



## DISEASE MANAGEMENT, VERSION 3.0

### *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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### *URAC Disease Management Standards, Version 3.0*

#### **Disease Management Program Scope and Objectives**

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

#### **Administration and Staffing**

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

#### **Performance Measurement and Reporting**

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

#### **Consumer Rights and Responsibilities**

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

#### **Methods for Managing Eligible Populations**

- DM - 15 - Criteria for Identification of Eligible Consumers
- DM - 16 - Stratification of Eligible Consumers
- DM - 17 - Assessment of Eligible Consumers
- DM - 18 - Predictive Risk Modeling
- DM - 19 - Consumer Engagement

#### **Disease Management Program Design**

- DM - 20 - Program Interventions
- DM - 21 - Clinical Decision Support Tools
- DM - 22 - Consumer Education
- DM - 23 - Plan Addressing Delivery of Health Information to Consumers
- DM - 24 - Evaluation of Consumer Health Information
- DM - 25 - Telephonic Access