

## NCQA Corrections, Clarifications and Policy Changes to the 2025 CRPN Standards and Guidelines

*November 18, 2024*

This document includes the corrections, clarifications and policy changes to the 2024 Utilization Management-Credentialing-Provider Network standards and guidelines. NCQA has identified the appropriate page number in the publication and the standard/element head and subhead for each update. Updates have been incorporated into the Interactive Review Tool (IRT). NCQA operational definitions for correction, clarification and policy changes are as follows:

- A **correction (CO)** is a change made to rectify an error in the standards and guidelines.
- A **clarification (CL)** is additional information that explains an existing requirement.
- A **policy change (PC)** is a modification of an existing requirement.
- A **regulatory change (RC)** is a new requirement or a modification of an existing requirement to align with federal regulations.

An organization undergoing a survey under the 2024 standards and guidelines must implement corrections and policy changes within 90 calendar days of the IRT release date, unless otherwise specified. The 90-calendar-day advance notice does not apply to clarifications or FAQs, because they are not changes to existing requirements.

Page	Standard/Element	Head/Subhead	Update	Type of Update	IRT Release Date
17	Policies and Procedures—Section 2: The Accreditation Process	Resurvey	Replaced “above 55%” with “greater than or equal to 55%” in the first and second paragraphs under <i>Resurvey</i> .	CL	11/28/24
34	Policies and Procedures—Section 3: The Survey Process	File review universe	Add the following text to the end of the last sentence of the <i>Note</i> : (i.e., a single legal entity conducts functions centrally and on behalf of local applicable accreditable entities).	CL	11/18/24
72	CR 3, Element C	Element stem	Revise the factor 5 text to read: Annually audits each delegate’s credentialing files for inappropriate documentation and inappropriate updates to credentialing information.	CO	11/18/24
88	CRA 1, Element A	Explanation—Factor 1	Replace “certified nurse midwife” with “physician assistant” in the last bullet to read: <ul style="list-style-type: none"> <li>• Other medical practitioners who may be within the scope of credentialing (e.g., physician assistant).</li> </ul>	CO	11/18/24
106	CRA 4, Element A	Explanation—Factor 5	Replace “120 calendar days” with “180 calendar days” in the explanation to read: <i>Verification time limit: 180 calendar days.</i> <b>Note:</b> <i>The 180-calendar-day verification time limit applies to files processed by the organization or its delegate(s) on or after July 1, 2025. Files processed before July 1, 2025, are scored against the previous verification time limit requirement of 365 calendar days.</i>	CO	11/18/24

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108	CRA 4, Element B	Explanation	Add the following as the third paragraph under the explanation: The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.	CL	11/18/24
109	CRA 4, Element B	Explanation—Factor 2	Replace the current factor 2 explanation with the following text: <b>Factor 2: Sources for Medicare/Medicaid sanctions</b> The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources: <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul> The organization obtains Medicare sanction information from the following sources: <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul>	CL	11/18/24
109	CRA 4, Element B	Explanation—Factor 3	Replace the current text of the factor 3 explanation with the following text: <b>Factor 3: Sources for Medicare/Medicaid exclusions</b> The organization obtains Medicaid exclusion information from each of the following sources: <ul style="list-style-type: none"> <li>• The state Medicaid agency.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul> The organization obtains Medicare exclusion information from any of the following sources: <ul style="list-style-type: none"> <li>• Medicare Exclusion Database.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul>	CL	11/18/24
110	CRA 4, Element B	Exceptions	Remove the second paragraph, which reads: Factors 2 and 3 are NA for commercial and Exchange product line.	CL	11/18/24

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112	CRA 5, Element A	Explanation	Add the following as the third paragraph under the explanation: The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.	CL	11/18/24
112	CRA 5, Element A	Explanation—Factor 1	Replace the current factor 1 explanation with the following text: <b>Factor 1: Sources for Medicare/Medicaid sanctions</b> The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources: <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul> The organization obtains Medicare sanction information from the following sources: <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul>	CL	11/18/24
112	CRA 5, Element A	Explanation—Factor 2	Replace the current factor 2 explanation with the following text: <b>Factor 2: Sources for Medicare/Medicaid exclusions</b> The organization obtains Medicaid exclusion information from each of the following sources: <ul style="list-style-type: none"> <li>• The state Medicaid agency.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul> The organization obtains Medicare exclusion information from any of the following sources: <ul style="list-style-type: none"> <li>• Medicare Exclusion Database.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul>	CL	11/18/24
132	CRC 1, Element B	Summary of Changes	Remove the text that reads, “Added a requirement to the related information section for organization’s policies and procedures to specify verification of fellowship if delegated by clients and the client communicates practitioner fellowship.”	CO	11/18/24

