

Requirement	Documentation/Evidence	Δ from 2022
Team-Based Care and Practice Organization (AR-TC)		
AR-TC 1: Staff Involvement in Quality Improvement (TC07)	1. Attestation: Indicate how often does your staff meet to plan and implement quality improvement activities. (Check list)	No Change
Knowing and Managing Your Patients (AR-KM)		
AR-KM 1: Medication Lists (KM15)	1. Report: Enter number of patients from the denominator with an up-to-date medication list (numerator), number of unique patients seen during the reporting period (denominator) and reporting period.	No Change
AR-KM 2 Diversity (KM09)	1. Report: Practices must collect data on diversity and upload report containing information on patients (race, ethnicity, one other aspect of diversity. <i>OPTIONAL in 2023: Sexual orientation and Gender identity reporting. Will be required in 2024.</i>	NEW
Patient-Centered Access and Continuity (AR-AC)		
AR-AC 1 Appointments outside business hours (AC03)	<ol style="list-style-type: none"> (Option 1) Report: Number of appointments outside business hours (numerator), total number of appointments (denominator), and reporting period. (Option 2) Attestation: Appointments Outside of Business Hours at Alternate Clinic. Enter name of clinic/clinician who provides after hours appointments; and how patients are informed about scheduling. 	NEW must pick one option
AR-AC 2 Patient Visits with Clinician/Team (AC11)	1. Report: Enter number of patient visits where the patient was seen by their selected personal clinician or care team (numerator), number of patient visits (denominator), and reporting period.	No Change
Care Management and Support (AR-CM)		
AR-CM 01: Patients for Care Management (CM04)	<ol style="list-style-type: none"> Report: Enter number of patients in the denominator who have a complete care plan (numerator); number of patients enrolled in care management (denominator), and reporting period. Attestation: Total number of patients unique patients seen in the prior 12 months. 	No Change in items reported; slight change in reporting format
Care Coordination and Care Transitions (AR-CC):		
AR-CC 01: Care Coordination with External Facilities (CC14-16)	1. Attestation: Documented processes in place for: Systematically identifying unplanned hospital and emergency department (ED) visits; Sharing clinical information with admitting hospitals and EDs; and contacting all patients following a hospital admission or ED visit to arrange follow-up care, if clinically indicated.	NEW
AR-CC 02 Specialist Referral (CC06)	1. Attestation: List the top three specialties the practice refers to.	Informational
Performance Measurement and Quality Improvement (AR-QI): AR-QI 1-4 are required; AR-QI 5-6 informational		
AR-QI 01: Clinical Quality Measures (QI 01)	<ol style="list-style-type: none"> Report: Enter measure data from the Measures Reporting tile on the Organization Dashboard (5 measures across 4 categories) ~If the practice is utilizing a standardized measure outlined in Appendix 5, it may choose the measure from the drop-down menu in Q-PASS and the measure parameters will populate. ~If the practice is utilizing a measure not listed in the standardized measure table, enter text in fields manually. 	No Change Note: NCQAs Standardized Measures will be REQUIRED in 2024.
AR-QI 02: Resource Stewardship Measures (QI 02)	<ol style="list-style-type: none"> Report: Enter measure data from the Measures Reporting tile on the Organization Dashboard (2 measures - 2 different categories) ~If the practice is utilizing a standardized measure outlined in Appendix 5, it may choose the measure from the drop-down menu. ~If the practice is utilizing a measure not listed in the standardized measure table, enter text in fields manually. 	No Change Note: NCQAs Standardized Measures will be REQUIRED in 2024.
AR-QI 03: Patient Experience Feedback (QI04)	1. Report: Enter measure data from the Measures Reporting tile on the Organization Dashboard. (1 measures from one of 4 categories)	No Change

