 1. Submit Application & Fee

To formally begin the NCQA Accreditation, Certification or Recognition survey process you must first submit an application for survey and application fee to NCQA. Applications can be requested from [NCQA Customer Support](#) at 888-275-7585.

**Caution:** To submit the Survey Tool to NCQA for survey, you must have a completed application on file with NCQA that includes the Survey Tool license number and a scheduled survey date. See the *Policies and Procedures* for complete details on the application and survey process.

### 2. Set Survey Start/Submit Date

Once your application is received, an NCQA representative will work with you to set a mutually agreeable survey start-date for your organization. The survey start-date is the date you submit the completed **Survey Tool** and all supporting documentation to NCQA for survey.

### 3. Set-up Survey Tool

You must set up your **Survey Tool** before using it to conduct a readiness evaluation and before submitting it to NCQA for survey. When you submit your **Survey Tool** to NCQA for survey, your final Units of Assessment and Evaluation Options selections must match those in your application for accreditation, certification or recognition. See the *Setting up the Survey Tool* section of this manual for more information on how to select Units of Assessment and Evaluation Options for NCQA survey, upon submission of Survey Tool.



## 4. Complete Survey Tool, Including Linking Supporting Documentation

Use the **Survey Tool** to conduct your readiness evaluation. During your readiness evaluation you will link supporting documents by file path to specific elements in the **Survey Tool**. The file paths referenced in the **Survey Tool** at this point are for your organization's internal identification purposes only. You may update reference information or revise documents as needed, including modifying, moving or renaming supporting documents.

## 5. SUBMITTING YOUR SURVEY TOOL

When you have uploaded all appropriate documents, completed the **Survey Tool** to your satisfaction and are ready to submit your **Survey Tool** for NCQA survey:

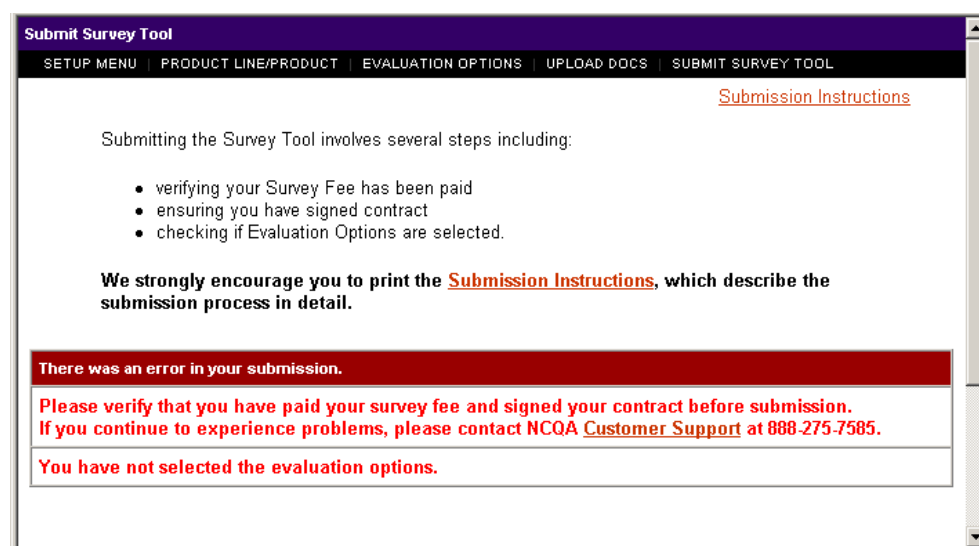
1. Click the **Submit Survey Tool** link on the Top Menu Bar to open the Submit Survey Tool screen (Figures 59-60).

The system will verify that the required conditions are completed and correct:

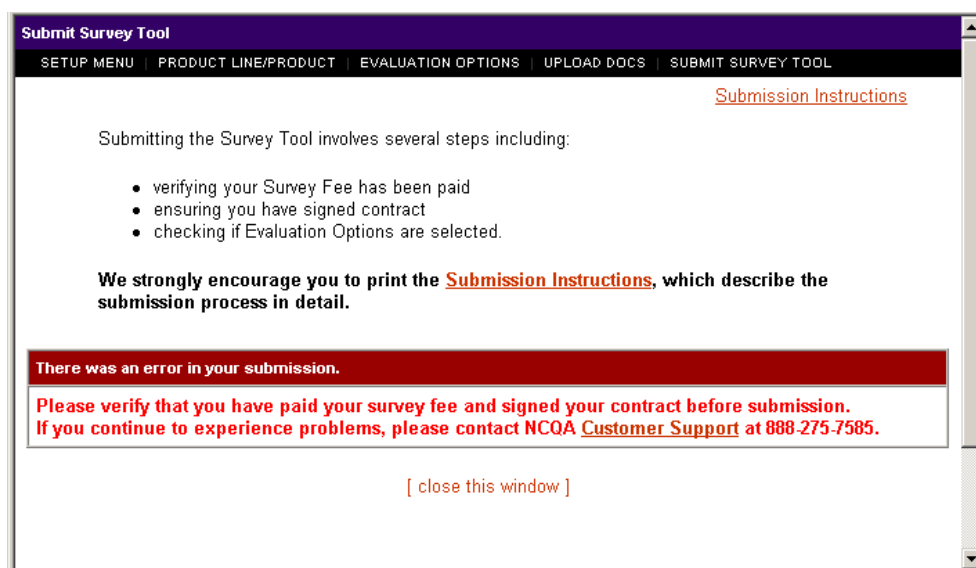
- NCQA Survey Fee has been paid
- There is a signed contract on file w/NCQA
- Evaluation options are selected in the Setup Survey Tool of the ISS.

Warning messages will be displayed if any of the required conditions is not met.

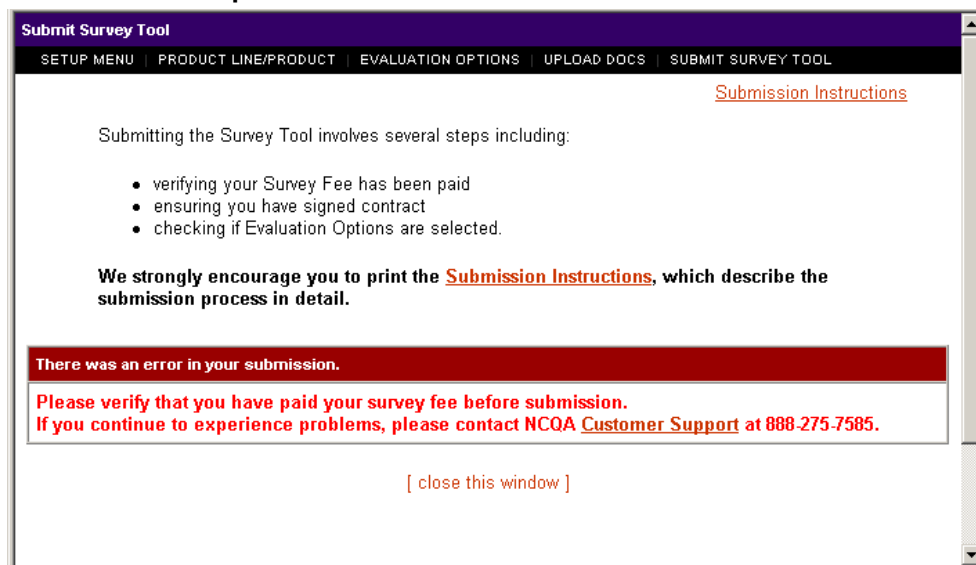
**Figure 59a. Submit Survey Tool**  
**All required conditions have not been met**



**Figure 59b. Submit Survey Tool**  
**Fee has not been paid, Date of Contract has not been signed**



**Figure 59c. Submit Survey Tool**  
**Fee has not been paid**



**Note:** If a product doesn't require Survey Fee, then the window below opens directly after the clicking on the Submit Survey Tool button.

**Figure 60. Submit Survey Tool**  
**This window opens when all conditions required for submission are correct**

Submitting the Survey Tool involves several steps including:

- verifying your Survey Tool settings against your application for survey
- ensuring you have uploaded all documents you intend to submit for survey
- checking if your Survey Tool is complete.

We strongly encourage you to print the [Submission Instructions](#), which describe the submission process in detail.