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143	CRC 6, Element A	Explanation—Work history	<p>Replace “90 calendar days” with “120 calendar days” in the explanation to read: <i>Verification time limit:</i> 120 calendar days.</p> <p><b>Note:</b> <i>The 120-calendar-day verification time limit applies to files processed by the organization or its delegate(s) on or after July 1, 2025. Files processed before July 1, 2025, are scored against the previous verification time limit requirement of 365 calendar days.</i></p>	CL	11/18/24
148	CRC 9, Element A	Summary of Change	<p>Remove the following summary of change: Added an exception for commercial and Exchange product lines.</p>	CO	11/18/24
149	CRC 9, Element A	Explanation	<p>Add the following as the third paragraph of the explanation: The organization verifies sanction and exclusion information (from factors 1 and 2) for all product lines.</p>	CL	11/18/24
149	CRC 9, Element A	Explanation—Factor 1	<p>Replace the current factor 1 explanation with the following text: <b>Factor 1: Sources for Medicare/Medicaid sanctions</b> The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources:</p> <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul> <p>The organization obtains Medicare sanction information from the following sources:</p> <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul>	CL	11/18/24
149	CRC 9, Element A	Explanation—Factor 2	<p>Replace the current factor 2 explanation with the following text: <b>Factor 2: Sources for Medicare/Medicaid exclusions</b> The organization obtains Medicaid exclusion information from each of the following sources:</p> <ul style="list-style-type: none"> <li>• The state Medicaid agency.</li> </ul>	CL	11/18/24

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			<ul style="list-style-type: none"> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul> <p>The organization obtains Medicare exclusion information from any of the following sources:</p> <ul style="list-style-type: none"> <li>• Medicare Exclusion Database.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul>		
152	CRC 10, Element A	Explanation—Processing of application and attestation	Replace “90-calendar day” with “120-calendar day” in the <i>Note</i> under <i>Processing of application and attestation</i> .	CO	11/18/24
160	CRC 12, Element B	Explanation	Add the following as the third paragraph of the explanation: The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.	CL	11/18/24
160	CRC 12, Element B	Explanation—Factor 1	<p>Replace the current factor 1 explanation with the following text:</p> <p><b>Factor 1: Sources for Medicare/Medicaid sanctions</b></p> <p>The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources:</p> <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul> <p>The organization obtains Medicare sanction information from the following sources:</p> <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul>	CL	11/18/24
161	CRC 12, Element B	Explanation—Factor 2	<p>Replace the current factor 2 explanation with the following text:</p> <p><b>Factor 2: Sources for Medicare/Medicaid exclusions</b></p> <p>The organization obtains Medicaid exclusion information from each of the following sources:</p>	CL	11/18/24

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			<ul style="list-style-type: none"> <li>• The state Medicaid agency.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul> <p>The organization obtains Medicare exclusion information from any of the following sources:</p> <ul style="list-style-type: none"> <li>• Medicare Exclusion Database.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul>		
163	CRC 12, Element C	Explanation	<p>Add the following as the fourth paragraph of the explanation:</p> <p>The organization verifies sanction and exclusion information (from factors 1-3) for all product lines.</p>	CL	11/18/24
163	CRC 12, Element C	Explanation—Factor 1	<p>Replace the current factor 1 explanation with the following text:</p> <p><b>Factor 1: Sources for Medicare/Medicaid sanctions</b></p> <p>The organization obtains Medicaid sanction information from the State Medicaid agency and from one of the following additional sources:</p> <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul> <p>The organization obtains Medicare sanction information from the following sources:</p> <ul style="list-style-type: none"> <li>• AMA Physician Master File.</li> <li>• FSMB.</li> <li>• NPDB.</li> <li>• SAM.gov.</li> </ul>	CL	11/18/24
163	CRC 12, Element C	Explanation—Factor 2	<p>Replace the current factor 2 explanation with the following text:</p> <p><b>Factor 2: Sources for Medicare/Medicaid exclusions</b></p> <p>The organization obtains Medicaid exclusion information from each of the following sources:</p> <ul style="list-style-type: none"> <li>• The state Medicaid agency.</li> <li>• List of Excluded Individuals and Entities maintained by OIG and available over the internet.</li> </ul>	CL	11/18/24

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