

## **DENTAL PLAN VERSION 7.4**

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 6-8: N/A

CORE 9: Delegation Management

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 & 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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#### **NETWORK MANAGEMENT**

DP-NM 1: Scope of Services

DP-NM 2: Provider Network Access and Availability

DP-NM 3: Provider Selection Criteria

DP-NM 4: Out-of-Network and Emergency Services

DP-NM 5: Participating Provider Representation

DP-NM 6: Participating Provider Relations Program

DP-NM 7: Participating Provider Written Agreements

DP-NM 8: Participating Provider Written Agreement Exclusions

DP-NM 9: Written Agreement Inclusions

DP-NM 10: Written Agreement Subcontracting

DP-NM 11: Other Participating Provider Agreement Documentation

DP-NM 12: Provider Network Disclosures

DP-NM 13: Participating Provider Violation Mechanism

DP-NM 14: General Requirements for Provider Dispute Resolution

Mechanisms

DP-NM 15: Disputes Concerning Professional Competence or

Conduct

DP-NM 16: Disputes Involving Administrative Matters

DP-NM 17: Participating Provider Suspension Mechanism for

Consumer Safety

## **CREDENTIALING**

DP-CR 1: Practitioner and Facility Credentialing

DP-CR 2: Credentialing Program Oversight

DP-CR 3: Credentialing Committee

DP-CR 4: Credentialing Program Plan

DP-CR 5: Credentialing Application

DP-CR 6: Credentialing Confidentiality

DP-CR 7: Review of Credentialing Information

DP-CR 8: Credentialing Communication Mechanisms

DP-CR 9: Primary Source Verification

DP-CR 10: Consumer Safety Credentialing Investigation

DP-CR 11: Credentialing Application Review

DP-CR 12: Credentialing Time Frame

DP-CR 13: Credentialing Determination Notification

DP-CR 14: Participating Provider Credentials Monitoring

DP-CR 15: Recredentialing

DP-CR 16: Recredentialing and Participating Provider Quality

Monitoring

DP-CR 17: Credentialing Delegation

#### MEMBER RELATIONS

DP-MR 1: Marketing Safeguards

DP-MR 2: Consumer and Employer Purchaser Information Disclosure

DP-MR 3: Consumer Input and Surveys

DP-MR 4: Evaluation of Consumer Survey Data and Feedback

DP-MR 5: Online Access

DP-MR 6: Health Literacy Support for Consumers

DP-MR 7: Consumer Communications Plan

DP-MR 8: Covered Benefit Disclosure

DP-MR 9-10: N/A

# QUALITY MANAGEMENT

DP-QM 1: Quality Management Program

DP-QM 2: Quality Management Program Resources

DP-QM 3: Quality Management Program Requirements

DP-QM 4: Quality Management Committee

DP-QM 5: Quality Improvement Process

DP-QM 6: Selection and Prioritization of Quality Improvement

**Projects** 

DP-QM 7: Three [3] Clinical Quality Improvement Projects for Dental

Plans

DP-QM 8: Data Management

DP-QM 9: Quality Improvement Project Requirements

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#### DENTAL PLAN OPERATIONS

DP-OPS 1: General Telephone Access to Customer Service DP-OPS 2: Urgent Telephone Access to Customer Service

DP-OPS 3: One-on-One Customer Service DP-OPS 4: Scope of Customer Service

DP-OPS 5: Provider Directory Updates

DP-OPS 6: Consumer Notification Regarding PCP Status

DP-OPS 7-11: N/A

DP-OPS 12: Breach Notification and Management

## **COMPLIANCE PROGRAM**

DP-CP 1: Compliance Program: Internal Controls

### MENTAL HEALTH PARITY

DP-MHP 1-3: N/A

### HEALTH UTILIZATION MANAGEMENT

DP-HUM 1: Review Criteria Requirements

DP-HUM 2: Access to Review Staff

DP HUM 3: Review Service Communication and Time Frames

DP-HUM 4: Review Service Disclosures

DP-HUM 5-6: N/A

DP-HUM 7: Limitations in Use of Non-Clinical Staff DP-HUM 8: Pre-Review Screening Staff Oversight