Survey Tool Setting and Survey Application Summary	
Your selections must match those for which you have applied for survey. You may use the menu above to update your selections (if applicable).	
You have selected the following evaluation options:	<ul style="list-style-type: none"> <li>• MCO Accreditation [Not Completed]</li> </ul>
You have selected the following Product Lines/Products to submit for survey:	<ul style="list-style-type: none"> <li>• Commercial HMO/POS Combined [Completed]</li> <li>• Medicare HMO [Completed]</li> </ul>

**Supporting Documents**

**Number of supporting documents referenced in the Document Library: 4**

You have not successfully uploaded all the documents in the Document Library. Please verify that you have uploaded all the documents you intend to submit for survey.

To check on the status of your documents, please use the [Upload Documents](#) page.

**Please note: Your Survey Tool does not have all elements completed.**

For most surveys, all elements should be completed before submission. Please contact your survey coordinator if you are unsure if you should complete all elements.

You can submit the Survey Tool with some elements incomplete, but once submitted, you will not be able to update or change any data.

To check/view a list of incomplete elements for the evaluation option(s) you have selected, click [Completeness Check](#).

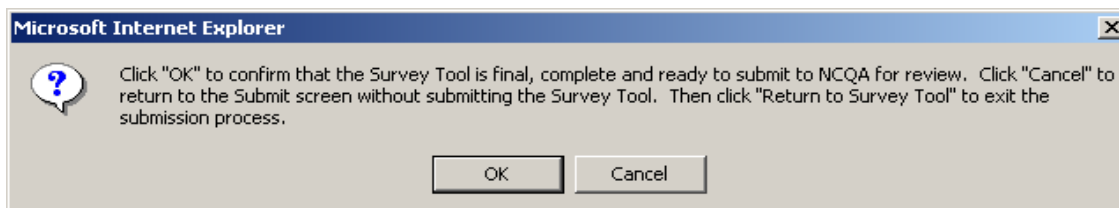
To return to the Survey Tool without submitting, click on "close this window".

To complete your submission process, click on the "Submit Final Survey Tool" button.

[Submit Final Survey Tool](#)

2. This screen verifies whether or not your **Survey Tool** is complete. If your **Survey Tool** is verified as incomplete and you proceed with submitting it to NCQA, you will receive a message warning you that the **Survey Tool** is incomplete and prompting you to use the Completeness Check feature to verify that you are ready to submit to NCQA. Please verify all Survey Tool information before you submit to NCQA. See the *Utilities* section of this manual for more information on the Completeness Check feature.
3. This screen also displays your Unit of Assessment and Evaluation Option selections for NCQA survey, if applicable. Use the screen's menu options to change your Units of Assessment and/or Evaluation Option selections if they are not appropriate for submitting your **Survey Tool**. See the *Setting Up the Survey Tool* section of this manual for information on how to select Unit of Assessment and Evaluation Options for NCQA survey.
4. Click on the **Submit Final Survey Tool** button.

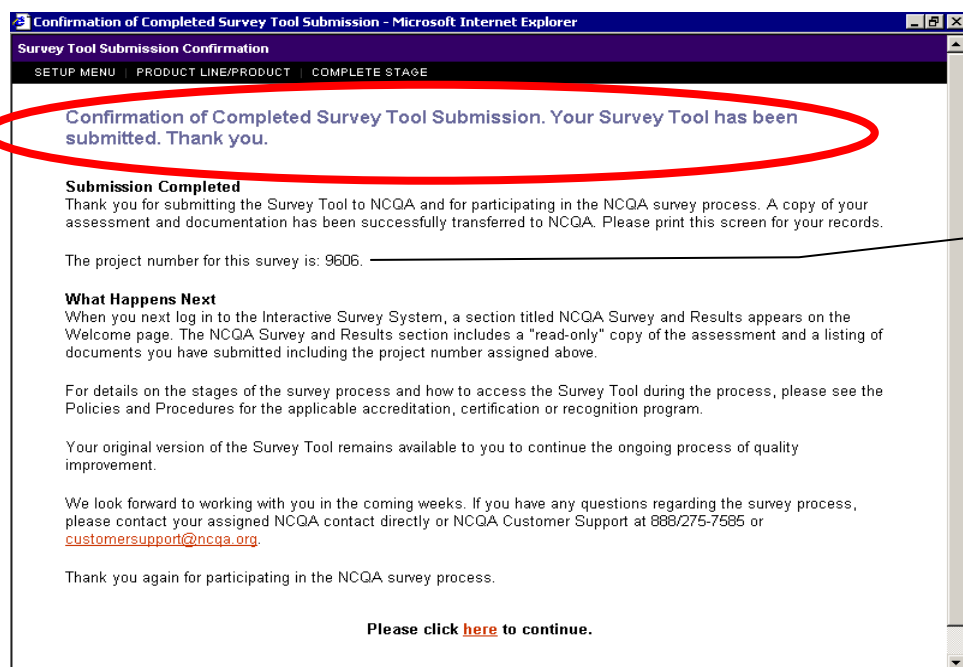
5. You will be prompted to confirm that you are ready to submit your final **Survey Tool** as follows:



6. Click **OK** to finalize submission of your **Survey Tool**. Click **Cancel** to end the submission process and return to the **Survey Tool**.

**Caution:** This is the last chance you have to cancel the submission of your Survey Tool to NCQA.

7. When the submission of your **Survey Tool** is complete, the *Survey Tool Submission Confirmation* screen will display (Figure 61).

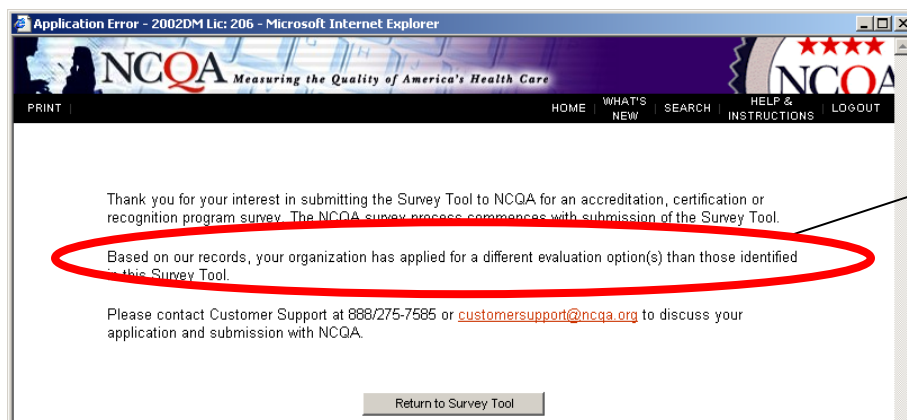


**Figure 61. Survey Tool Submission Confirmation screen**

**A project number for the survey is assigned**

**Caution:** If the Unit of Assessment or Evaluation Options on your Survey Tool do not match the options listed on your application for accreditation, certification or recognition, you will not be able to submit the Survey Tool.

**Figure 62 shows an example of the error message you will see if there is a discrepancy between your application and your Survey Tool.**



**Figure 62. Example Submission Error**

**Evaluation options selected in the Survey Tool do not match application**

## AFTER SUBMITTING THE SURVEY TOOL

**Caution:** After you submit a Survey Tool to NCQA for survey, you may only access the copy sent to NCQA in “read-only” mode. You may not make any edits or changes to it.

The next time you log in to the **Survey Tool**, a section titled *NCQA Survey and Results* will display on the *Welcome* screen (Figure 63). This section contains a copy of the submitted **Survey Tool**, and includes your organization ID and survey project number and information on what stage of the survey process NCQA is working and the start date. See the *Policies and Procedures* for details about the survey process and the stages through which the **Survey Tool** progresses.

You will also retain a copy of the **Survey Tool** under your license for your continued use after submission.

Figure 63. Welcome screen with NCQA Survey & Results section

The screenshot shows the NCQA website's welcome page. At the top, there are navigation links: HOME, WHAT'S NEW, and HELP. The main content area is divided into several sections. On the left, under 'Publications & Licenses', it lists three publications: '2013 Standards and Guidelines for the Accreditation of Health Plans comp for CPCustSpt' (License 18177), '2012 Standards and Guidelines for the Accreditation of Health Plans comp for CPCustSpt' (License 18138), and '2011 Health Plan Accreditation comp for CPCustSpt' (License 18149). Below this, under 'PHQ', it lists '2013 Physician and Hospital Quality comp for CPCustSpt' (License 18259). Under 'SNPs', it lists '2012 SNP Structure & Process 2012 comp for CPCustSpt' (License 18145). On the right, there is a 'Welcome to NCQA's Interactive Survey System' message, a photo of Margaret E. O'Kane, President of NCQA, and a contact email: [customersupport@ncqa.org](mailto:customersupport@ncqa.org). At the bottom, there is a 'Surveys & Results' section with the text 'We have conducted or are conducting the following surveys:'.

