Heart Failure Program Accreditation Consulting (ACC and Joint Commission)

Last reviewed October 2026 · https://www.integralhs.com/heart-failure-program-accreditation

What to have ready

This is the list we would ask for first, each item tied to the text that requires it.

- A signed ACC Accreditation / Certification Services Agreement that names the HF program, if you take the ACC route (ACCF, Accreditation Services Program Requirements, REV 5.1 (document opened October 3, 2026)).
- Named contacts for each program. REV 5.1 lists a Key Contact, an Executive Sponsor, an Invoicing/Payment Contact, a Marketing Contact and at least one Accreditation User, each with a unique email address (ACCF, Accreditation Services Program Requirements, REV 5.1 (document opened October 3, 2026)).
- Capacity to finish the Baseline Gap Analysis on time. REV 5.1 expects it within 60 days of the day ACCF emails the Key Contact that access to the tool has begun (ACCF, Accreditation Services Program Requirements, REV 5.1 (document opened October 3, 2026)).
- A plan to file the application within ACC's window, which is 12 months from access to the online tool (ACCF, Accreditation Services Program Requirements, REV 5.1 (document opened October 3, 2026)).
- A data source for HF. REV 5.1 calls for active data entry into ACC's HF accreditation conformance database, following the HF user guide (ACCF, Accreditation Services Program Requirements, REV 5.1 (document opened October 3, 2026)).
- A decision on reports. REV 5.1 lets a facility use reports from a nationally recognized database or reports it builds itself, and the ACC specialist judges during the application phase whether they cover the required data elements (ACCF, Accreditation Services Program Requirements, REV 5.1 (document opened October 3, 2026)).
- A named outpatient partner, if you pursue HF with Outpatient Services (ACC [https://cvquality.acc.org/accreditation/services/HF]).
- For The Joint Commission route, the three parts of its core requirements: standards, clinical practice guidelines and performance measurement. The program picks its own measures (Joint Commission, cardiac certification [https://www.jointcommission.org/en-us/certification/cardiac], page opened October 3, 2026).
- A measure routine that collects data every month and sends it to The Joint Commission every quarter through its Certification Measure Information Process (CMIP) (Joint Commission, Disease-Specific Care [https://www.jointcommission.org/en-us/certification/disease-specific-care], page opened October 3, 2026).
- Patient records that let a reviewer follow individual patients through the whole program (Joint Commission, certification process [https://www.jointcommission.org/en-us/certification/process], page opened October 3, 2026).