

Are you ready for URAC's Clinically Integrated Network Accreditation?



Your organization maintains a CIN program established to improve health care quality and reduce health care costs.

DOCUMENT your CIN program's philosophy, mission, goals, scope and structure.



CIN provider leadership establishes performance metrics to help the CIN determine if it is achieving program goals.

ANALYZE that staff have implemented HIPAA-compliant processes and know how to detect, contain and correct privacy and security violations and data breaches.



Information technology supports CIN operational needs and integration.

ESTABLISH information technology that permits data sharing regardless of a CIN provider's source system.



Providers actively participate in CIN management and operations.

ENSURE CIN providers' learning and development are relevant to their leadership and/or clinical roles in the CIN.



The CIN's provider dispute resolution mechanism is available to any participating provider.

IMPLEMENT a provider dispute resolution mechanism reviewed with the involvement of CIN provider leadership at least once every three years.



The CIN's financial incentive program aligns with CIN program goals.

ANALYZE reports used to track the CIN's financial incentive program.



CIN provider leadership establishes metrics on provider adherence to clinical practice guidelines and protocols.

IMPLEMENT annual review and approval of guidelines, protocols and related metrics.



The CIN achieves clinical integration.

CONFIRM that the CIN has separate comprehensive plans for coordination of care, transitions of care and target population health management, where all plans identify key interventions.



The CIN reports quality improvement plans to leadership.

REPORT to CIN program governance on the performance metrics established in the comprehensive plans for coordination of care, transitions of care and target population health management.



The CIN conducts an annual evaluation of the CIN program.

EVALUATE CIN program effectiveness on an annual basis, taking action to correct problems and updating the CIN program as needed.



For more information, please contact
businessdevelopment@urac.org or 202-216-9413



Are you ready for URAC's Foundational Focus Areas?



The organization tracks jurisdictional laws and regulations applicable to the functions covered by the URAC recognition.

AUDIT compliance with applicable laws and regulations and identify a Compliance Officer.



The organization maintains a quality management program.

DEMONSTRATE through meeting minutes that there is a quality oversight body monitoring metrics and progress in meeting quantifiable goals and overseeing improvement activities.



The organization's information systems management provides for data integrity and implements encryption strategies for digital information systems.

DOCUMENT how the organization supports data accuracy and traceability. Encrypt digital data while in transit and at rest.



The organization maintains executed agreements with entities that cover delegated functions.

MAINTAIN a list of contractors performing functions covered by the URAC standards. Confirm that there is an executed delegation agreement and that at least annual oversight is conducted.



The organization uses a primary source verification (PSV) method for confirming licensure and/or certification prior to hiring staff whose job description requires these credentials.

AUDIT personnel files to confirm PSV of licensure and/or certification prior to hire and no less than every three years or prior to expiration, whichever is sooner.



The organization receives results of employment screening prior to hire and responds appropriately.

AUDIT personnel files to verify background checks are completed prior to hire for employees who handle personal information as part of their job.



The organization designates a senior clinical staff person.

REVIEW the job description or scope of work for clinical leadership and **identify** documentation showing that these individual(s) meet the requirements of their position.



The organization implements a consumer complaint process.

CONFIRM that document(s) describe a complaint process that includes a timeline for processing complaints and requires complaint reporting to the quality oversight body.



The organization's health communication practices demonstrate that consumer materials are in plain language.

IDENTIFY the plain language resources used by the organization as well as the mechanisms used to employ plain language in health communications.



The organization implements consumer marketing and communication practices that safeguard against misrepresentations about services.

DEMONSTRATE that marketing and communication material is reviewed and approved by the requisite personnel as often as needed to maintain accuracy.



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