## **PART VIII: ISS ADMINISTRATIVE FUNCTIONS**

## ADMINISTRATIVE FUNCTIONS OVERVIEW

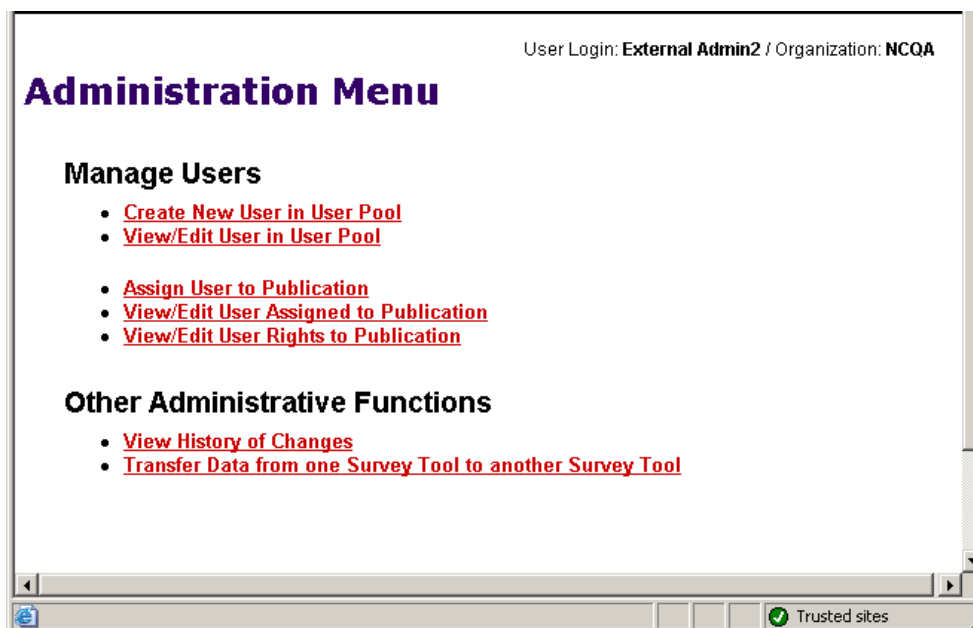
All ISS administrative functions can be performed through the *Administration* section of the *Welcome* screen. Click on the **Administrative Functions** link to access the *Administration Menu* screen (Figure 64).

Using the *Administration Menu* screen an organization Administrator can manage user access to the ISS specific Web publications and view a history of user changes to the **Survey Tool**.

Everyone in an organization may be added to the user pool for ISS; however, only users assigned access to specific **Standards and Guidelines** or **Survey Tool** publications may access ISS Web publications. Therefore, giving a user access to ISS Web publications is a two-step process. First, the user must be added to the ISS user pool. Second, the user must be assigned access to specific **Standards and Guidelines** and/or **Survey Tool** publications.

**Caution:** There must always be at least one user in your organization who has Administrator rights. Only an Administrator can perform the administrative functions described in this manual.

Figure 64.  
Administration Menu





---

## CREATE NEW USER IN USER POOL

1. Log in as an Administrator.
2. On the *Welcome* screen, click the **Administrative Functions** link to open the *Administration Menu* screen (Figure 64).
5. Click on **Create New User in User Pool** link to open the **Create New User** screen (Figure 65).

**Create New User**

To create a new user, complete the following fields and click on the "Save User" button. You may create as many users in your organization who may need to access ISS. However, only those who are actively assigned to a specific publication will be able to access it.

<b>User ID:</b>	There is no restriction on the length or mix of alpha/numeric characters of the user id. Once this screen is completed and saved, you will not be able to change it.	<b>Assign a new user a unique User ID and Password</b>
<b>Password:</b>	Passwords must be at least 8 characters in length and must also have 3 of the 4 following characteristics: <ul style="list-style-type: none"> <li>• At least one uppercase character.</li> <li>• At least one lowercase character.</li> <li>• At least one numerical character.</li> <li>• At least one symbol (i.e. #, \$, &amp;, etc.)</li> </ul>	<b>System notification and Password reminders are sent to the user's email</b>
<b>First Name:</b>	Enter the user's first name. This can be edited using the Update User screen.	<b>Access to the ISS is given to a user for a specific period of time</b>
<b>Last Name:</b>	Enter the user's last name. This can be edited using the Update User screen.	
<b>Organization:</b>	This will be automatically completed unless you have administrative rights for more than one organization. In that case, select the organization for this user. <b>NCQA</b>	
<b>Email:</b>	Enter the user's email address. This can be edited using the Update User screen.	<b>You can Save User &amp; Add to Publication clicking on this button or Save User and assign to a publication using Assign User to Publication option on the Administration Menu page</b>
<b>Valid From:</b>	This field defaults to the date the license is created. This can be modified if you want to delay access and can be edited in the Update User screen. 11/14/2006	
<b>Valid To:</b>	This field defaults to a 5-year period. This can be changed if you want this user's privileges to expire earlier. It can also be extended, even beyond the valid time frame for the publication. This can be edited in the Update User screen. 11/13/2011	
<b>Active?:</b>	If you select "Yes", the user will appear as "Active" on your list of potential users and be available to be assigned to a product. If you select "No", the user will appear as "Inactive" on the list and will not be eligible to be assigned to a product. This can be edited in the Update User screen. Yes	

Save User      Save User & Add to Publication

Figure 65. Create New User

#### 4. Complete the following fields:

- a. **User ID:** Each user must have a unique ID.
- b. **Password:** Enter a Password.

**Note:** Passwords must be at least 8 characters in length and have at least 3 of the following 4 characteristics:

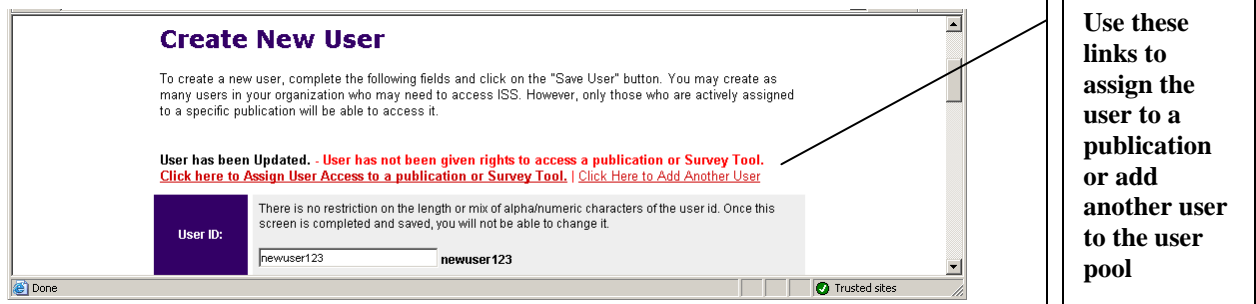
- one uppercase letter
- one lowercase letter
- one numeric character
- one symbol (#, \$, &, etc.)

- c. **First Name:** Enter the user's first name.
  - d. **Last Name:** Enter the user's last name.
  - e. **Organization:** This field is completed automatically, unless you are an Administrator with rights for more than one organization. If this is the case, select an organization for the user from the drop-down list provided.
  - f. **E-mail:** Notification of system changes and Password reminders will be sent to this address.
  - g. **Valid From/To:** Indicate the period of time to give the user access to the ISS. The system defaults to a two-year period, beginning on the date on which the user is created. Type in new to/from dates to change the access period.
  - h. **Active?:** Select "Yes" to add the user to the user pool. You may have as many active users in the system as you require.
5. There are two options to save a new user:
    2. Click the **Save User** button. The *Create New User* screen will refresh to indicate that the new user has been added to the system.
    3. Click the **Save User & Add to Publication** button. The *Create New User* screen saves the user, closes, and the Publication Administration page opens, displaying available tools and publications.

