



CASE MANAGEMENT, VERSION 4.0

URAC CORE Standards, Version 3.0

Organizational Structure

Core 1 – Organizational Structure
Core 2 – Organization Documents

Policies and Procedures

Core 3 – Policy and Procedure Maintenance, Review and Approval

Regulatory Compliance

Core 4 – Regulatory Compliance

Inter-Departmental Coordination

Core 5 – Inter-Departmental Coordination

Oversight of Delegated Functions

Core 6 – Delegation Review Criteria
Core 7 – Delegation Review
Core 8 – Delegation Contracts
Core 9 – Delegation Oversight

Marketing and Sales Communications

Core 10 – Review of Marketing and Sales Materials

Business Relationships

Core 11 – Written Business Agreements
Core 12 – Client Satisfaction

Information Management

Core 13 – Information Management
Core 14 – Business Continuity
Core 15 – Information Confidentiality and Security
Core 16 – Confidentiality of Individually-Identifiable Health Information

Quality Management

Core 17 – Quality Management Program
Core 18 – Quality Management Program Resources
Core 19 – Quality Management Program Requirements
Core 20 – Quality Management Committee
Core 21 – Quality Management Documentation
Core 22 – Quality Improvement Projects
Core 23 – Quality Improvement Project Requirements
Core 24 – Quality Improvement Projects: Consumer Organizations

Staff Qualifications

Core 25 – Job Descriptions
Core 26 – Staff Qualifications

Staff Management

Core 27 – Staff Training Program
Core 28 – Staff Operational Tools and Support
Core 29 – Staff Assessment Program

Clinical Staff Credentialing and Oversight Role

Core 30 – Clinical Staff Credentialing
Core 31 – Senior Clinical Staff Requirements
Core 32 – Senior Clinical Staff Responsibilities
Core 33 – Financial Incentive Policy
Core 34 – Access to Services
Core 35 – Consumer Complaint Process

Health Care System Coordination

Core 36 – Coordination with External Entities

Consumer Protection and Empowerment

Core 37 – Consumer Rights and Responsibilities
Core 38 – Consumer Safety Mechanism
Core 39 – Consumer Satisfaction
Core 40 – Health Literacy



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Case Management Policies and Procedures

CM - 1 - Case Management Program Description

Case Management Staff Structure and Qualifications

CM - 2 - Case Manager Case Load

CM - 3 - Physician Consultation

CM - 4 - Case Manager Qualifications

CM - 5 - Certification in Case Management

CM - 6 - Case Manager Supervisor Qualifications

CM - 7 - Case Management Support Staff

Case Management Staff Management and Development

CM - 8 - Case Manager Professional Development

CM - 9 - Case Management Knowledge Domains

Information Management

CM - 10 - Case Review Process and Evaluation of Goals

CM - 11 - Case Review: Case Management Program Performance

CM - 12 - Case Review: Case Manager Performance

Case Management Organizational Ethics

CM - 13 - Consumer and Case Manager Protection

CM - 14 - Consumer Rights

CM - 15 - Case Manager Ethics Training

CM - 16 - Vendor Policy and Procedures

Case Management Process

CM - 17 - Case Management Identification Criteria

CM - 18 - Case Management Disclosure

CM - 19 - Case Management Consent

CM - 20 - Communication with Ordering Providers

CM - 21 - Data Collection Tools and Care Plan Templates

CM - 22 - Case Management Assessment

CM - 23 - Assessment Categories

CM - 24 - Case Management Plan

CM - 25 - Case Management Goals

CM - 26 - Case Management Dispute Resolution

CM - 27 - Case Management Discharge Criteria

On-Site Case Management

CM - 28 - Field and On-Site Case Management

Case Management Performance Measurement and Reporting Standards

Standard 1 – Performance Measurement and Reporting

Standard 2 – Participation in URAC Measures Program

Case Management Program Measures

Measure 1 – Medical Readmissions

Measure 2 – Percentage of Participants that Were Medically Released to Return to Work

Measure 3 – Complaint Resolution Timeliness

Measure 4 – Overall Consumer Satisfaction

Measure 5 – Contacting Consumers Promptly

Measure 6 – Percentage of Individuals That Refused Case Management Services