

Spring 2017 Newsletter

July 13, 2017 Revised Medicare COP's

Starting July 13, 2017, Medicare has made changes to its Conditions of Participation. These changes were put into place to ensure more direct patient participation by in their care by the patient themselves, in an effort to achieve better quality outcomes.

The changes include:

- 1. Refined definition of verbal orders
- 2. Updated Patient Bill of Rights
- 3. Performance Improvement will be rolled into QAPI
- 4. Enhanced Patient Care Coordination

- 5. Refined Agency Administrator definition
- 6. Revised responsibilities of the Governing Board regarding QAPI
- 7. PAC committees will cease to be a requirement
- 8. Redefined requirements for patient education efforts
- 9. HHA's no longer required to have a physician
- 10. Incorporation of prevention of infectious disease to infection control procedures
- 11. Therapists will be empowered to determine homehealth aide assignments
- 12. Updated Home Health
 Aide training regarding any
 lapse in service exceeding
 24 months
- 13. Clinical Manager now must be available during all operating hours
- 14. Addition of Clinical Manager
- 15. Best Practices

...And over 150 more changes!

Survey Challenges

There are always questions regarding the survey process and what to expect, so we've decided to take some time to answer some of those pressing questions we hear most often.

"What will they be looking for?"
They will be reviewing all of your

They will be reviewing all of your policies to be sure that you are following them. Anything written in your company policies, which have been reviewed and approved for operation by your PAC and governing body, you must be actually adhering to!!

"What will they be looking at when they visit our patients?"

They will be looking at infection control practices handwashing and bag technique, an up to date in home plan of care, and up to date (and dated) medication sheet in the home.

"Once my survey is complete will they come back?"

Surveyors can come back at any time -generally within the first 13 months after your visit or 30 days after depending on the results of your initial survey.

"Does it cost us money for them to return?"

Yes, they will charge you for your visits. They bill you (with a due date 60 days out) after the visit has taken place.

Trainings available through CHC:

AFC Training Pre-Claim Review COP Updates New QAPI Education

* Seating is limited, call to reserve your space today! 603-508-6172

MassHealth Continues its Moratorium

Effective February 15, 2017

CMS granted approval for EOHHS and MassHealth to extend the temporary moratorium through August 11, 2017. The moratorium was expanded to include HCBS (Home and Community Based Services) Waivers as well. For more information, visit

http://www.mass.gov/eohhs/provider/insurance/masshealth/aca/aca-program-integrity-provisions.html

What's New at CHC

Certified Homecare Consulting now has the long awaited add on and stand alone Pediatric Home Health policies available for purchase! Policies now available to add on to your start up or existing home health agency include:

- Behavioral Health (Rev. 2016)
- Infusion Therapy
- Palliative Care
- Pediatrics

Call today to start growing your earning potential!