**Caution:** ISS User IDs must all be unique. If you chose a User ID that already exists in the system, the user will not save and you will get the following error message in red at the top of the screen

**ERROR UserID already exists, please choose another.**

**Figure 66. Create New User screen after a user has been added to the user pool**



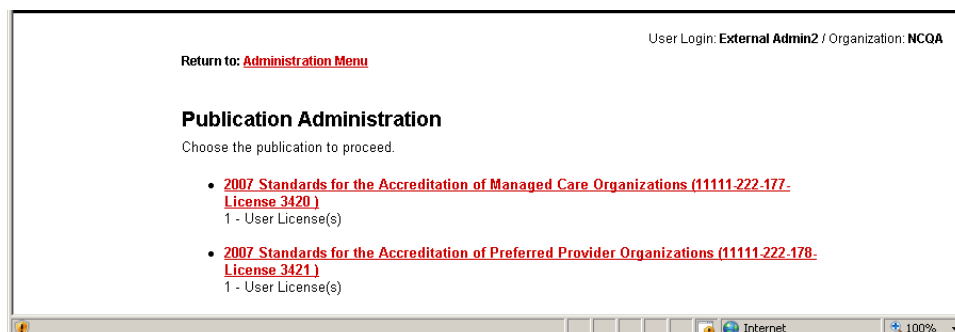
**Note:** Now that you have added a new user to the ISS user pool but have not assigned to a publication, you will need to assign the user access to specific Standards and Guidelines and/or Survey Tool publications. Instructions for doing this are included in the next (*Assigning a User to a Publication*) section of this manual.

## ASSIGNING A USER TO A PUBLICATION

**Note:** Only active ISS users can be assigned access to a Web publication. See the *Adding a User to the User Pool* section of this manual for more information.

To assign a user to a publication (**Standards and Guidelines** or **Survey Tool**):

1. Log in as an Administrator.
2. Click the **Administrative Functions** link to open the *Administration Menu* screen.
3. Click on the **Assign User to Publication** link in the **Manage Users** section. The **Publication Administration** page opens, listing available publications:



4. Click the link for the publication you want to assign the user to. This opens the **Assign User To** page (Figure 67).

**Figure 67. Assign User To Publication**

**Assign User to:**  
**2006 DM Accreditation and Certification Standards, Guidelines and Assessment Tool**

To assign a user to this publication, complete the following fields and click on the "Save User" button. The number of active users is limited to the number of licenses you purchased. If you get a message that there are no remaining licenses, you may purchase additional licenses, reassign a currently assigned user id for this product or change a currently assigned user id to "Inactive."

**User ID:** Enter any existing active User ID here.  
 USER ID:   
 Enter the user's email address.  
 Email:   
 OR:  
 Using the drop down list of existing active User Names/IDs, select the user you want to activate by clicking on the user name/ID. This will not cause the fields to populate but will assign this active user to the license. Complete the remaining fields and click on the Save User button below. To delete a user from the license, skip the remaining fields and click on the Delete button below.  
 Unknown  
 Jim, Bond - Bond  
 Mister, Roberts - Mr

**Is User Administrator for this License?:** This allows you to designate a user to have Administrative rights. Administrators have the ability to perform all of the user management functions. You should have at least one person with Administrative rights and may give Administrative rights to any and all active licensed users. If you select "Yes" in this drop down box, the user will have Administrative rights to this publication. If you select "No," the user will still have access to the publication, but not the Administrative screens.  
 No

**Valid From:** This field defaults to the date the license is created. This can be modified if you want to delay access. This can be edited in the Update User screen.  
 1/14/2006

**Valid To:** This field defaults to a 5-year period. This can be changed if you want this user's privileges to expire earlier. This can also be extended, even beyond the valid time frame for the publication. This can be edited in the Update User screen.  
 1/13/2011

**Active?:** If you select "Yes," the user will appear as "Active" on your list of users assigned to the product and can access the product. If you select "No," the user will appear as "Inactive" on the list and will not be eligible to access the product.  
 Yes

**User Rights:** The fields below allow you to assign this user rights to specific areas and functions of this Survey Tool.  
 This section is Not Applicable for Standards and Guidelines - you do not need to complete any fields. All users will have

5. On the **Assign User** screen (Figure 67) complete the following fields:
  - a. **User ID:** Select a User ID from the user pool by either entering the User ID or e-mail address, or selecting the User Name from the drop-down list provided.
  - b. **Is User Administrator for this License?:** Use this field to assign administrative capabilities to the user, as appropriate.
  - c. **Valid From/To:** Indicate the period of time to give the user access to the publication. The system defaults to a two-year period, beginning on the date on which the user is created. Type in new to/from dates to change the access period.
  - d. **Active?:** Select "Yes" to make the user's access active for the publication. You may have as many active users on a publication as your license permits.
    - **User Rights (*Applicable to Survey Tools only*):** Assign the user rights to specific areas and functions of the **Survey Tool**.

---

**Note:** All users assigned to Standards and Guidelines publications have read-only rights to all standards category information. In addition, Standards and Guidelines publications do not include Results or Submission features to which user rights need to be assigned.

For Organization Background (if applicable) and each *standards category* in the **Survey Tool**, identified by the category name abbreviation (e.g. QI, UM, CR, RR, etc.), assign one of three levels of rights:

- **Read and Change (R&C).** The user can read all content and data in the category and enter, edit and save all data, including answers to element questions, evaluation text, comments and private notes. *This is the default level of rights.*
- **Read Only (RO).** The user can read all content and data, including answers to element questions, evaluation text, comments and private notes but cannot enter, edit or save data.
- **No Access (NA).** The user can read **Standards and Guidelines** content but cannot enter or edit **Survey Tool** data.

For the **Results** section, assign one of two levels of rights:

- **Read Only (RO).** The user can read results. *This is the default level of rights.*
- **No Access (NA).** The user cannot obtain **Survey Tool** results.

For **Survey access**:

After the submission of the Survey Tool for survey, ISS makes a copy of available in “read only” mode. This version is separate from your Readiness Evaluation and is used to conduct the survey.

6. To provide access to this version: Leave the box checked. This is the default level of rights for new user
7. To prohibit the user from accessing this version: Uncheck the box.

For **Survey Tool Submission** to NCQA for survey, assign one of three levels of rights:

8. **Documents and Survey Tool.** The user can upload documents and execute the final **Survey Tool** submission. *This is the default level of rights.*
9. **Documents.** The user can upload documents but cannot execute the final **Survey Tool** submission.

- 
10. **No Access (NA).** The user cannot upload document or execute the final **Survey Tool** submission.
  11. Click the **Save User** button; the **Assign User To** screen closes, and the *Administration Menu* main page opens.

**Note:** The number of users that you can add to a publication is limited to the number of licenses purchased by your organization. If you receive a message indicating that there are no remaining licenses available when you attempt to assign a new user access to a publication, you will need to either inactivate a current user on the publication or purchase an additional license to give the new user access.

To purchase an additional license, contact NCQA Customer Support via e-mail at [customersupport@ncqa.org](mailto:customersupport@ncqa.org) or by phone, toll free, at 888-275-7585.

## VIEW/EDIT USER RIGHTS TO PUBLICATION

1. On the *Administration Menu* screen click on the **View/Edit User Rights to Publication** link in the **Manage Users** section and open **Publication Administration** page.
2. Select a publication, click on it and open **View/Revise User Rights for** page.
3. Scroll down the page, view or edit rights for the selected user, click on the **Save Rights** button (Figure 68).



Figure 68. View/Revise User Rights

Return to: [Administration Menu](#) User Login: External Admin2 / Organization: NCOA

### View/Revise User Rights for: 2007 Standards for the Accreditation of Managed Care Organizations

The fields below allow you to assign this user rights to specific areas and functions of this Survey Tool.

**This section is Not Applicable for Standards and Guidelines - you do not need to complete any fields. All users will have Read Only rights to all Categories. The Standards and Guidelines do not have Results or Submission features.**

For the Organization Background and for each Category of Standards (identified by a letter code) in the Survey Tool, assign one of three levels of rights:

- **Read and Change (R&C).** The user can read all content and data in the category/area and enter, edit and save all data, including answers to questions, evaluation text, comments and private notes. *This is the default level of rights.*
- **Read Only (RO).** The user can read all content and data, including answers to questions, evaluation text, comments and private notes but cannot save any edits to data.
- **No Access (NA).** The user can read all content ISS-developed content (e.g., Standards and Guidelines) but cannot read or edit any data entered by the organization.

User ID	Organization Background	Category QI	Category UM	Category CT	Category RA	Category HLM	Results	Submission	Survey Access
sttexad32iss	R&C	R&C	R&C	R&C	R&C	R&C	RO	Documents & Survey Tool	<input checked="" type="checkbox"/>

[Save Rights](#)

Done Trusted sites

## MANAGING A USER'S ACCESS TO A PUBLICATION

To edit or manage a user's access to a specific publication (**Standards and Guidelines** or **Survey Tool**):

4. On the *Administration Menu* screen click on the **View/Edit User Assigned to Publication** link in the **Manage Users** section and open **View/Edit Users** page.
5. Click on the User ID link and open **Update User for** page.
6. The user name associated with the User ID you chose above will be highlighted in the User Name field. (You can select another user by entering the User ID and e-mail address or by highlighting a different user name.)
7. Make changes to the user's access (Administrator rights, access period, active status, and **Survey Tool** user rights) as needed.