Crosswalk: Annual Reporting Requirements vs. PCMH Criteria

AR Requirements		Site-specific vs. Shared	PCMH Criteria	
Team-Based Care and Practice Organization (AR-TC)				
AR-TC 1: Staff Involvement in Quality Improvement	Required	Shared	TC 07	Core
Knowing and Managing Your Patients (AR-KM)				
AR-KM 1: Medication Lists	Required	Site-specific	KM 15	Core
AR-KM 2: Diversity	Required	Site-specific	KM 09	Core
Patient-Centered Access and Continuity (AR-AC)				
AR-AC 1: Appointments Outside Business Hours	Required	Shared	AC 03	Core
AR-AC 2: Patient Visits with Clinician/Team	Required	Site-specific	AC 11	Core
Care Management and Support (AR-CM)				
AR-CM 1: Care Plans for Care Managed Patients	Required	Site-specific	CM 04	Core
Care Coordination and Care Transitions (AR-CC)				
AR-CC 1: Hospital and ED Care Coordination	Required	Shared	CC 14-16	Core
AR-CC 2: Specialist Referrals	Informational	Shared	CC 06	Elective
Performance Measurement and Quality Improvement (AR-QI)				
AR-QI 1: Clinical Quality Measures	Required	Site-specific	QI 01	Core
AR-QI 2: Resource Stewardship Measures	Required	Site-specific	QI 02	Core
AR-QI 3: Patient Experience Measure	Required	Site-specific	QI 04	Core

**Items highlighted in yellow are
NEW or Revised
AR Requirements in 2023**

Abbreviated Overview of 2022 PCMH Annual Reporting (AR) Requirements and Comparison to 2021

Crosswalk: Annual Reporting Requirements vs. PCMH Criteria
 PCMH Annual Reporting Requirements Period 01/01/2022-12/31/2022

AR Requirements		PCMH Criteria	
Team-Based Care and Practice Organization (AR-TC)			
AR-TC 1: Staff Involvement in Quality Improvement	Required	TC 07	Core
Knowing and Managing Your Patients (AR-KM)			
AR-KM 1: Medication Lists	Required	KM 15	Core
AR-KM 2: Clinical Decision Support	Required	KM 20	Core
Patient-Centered Access and Continuity (AR-AC)			
AR-AC 1: Timely Clinical Advice by Telephone	Required	AC 04	Core
AR-AC 2: Patient Visits with Clinician/Team	Required	AC 11	Core
Care Management and Support (AR-CM)			
AR-CM 1: Care Plans for Care Managed Patients	Required	CM 04	Core
Care Coordination and Care Transitions (AR-CC)			
AR-CC 1: Care Coordination Process	Required	CC 01	Core
AR-CC 2: Referral Management Process	Required	CC 04	Core
AR-CC 3: Lab and Imaging Test Tracking	Option	CC 01	Core
AR-CC 4: Referral Tracking	Option	CC 04	Core
Performance Measurement and Quality Improvement (AR-QI)			
AR-QI 1: Clinical Quality Measures	Required	QI 01	Core
AR-QI 2: Resource Stewardship Measures	Required	QI 02	Core
AR-QI 3: Patient Experience Measures	Required	QI 04	Core

Crosswalk: Annual Reporting Requirements vs. PCMH Criteria
 PCMH Annual Reporting Requirements Period 01/01/2023-12/31/2023

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Team-Based Care and Practice Organization (AR-TC)				
AR-TC 1: Staff Involvement in Quality Improvement	Required	Shared	TC 07	Core
Knowing and Managing Your Patients (AR-KM)				
AR-KM 1: Medication Lists	Required	Site-specific	KM 15	Core
AR-KM 2: Diversity	Required	Site-specific	KM 09	Core
Patient-Centered Access and Continuity (AR-AC)				
AR-AC 1: Appointments Outside Business Hours	Required	Shared	AC 03	Core
AR-AC 2: Patient Visits with Clinician/Team	Required	Site-specific	AC 11	Core
Care Management and Support (AR-CM)				
AR-CM 1: Care Plans for Care Managed Patients	Required	Site-specific	CM 04	Core
Care Coordination and Care Transitions (AR-CC)				
AR-CC 1: Hospital and ED Care Coordination	Required	Shared	CC 14-16	Core
AR-CC 2: Specialist Referrals	Informational	Shared	CC 06	Elective
Performance Measurement and Quality Improvement (AR-QI)				
AR-QI 1: Clinical Quality Measures	Required	Site-specific	QI 01	Core
AR-QI 2: Resource Stewardship Measures	Required	Site-specific	QI 02	Core
AR-QI 3: Patient Experience Measure	Required	Site-specific	QI 04	Core

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