



## HEALTH CALL CENTER, VERSION 5.0

### *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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#### **Confidentiality**

HCC - 1 - Provider Specific Confidentiality

#### **Staff Qualifications**

HCC - 2 - Clinical Director Consultation

HCC - 3 - Limitations in Use of Non-Clinical Staff

HCC - 4 - Training and Policies of Use of Non-Clinical Staff

HCC - 5 - Clinical Triage Staff Qualifications

#### **Clinical Decision Support Tools**

HCC - 6 - Clinical Decisions Support Tool Requirements

HCC - 7 - Clinical Decisions Support Tool Documentation

HCC - 8 - Clinical Decisions Support Tool Update  
Requirements

#### **Communication Handling**

HCC - 9 - Clinical Triage Staff Disclosures

HCC - 10 - Telephone Performance Monitoring

HCC - 11 - Telephone Performance Thresholds

HCC - 12 - Non-Telephonic Communications

HCC - 13 - Clinical Staff Response Requirements

HCC - 14 - Handling of Triage Calls

HCC - 15 - Health Education Communications

HCC - 16 - Triage Dispositions

#### **Information Upon Which Clinical Activity is Conducted**

HCC - 17 - Information Sharing

HCC - 18 - Information Collection Limitations

#### **Communication Documentation**

HCC - 19 - Non-Automated Communication Documentation

HCC - 20 - Follow-Up Communication Documentation

HCC - 21 - Feedback to Physician

#### **Health Education**

HCC - 22 - Health Education