**Note:** See the *User Rights* instructions included in the *Assigning a User to a Publication* section of this manual for detailed information on assigning user rights to specific areas and functions of the Survey Tool.

8. Click the **Update User** button to save your changes

**Figure 69. Update User assigned to publication**

User Login: **External Admin2** / Organization: **NCOA**

[Return to: Administration Menu](#)

### Update User for: 2006 DM Accreditation and Certification Standards, Guidelines and Assessment Tool

The number of active users is limited to the number of licenses you have purchased. If you get a message that there are no remaining licenses, you may purchase additional licenses by contacting us or change a currently assigned User ID to "Inactive."

To change the status of a user for this license, use the following fields. You may change a user from Active to Inactive or vice versa and click on the "Save User" button. You may also delete an existing user assigned to this Standards and Guidelines or Survey Tool by selecting the user and clicking on the "Delete" button.

Use the links above to return to the User Administration Menu or to Assign/Manager Users by Product.

<b>User ID:</b>	Enter any existing active User ID here. <b>USER ID:</b> <input type="text"/>
	Enter the user's email address. <b>Email:</b> <input type="text"/>
	<b>OR:</b> Using the drop down list of existing active User Names/IDs, select the user you want to activate by clicking on the user name/ID. This will not cause the fields to populate but will assign this active user to the license. Complete the remaining fields and click on the Save User button below. To delete a user from the license, skip the remaining fields and click on the Delete button below. <div><div>L-Name1 L-Lastname1</div><div>Jim, Bond - jbond</div><div>Mister, Roberts - Mr</div></div>

<b>Is User Administrator for this License?:</b>	This allows you to designate a user to have Administrative rights. Administrators have the ability to perform all of the user management functions. You should have at least one person with Administrative rights and may give Administrative rights to any and all active licensed users. If you select "Yes" in this drop down box, the user will have Administrative rights to this publication. If you select "No," the user will still have access to the publication, but not the Administrative screens. <div>Yes ▾</div>
---	--

<b>Valid From:</b>	This field defaults to the date the license is created. This can be modified if you want to delay access. This can be edited in the Update User screen. 11/14/2006																				
<b>Valid To:</b>	This field defaults to a 5-year period. This can be changed if you want this user's privileges to expire earlier. This can also be extended, even beyond the valid time frame for the publication. This can be edited in the Update User screen. 11/13/2011																				
<b>Active?:</b>	If you select "Yes," the user will appear as "Active" on your list of users assigned to the product and can access the product. If you select "No," the user will appear as "Inactive" on the list and will not be eligible to access the product. Yes																				
<b>User Rights:</b>	<p>The fields below allow you to assign this user rights to specific areas and functions of this Survey Tool.</p> <p><b>This section is Not Applicable for Standards and Guidelines - you do not need to complete any fields. All users will have Read Only rights to all Categories. The Standards and Guidelines do not have Results or Submission features.</b></p> <p>For the <i>Organization Background</i> and for each <i>Category of Standards</i> (identified by a letter code) in the Survey Tool, assign one of three levels of rights:</p> <ul style="list-style-type: none"> <li>• <b>Read and Change (R&amp;C).</b> The user can read all content and data in the category/area and enter, edit and save all data, including answers to questions, evaluation text, comments and private notes. <i>This is the default level of rights.</i></li> <li>• <b>Read Only (RO).</b> The user can read all content and data, including answers to questions, evaluation text, comments and private notes but cannot save any edits to data.</li> <li>• <b>No Access (NA).</b> The user can read all content ISS-developed content (e.g., Standards and Guidelines) but cannot read or edit any data entered by the organization.</li> </ul> <p>For Survey Access:</p> <p>After the submission of the Survey Tool for survey, ISS makes a copy available in "Read Only" mode. This version is separate from your readiness Evaluation and is used to conduct the survey</p> <ul style="list-style-type: none"> <li>• <b>To provide the user access to this version:</b> Leave the box checked. <i>This is the default level of rights for a new user.</i></li> <li>• <b>To prohibit the user from accessing this version:</b> Uncheck the box.</li> </ul> <table border="1"> <thead> <tr> <th>Organization Background</th> <th>Category CO</th> <th>Category PT</th> <th>Category PR</th> <th>Category SY</th> <th>Category MQ</th> <th>Category OP</th> <th>Results</th> <th>Submission</th> <th>Survey Access</th> </tr> </thead> <tbody> <tr> <td>R&amp;C</td> <td>R&amp;C</td> <td>R&amp;C</td> <td>R&amp;C</td> <td>R&amp;C</td> <td>R&amp;C</td> <td>R&amp;C</td> <td>RO</td> <td>Documents &amp; Survey Tool</td> <td><input checked="" type="checkbox"/></td> </tr> </tbody> </table> <p>Update User Delete</p>	Organization Background	Category CO	Category PT	Category PR	Category SY	Category MQ	Category OP	Results	Submission	Survey Access	R&C	R&C	R&C	R&C	R&C	R&C	R&C	RO	Documents & Survey Tool	<input checked="" type="checkbox"/>
Organization Background	Category CO	Category PT	Category PR	Category SY	Category MQ	Category OP	Results	Submission	Survey Access												
R&C	R&C	R&C	R&C	R&C	R&C	R&C	RO	Documents & Survey Tool	<input checked="" type="checkbox"/>												

**Survey Tool only**  
**Edit the user rights to specific areas and functions**

## REMOVING A USER'S ACCESS TO A PUBLICATION

To remove a user's access to a publication (**Standards and Guidelines** or **Survey Tool**):

1. On the *Administration Menu* screen click on the **View/Edit User Assigned to Publication** link in the **Manage Users** section and open View/Edit Users page.
2. Click on the User ID link and open **Update User for** page.
3. The user name associated with the User ID you chose above will be highlighted in the User Name field. You can select another user by entering the User ID and e-mail address or by highlighting a different user name.
4. Scroll to the bottom of the screen and click the **Delete** button.
5. Click the **Continue** button to remove the user from the publication.

# REMOVING A USER FROM THE USER POOL

**Note:** A user must be removed from all publications (Standards and Guidelines and Survey Tools) before they can be removed from the user pool entirely. See the *Removing a User's Access to a Publication* section of this manual for more information.

To remove a user from the user pool:

1. On the *Administration Menu* screen click the **View/Edit User in User Pool** link and open **View/Edit Users** page. The page displays all users.
2. Click on a User ID link to select the user to delete. The **Update User** screen will open and display the user's information.
3. Click the **Delete** button.
6. Click the **Continue** button to remove the user from the publication.

**Figure 70. View/Edit Users**

**View/Edit Users** Add New User

This screen allows you to create and view a list of potential users and to change attributes for existing users.  
You may change passwords or email address or delete users who are no longer eligible to access the ISS.  
To Create a New User, click on the gray box.  
To update or alter an existing user, select from the User ID in the list below.  
To send an email to a user, click on the user's email address.

**User ID:** This is the User ID created when the user was added. This cannot be edited. To update or edit attributes for a user, click on the User ID.  
**First Name:** This is the user's first name. This can be edited using the Update User screen.  
**Last Name:** This is the user's last name. This can be edited using the Update User screen.  
**Email:** This is the user's email address. This link will allow you to send an email to this user. This can be edited using the Update User screen.  
**Organization:** This is the organization for this user.  
**Active?:** If the user appears as "Active," the user is available to be assigned to a product. If the user appears as "Inactive" on the list, you will not be able to assign this user to a product. This can be changed in the Update User screen.  
**Valid From:** This field defaults to the date the license is created. This can be modified if you want to delay access. This can be changed in the Update User screen.  
**Valid To:** This field defaults to a 5-year period. This can be changed if you want this user's privileges to expire earlier. This can also be extended, even beyond the valid time frame for the publication. This can be changed in the Update User screen.