DP-HUM 9: Preview-Review Screening Non-Certifications

DP-HUM 10: Initial Clinical Reviewer Qualifications

DP-HUM 11: Initial Clinical Reviewer Resources

DP-HUM 12: Initial Clinical Reviewer Non-Certifications

DP-HUM 13: Peer Clinical Review Cases

DP-HUM 14: Peer Clinical Reviewer Qualifications

DP-HUM 15: Drug Utilization Management Reviewer Qualifications

DP-HUM 16: Prospective, Concurrent and Retrospective Drug

Utilization Management

DP-HUM 17: Peer-to-Peer Conversation Availability

DP-HUM 18: Peer-to-Peer Conversation Alternate

DP-HUM 19: Prospective Review Time Frames

DP-HUM 20: Retrospective Review Time Frames

DP-HUM 21: Concurrent Review Time Frames

DP-HUM 22: Certification Decision Notice and Tracking

DP-HUM 23: Continued Certification Decision Requirements

DP-HUM 24: Written Notice of Non-Certification Decisions and Rationale

DP-HUM 25: Clinical Rationale for Non-Certification Requirements

DP-HUM 26: Prospective Review Patient Safety

DP-HUM 27: Reversal of Certification Determinations

DP-HUM 28: Frequency of Continued Reviews

DP-HUM 29: Scope of Review Information

DP-HUM 30: Prospective and Concurrent Review Determinations

DP-HUM 31: Retrospective Review Determinations

DP-HUM 32: Lack of Information Policy and Procedures

DP-HUM 33: Non-Certification Appeals Process

DP-HUM 34: Appeals Process

DP-HUM 35: Appeal Peer Reviewer Qualifications

DP-HUM 36: Drug Utilization Management Appeals: Reviewer

Qualifications

DP-HUM 37: Reviewer Attestation Regarding Credentials and

Knowledge

DP-HUM 38: Expedited Appeal Process Time Frame

DP-HUM 39: Standard Appeal Process Time Frame

DP-HUM 40: Written Notice of Upheld Non-Certifications

DP-HUM 41: Appeal Record Documentation

DP-HUM 42: Independent (External) Review Process

# MEASURES REPORTING

DP-RPT 1: Reporting Mandatory Performance Measures to URAC DP-RPT 2: Reporting Exploratory Performance Measures to URAC

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#### Re: New Regulatory Compliance Standard

Dear URAC Prospects and Clients,

As the nation's leading health care accreditor, URAC values patient care and safety first. When we discover an improvement opportunity that could enhance patient safety within our standards, we work quickly to incorporate the additional knowledge into our programs.

Therefore, URAC has introducing a new regulatory compliance Standard. Effective immediately, this new Standard will apply to all current, non-deemed applications, accreditations and certifications. Although we expect immediate compliance with this Standard, we will not be asking for any additional documentation at this time. As new versions of programs are released, this Standard will be built into the program requirements and documentation will be submitted on Desktop.

Attached you will find the Standard language (see Attachment A). As a requirement of this Standard, organizations must remain in good standing with any issuing body/agency for all permits, licenses, registrations and/or charters held by the organization. If at any time during the accreditation or certification cycle this Standard is identified as "Not Met," the finding(s) will be presented to the Accreditation Committee for review and final determination of status.

If you have any further questions, please reach out to Product Development Department at <a href="mailto:productdevelopment@urac.org">productdevelopment@urac.org</a>.

Sincerely, Jenn Richards, PharmD, JD, CSP Product Development Principal

Email: productdevelopment@urac.org



# Attachment A: URAC's New Regulatory Compliance Standard

# **Standard: Regulatory Compliance**

The organization maintains compliance with applicable jurisdictional laws and regulations.

# **Regulatory Compliance**

The organization:

a. Maintains compliance with applicable laws, regulations and requirements from any relevant jurisdictions