User ID	First Name	Last Name	Email	Organization	Status	Valid	
						From	To
<a href="#">101405DupUser2</a>	Duplicate	User2	<a href="#">qq@ncqa.org</a>	NCQA	Active	10/14/2005	10/14/2007
<a href="#">abeattie2</a>	Angela	Beattie	<a href="#">abeattie@mpo.org</a>	NCQA	Active	3/30/2005	3/30/2007
<a href="#">AlanSilver</a>	Alan	Silver	<a href="#">asilver@nvqio.sdp.s.org</a>	NCQA	Active	2/16/2005	12/31/2005
<a href="#">alee</a>	Ann	Lee	<a href="#">lee@ncqa.org</a>	NCQA	Active	5/13/2005	5/13/2007
<a href="#">Ambratt</a>	Ann-Marie	Brattain	<a href="#">brattain@thc.state.fl.us</a>	NCQA	Active	10/8/2004	10/8/2006
<a href="#">arosenberg</a>	Alan	Rosenberg		NCQA	Inactive	2/5/2002 8:38:14 PM	2/5/2006

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## CHANGING THE ADMINISTRATOR ON A SINGLE-USER LICENSE

Changing the Administrator on a single-user license is a three-step process; it requires adding a new user to the ISS, replacing the Administrator and removing the previous Administrator from the license.

### Step 1: Adding a New User to the User Pool

1. Log in as the current Administrator.
2. On the *Welcome* screen click on the **Administrative Functions** link to go to the *Administration Menu* screen.
3. Select the **Create New User in User Pool** link and open **Create New User** screen.
4. Complete all fields on the **Create New User** screen.
5. **Active?:** Select “Yes.”
1. Click the **Save User** button.
2. Now that the new user has been added to the system you can replace the current Administrator.

### Step 2: Replacing the Administrator

- On the Administration Menu page click on **View/Edit User Assigned to Publication** link in the **Manage Users** section and open **Publication Administration** page.
  - Select a license on the **Publication Administration** screen and open **View/Edit Users** page.
3. Click on the User ID link for the Administrator you want to replace in the table of users.
  4. On the **Update User for** screen, change the answer to the question “**Active?**” from “Yes” to “No.”
  5. Scroll down and click the **Update User** button.
  6. On the *Administration Menu* page click on the **Assign User to Publication** link and open **Publication Administration** page.
  7. Select a license and open **Assign User to** page.

8. Enter the **new** Administrator's User ID or e-mail address (or choose the User Name from the drop down list provided).
9. Change the answer to the question "**Is User Administrator for this License?**" from "No" to "Yes."
10. Scroll down and click the **Save User** button.
1. Log out.

### Step 3: Removing the Previous Administrator

It is not always necessary to delete a user from the ISS user pool; you only need to delete a user who will never need to access the ISS again. To inactivate an account, remove user access to specific assigned publications. To do this:

- e. Log in as the new Administrator, click on the **View/Edit User Assigned to Publication** link and open **Publication Administration** page.
- f. Select a publication, click on the link and open **View/Edit Users** page.
- g. Select the User ID for the previous Administrator in the user table to go to the **Update User** screen; the previous Administrator should show as inactive now.
- h. Scroll down to the bottom of the page and click the **Delete** button.
- i. Click the **Continue** button.

On log-in, the inactivated Administrator will not longer have access to the publications from which access has been removed.

## REVIEWING THE HISTORY OF CHANGES

**Note:** This feature applies to Survey Tool publications only.

The View History of Changes feature allows an Administrator to search and review changes made to scoring data, assessment notes and documents in the **Survey Tool**, including information on who made the change and when. To view a history of changes:

- Log in as Administrator.
- Click the **Administrative Functions** link to open the *Administration Menu* screen.
- Click the **View History of Changes** link in the **Other Administrative Functions** section and open **Publication Administration** page.
- Select a publication from the **Publication Administration** page, click on it and open **View History of Changes** page (Figure 71).

**Figure 71.**  
**View History of Changes**  
screen, before search

View changes since a specific date or leave the field blank to view all changes

- **View changes since:** Leave this field blank and click the **Select** button to view all changes made to the **Survey Tool**

*or*

Enter a date (in mm/dd/yy format) and click the **Select** button to view the history of changes since that date.

- The page will refresh to display a table of changes to the publication (Figure 72). Changes are tracked in terms of what information in the **Survey Tool** was changed, including:
  6. **Data.** Changes to scoring information.
  7. **Assessment.** Changes to notes and assessments.
  8. **Documents.** Changes to linked documents.

In addition, information on the type of change made (adding, editing or deleting information), a date and time stamp of when the change was made and the User ID of the person who made the change are also included.

NCQA RDS Admin - Microsoft Internet Explorer

File Edit View Favorites Tools Help

NCQA Measuring the Quality of America's Health Care

HOME HELP LOGOUT

User Login: ST Admin / Organization: Demo Org

Return to: [Administrative Menu](#)

### View History of Changes

This screen displays the change history for:

MCO 2004 License - License 595

View changes since:  (mm/dd/yy - leave blank for ALL)

Select Cancel

Standard	Element	Change Date	UserID	Type of Change	Where Changed
UM16	D	2/9/2004 4:12:15 PM	DataEntry1 RDSWebUser	Edit	Data
RR7	B	2/9/2004 4:11:36 PM	DataEntry1 RDSWebUser	Edit	Data

**Figure 72. View History of Changes screen, after search**

Standard / element

Change date & time

User ID

Type of change  
(add, edit, or delete)

What changed  
(data, assessment, or document)



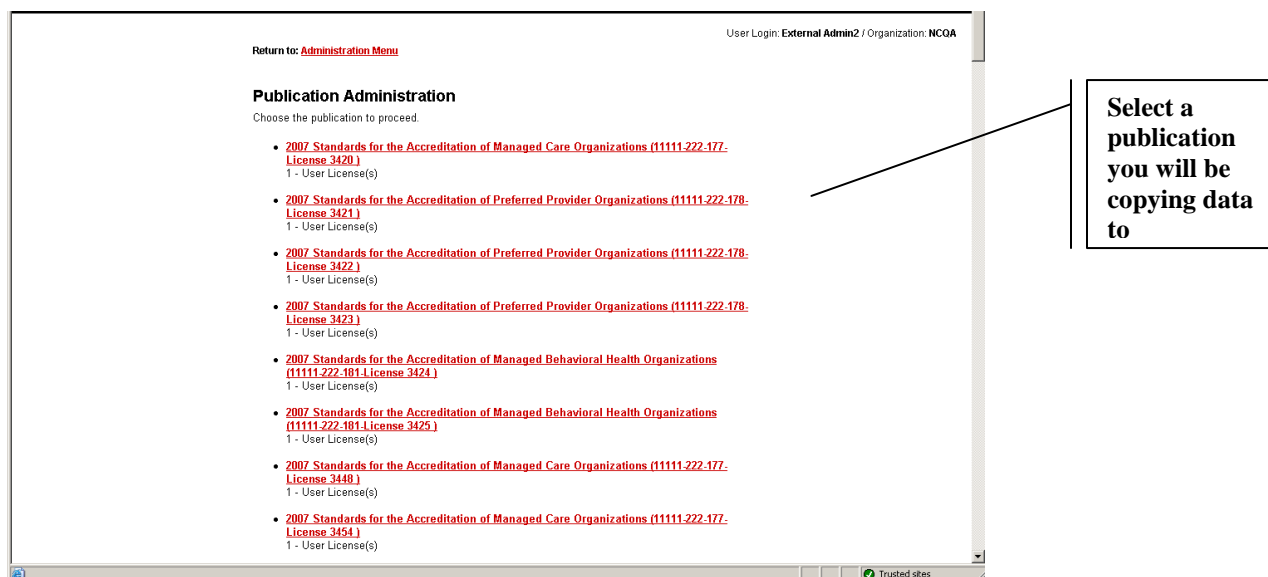
## TRANSFER DATA FROM ONE SURVEY TOOL TO ANOTHER SURVEY TOOL

The copy data process allows organizations that have undergone an NCQA survey, to copy that data to their current survey tool. This applies to organizations that are updating or striving for accreditation, certification or recognition of newly published NCQA products. Please keep in mind that this process is limited to selected NCQA products, and must be approved by NCQA. Organizations that have not received approval will not have the ability to use this functionality and must contact NCQA for approval. For example, an organization that went through a 2004 MCO survey, and has purchased a 2006 MCO survey tool, will have the option to copy the data from the 2004 MCO survey to their 2006 MCO survey.

To copy data from a previous NCQA survey:

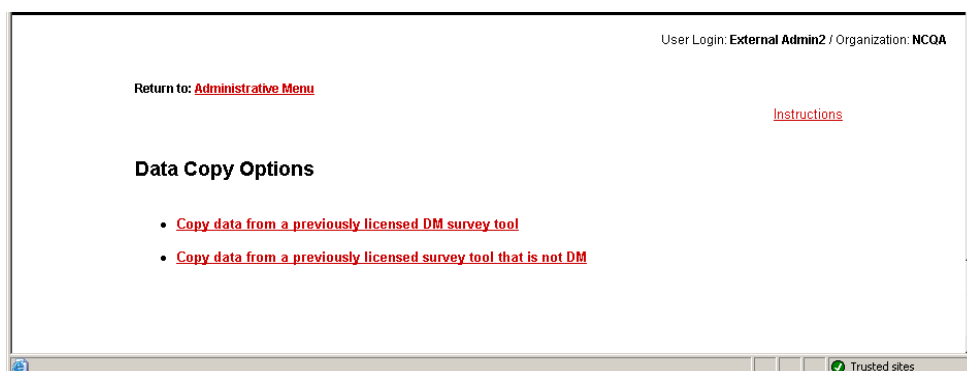
1. Click the **Administrative Functions** link on the ISS homepage.
2. Click on the **Transfer Data from one Survey Tool to another Survey Tool** link in the **Other Administrative Functions** section and open the **Publication Administration** page (Figure 73).

**Figure 73. Publication Administration. Transfer Data**



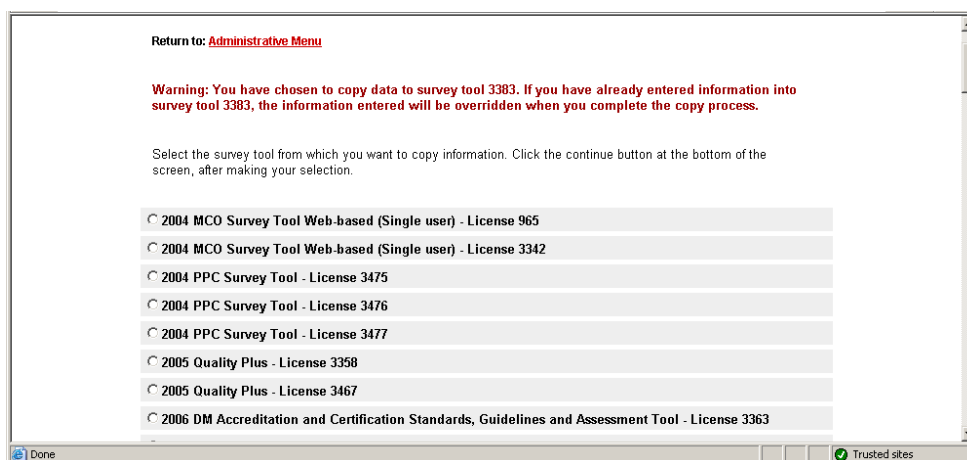
3. Select a publication you will be copying data to and click on the link. The **Data Copy Options** page will open (Figure 74).

**Figure 74. Data Copy Options**



4. Select the appropriate link on the Data Copy Options page (Figure 74).
5. For organizations that select the first option, the following page will list all survey tools purchased by your organization (Figure 75a).

**Figure 75a. Select a tool to copy from**



6. Select the previously undergone survey with the data that will be copied, and click the **Continue** button to proceed with the data copy process (Figure 75a).
7. For organizations that select the second option, the following page will display a confirmation page; verify the “From” and “To” survey tools involved in the data copy (Figure 75b).

**Figure 75b. Copy Data**

Return to: [Administrative Menu](#)

### Survey Tools for Data Copy

Please verify the license numbers below. To view the list of elements that will be copied, click the Continue button. To stop the copy process, click the Cancel button.

From: License 3321

To: License: 3266

Done Trusted sites

8. Click the **Continue** button, and note all the elements to be copied to the selected survey tool (Figure 75b).
9. Click the **Copy Data** button and click “OK” to the verification pop up box to copy the data from the elements in the “From” survey tool, to the matching elements in the “To” survey tool (Figure 75c).
10. The following page will list the status of the data transfer. If you experience problems copying data, please contact NCQA customer support @ 888-275-7585

**Figure 75c. Copy Data**

Please note that data for the following elements will be copied to your current survey tool. Click the Copy Data button below to transfer the information.

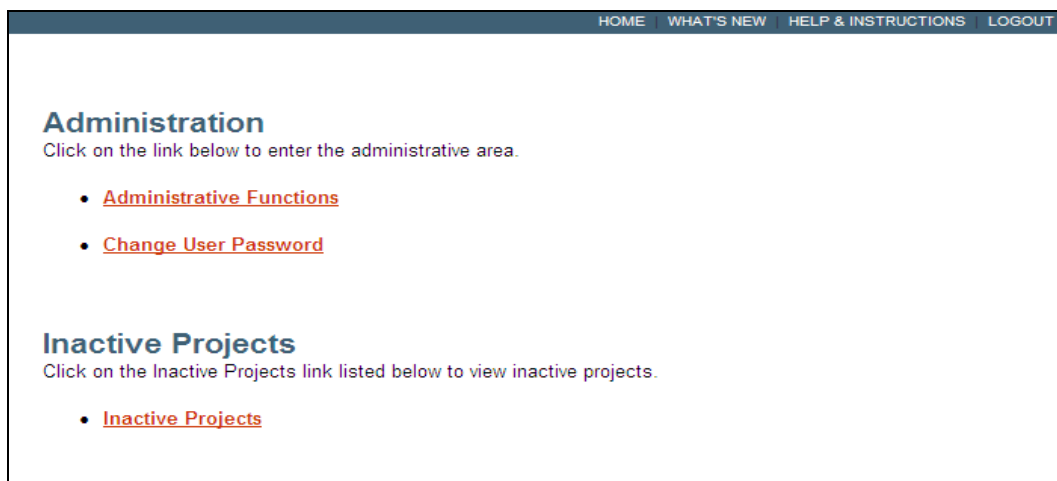
To: Survey Tool License - 3266	From: Survey Tool License - 3321	To: Survey Tool License - 3266	From: Survey Tool License - 3321
C01 Element A	C01 Element A	Arthritis	Arthritis
C01 Element C	C01 Element C	Asthma	Asthma
C02 Element A	C02 Element A		
C03 Element A	C03 Element A		
C03 Element B	C03 Element B		
C04 Element A	C04 Element A		

Internet 100%

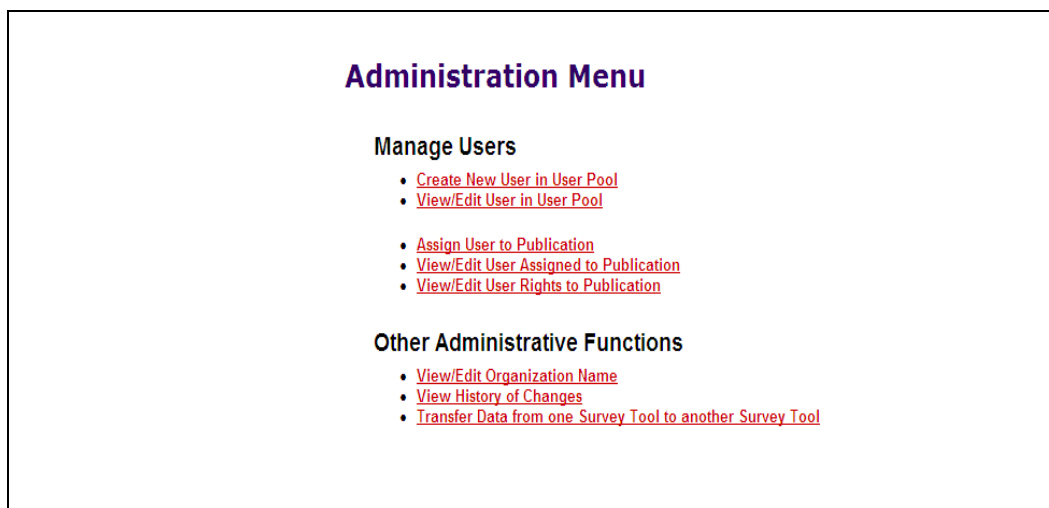
# UPDATING THE ORGANIZATION NAME

Users have the ability to modify the organization name prior to submitting the Survey Tool.

1. Click on **Administrative Functions** from the ISS Home page.



2. Click on **View/Edit Organization Name** under “Other Administrative Functions”.



3. Change the organization name and click **Update**.

Return to: [Administrative Menu](#)

## View/Edit Organization Name

This screen allows you to view and edit your organization name. Please note that you won't be able to edit once your organization name is finalized.

Organization Name:

4. The organization name has been updated. .

Return to: [Administrative Menu](#)

## View/Edit Organization Name

This screen allows you to view and edit your organization name. Please note that you won't be able to edit once your organization name is finalized.

Organization Name has been Updated.

Organization Name:

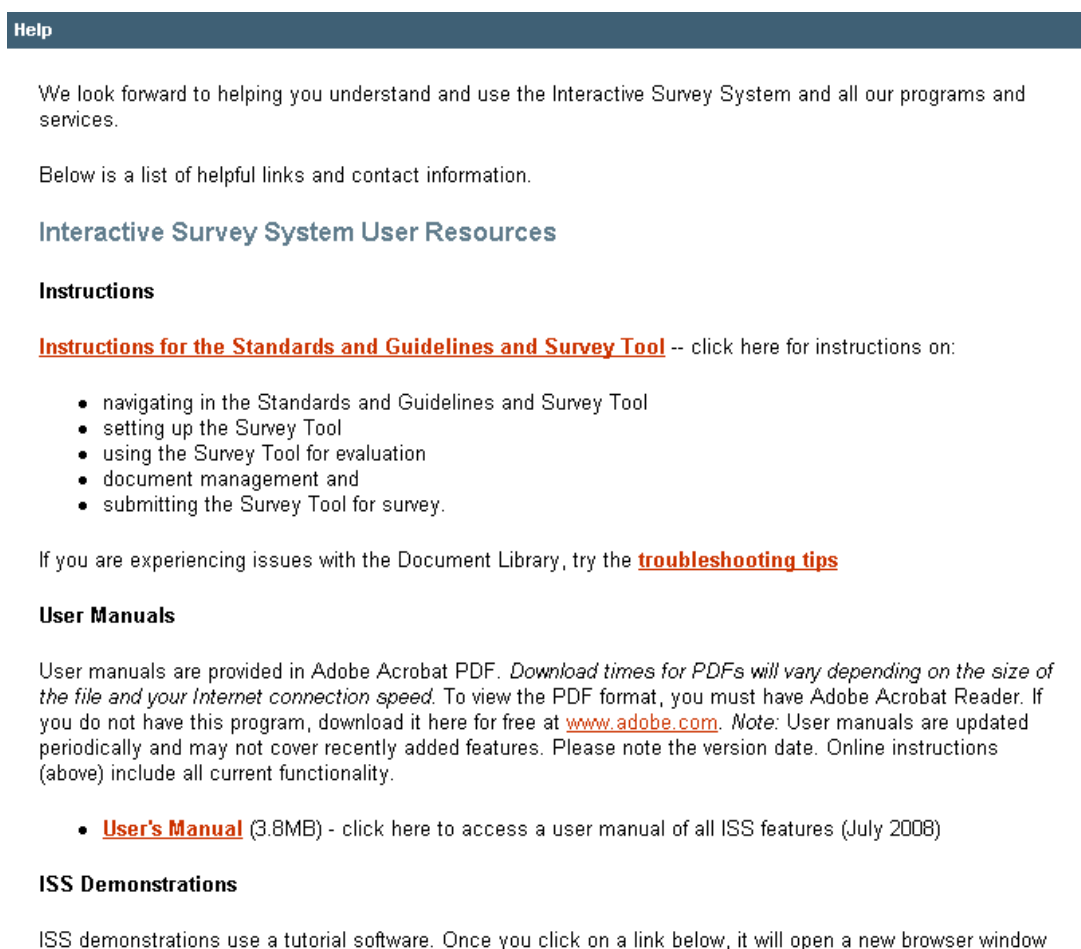
## **PART VIV: SUPPORT**

# HELP AND INSTRUCTIONS SCREEN

Help resources are provided within the ISS. Access the *Help* screen (Figure 76) by clicking the **Help & Instructions** link on the Top Navigation Bar. The *Help* screen displays links to the following resources:

- Interactive Survey System Instructions
- General Support
- Standards and Policy Clarification
- General Inquiries or Comments

**Figure 76. *Help* screen**



**Help**

We look forward to helping you understand and use the Interactive Survey System and all our programs and services.

Below is a list of helpful links and contact information.

### Interactive Survey System User Resources

#### Instructions

**[Instructions for the Standards and Guidelines and Survey Tool](#)** -- click here for instructions on:

- navigating in the Standards and Guidelines and Survey Tool
- setting up the Survey Tool
- using the Survey Tool for evaluation
- document management and
- submitting the Survey Tool for survey.

If you are experiencing issues with the Document Library, try the **[troubleshooting tips](#)**

#### User Manuals

User manuals are provided in Adobe Acrobat PDF. *Download times for PDFs will vary depending on the size of the file and your Internet connection speed.* To view the PDF format, you must have Adobe Acrobat Reader. If you do not have this program, download it here for free at [www.adobe.com](http://www.adobe.com). *Note:* User manuals are updated periodically and may not cover recently added features. Please note the version date. Online instructions (above) include all current functionality.

- **[User's Manual](#)** (3.8MB) - click here to access a user manual of all ISS features (July 2008)

#### ISS Demonstrations

ISS demonstrations use a tutorial software. Once you click on a link below, it will open a new browser window

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# Interactive Survey System Instructions

**General Instructions** provide information on ISS log in, sessions and top-level navigation, including basic menu information and user management information for Administrators.

After you select specific Standards and Guidelines or Survey Tool, the *Help* screen also gives you the option to view **Instructions for the Standards and Guidelines and Survey Tool** that explain key features specific to the publication and offer detailed information on how to:

- Set up the Survey Tool to use it for a readiness evaluation.
- Enter data to conduct a readiness evaluation.
- Reference and manage documents to support your evaluation.
- Submit the Survey Tool to NCQA.

## General Support

Contact [customersupport@ncqa.org](mailto:customersupport@ncqa.org) or call toll free at 888-275-7585 for questions or comments related to ISS, including general use or technical issues; the survey process, including application information; publications and conferences, including purchasing and registration; information about a specific organization; information about accreditation, certification or recognition.

## Standards and Policy Clarification

Contact NCQA for specific answers to standards and policy questions as follows:

### NCQA Accreditation and Certification Programs

For specific answers to standards and policy questions related to NCQA Accreditation and Certification programs.

- Click **FAQs** to review answers to commonly asked questions about accreditation or certification.
- Click **Policy Updates** to access the *Policy Updates* screen.
- Click **Ask a Question** to submit a question to the NCQA Policy Clarification Support (PCS) staff.

## Recognition Programs

For standards and policy questions specifically related to a recognition program, click **customersupport@ncqa.org** to contact NCQA.



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## General Inquiries or Comments

If you have general questions or comments about the NCQA Web site, submit them to the Webmaster or contact NCQA.

[Webmaster@ncqa.org](mailto:Webmaster@ncqa.org) or 888-275-7585

1100 13th Street NW  
Suite 1000  
Washington, DC 20005  
Telephone: 202-955-3500  
Fax: 202-955-3599

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# PART X: TROUBLESHOOTING TIPS

## ISS TROUBLESHOOTING TIPS

The following are some basic troubleshooting tips to enhance your ISS experience.

### Pop Up Blockers

To view some ISS screens and features, you may need to disable the pop-up blocker feature of your Internet browser. Please refer to your browser Help menu or customer support function for instructions on how to disable this feature.

### Clearing the Cache

If you are unable to view an ISS screen or function, you may need to clear your browser Cache.

The Cache is a temporary storage place on your hard drive for snapshots of the Web pages that you have visited. Upon visiting a Web page, your browser checks to see if the page is currently cached, to allow faster retrieval, rather than downloading the page to your computer. However, if the particular URL has been modified, the page in cache may be different than the page currently offered on the Web. Having an old snapshot of a web page in cache can cause issues when using the web page if the page has “moved on” since the snapshot was taken:

To clear your web browser cache:

#### **Internet Explorer version 5.0, 5.5, 6.0, 8.0:**

- on the Tools menu of the Internet Explorer toolbar, click Internet Options
- on the General tab, in the Temporary Internet files area, click Delete Files, click Delete Cookies and Clear History then click OK.
- click OK to close Internet Options
- close and reopen Internet Explorer.

### Designating the ISS as a Trusted Site

To view some ISS screens and features, you may need to designate the ISS as a trusted site. This is specifically required to allow ISS to open a document stored on a local or network drive or directory. To designate the ISS as a trusted site:

- on the browser menu go to Tools and select Internet Options

- 
- click on the Security tab
  - in the box containing icons for the Internet Explorer zones, click the Trusted Sites zone
  - click the Sites button below this box
  - enter the URL for the ISS into the "Add this Website to the zone..." field
  - click Add
  - click OK to close this window
  - click OK to close the Internet Options window.