



RHC Development from Start to Finish

Patty Harper, RHIA, CHC®

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Before Survey

How Do You Begin the Process

Administrative Steps to Take Before RHC Certification

1

- Establish Business Entity
- Secretary of State Paperwork

2

- Obtain EIN/TIN
- SS-4 Online IRS Application

3

- Obtain RHC NPI
- NPPES Online Application

4

- Financial Feasibility Study (if needed)
- Demographics, Payer Mix, Utilization, Reimbursement Pro Forma

5

- Evaluate your systems NOW to determine if you can do Medicare split-billing.
- For PBRHC, can you accomplish split-billing or the processes need.

Administrative Steps to Take Before RHC Certification

5

- Obtain CLIA Certificate
- CMS Form 116
- Must match RHC name and address

6

- Obtain Other Required Licenses or Permits
- State or County Specific (may be optional)
- State RHC License may come after Step 7 (only 4 states)

7

- Determine RHC Internal Organization
- Need for 855A and Policy Development

Administrative Steps to Take Before RHC Certification

8

- Submit 855A to MAC: Paper or through PECOS
- Check your email and spam/junk every day or so
- Get application approval letter; will say pending

9

- Survey Readiness (Engage with AO)
- Policy Development
- Compiling Internal Evidence Documents

10

- Additional Forms for CMS
- CMS-29, CMS-1561A (triplicate) and Online Compliance Attestation for PBRHC



Policy Organization, Training & Tracking



Administration (7)	Environmental (16)
<p><u>Regulatory Compliance</u></p> <p>Policy: 100 T V E</p> <p>Evidence (4)</p> <ul style="list-style-type: none"> • Crossroads_100-A_855A • Crossroads_100-B_State License • Crossroads_100-C_CLIA Certificate • Crossroads_100-D_Occupancy License 	<p><u>Physical Plant Safety: General</u></p> <p>Policy: 200 T V E</p> <p>Evidence (3)</p> <ul style="list-style-type: none"> • Crossroads_200-A_Physical Plant Licenses, Inspections, Permits • Crossroads_200-B_Floor Plan Exits • Crossroads_200-C_Insurance Information
<p><u>Formal Corporate or Organization Compliance Plan</u></p> <p>Policy: 105 T V E</p> <p>Evidence (3)</p> <ul style="list-style-type: none"> • Crossroads_105-A_Compliance Plan • Crossroads_105-B_Standards of Conduct • Crossroads_105-C_Standards of Conduct Notice 	<p><u>Preventive and Required Maintenance</u></p> <p>Policy: 210 T V E</p> <p>Evidence (2)</p> <ul style="list-style-type: none"> • Crossroads_210-A_Bio-Med Service Contract • Crossroads_210-B_BioMed Sticker Example_06252019
<p><u>Organizational Structure and Ownership</u></p> <p>Policy: 110 T V E</p> <p>Evidence (1)</p> <ul style="list-style-type: none"> • Crossroads_110-A_Ownership Statement 	<p><u>Building Sanitation and Cleanliness</u></p> <p>Policy: 215 T V E</p> <p>Evidence (1)</p> <ul style="list-style-type: none"> • Crossroads_215-A_Sanitation
<p><u>Organizational Chart Structure</u></p> <p>Policy: 120 T V E</p> <p>Evidence (4)</p> <ul style="list-style-type: none"> • Crossroads_120-A_Organizational Structure • Crossroads_120-B_Org Chart • Crossroads_120-C_Current Board 	<p><u>Storage, Handling & Administration of Drugs, Biologicals, and Pharmaceutic...</u></p> <p>Policy: 220 T V E</p> <p>Evidence (3)</p> <ul style="list-style-type: none"> • Crossroads_220-A_Temperature Logs • Crossroads_220-B_Sample Medications Log • Crossroads_220-C_Safe Injection Poster_06252019

Policy Organization and Policy Format Examples

- Systematically Organize Policies
- Number Policies
- Have Standard Format
- Show Effective Dates



Use a standard format for all written policies.

Organizational Structure and Ownership		
J Tag References: J-0060, J-0061, J-0062, J-0081, J-0084, J-0086 § References: 491.7, 491.8, 491.9	Policy Type: Administrative	Policy Number: 110.00
Adopted or Revised Date: 9/27/2019		

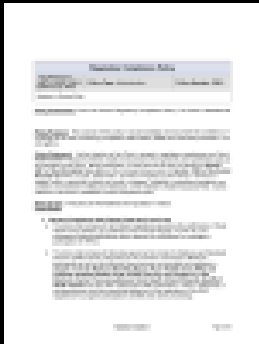
Policy Declaration: This is the Organizational Structure and Ownership Policy of the clinic. The clinic is identified as Crossroads Clinic.

Policy Purpose: The purpose of this policy is to disclose in a written document the organizational structure of the Clinic which is Rural Health Clinic (RHC). Furthermore, the policy is designed to give detailed information about the governance, management and staffing of the clinic.

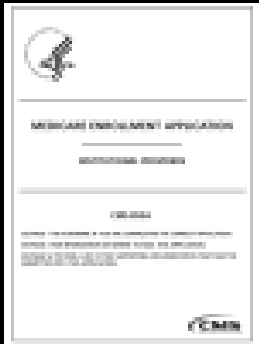
CMS Tag

J- 0011; J-0012; J-0013

Policy



Evidence (4)



Have a system for tracking staff training and policy review

Reminders (28) **User Activity (9)** Policy Activity (45) Recent Policy Content Updates (1)

#	User	Policies Reviewed	Complete (%)
1	Barry Amedee	30	67 %
2	Alice Breaux	44	98 %
3	Noelle Emmerson	0	0 %
4	Alec James	33	73 %
5	Benny Jones	3	
6	Cade Michael	33	73 %
7	Mrs. Surveyor	9	
8	Mary Townsend	22	49 %
9	Julie Witt	1	

Have a system for tracking evidence documents and due dates

TICKLER LIST

Date	Subject	Evidence
10/5/2019	200-C Replace Declaration Sheet on insurance coverage	200-C Property Insurance All 06132019
10/18/2019	290-A Verify exercises are within one-year	290-A Emergency Preparedness Plan All 06132019
11/1/2019	215-A Review all cleaning contracts	215-A Sanitation and Cleaning Contracts All 06132019
11/8/2019	380-A Review the PHI Release Authorization form	380-A Authorization to Release Health Information All 06132019
11/29/2019	410-A Verify current Employment Application	410-A Employment Application All 06132019
12/1/2019	500-A Replace the Clinic's Annual Evaluation	500-A Annual Program Evaluation All 06132019
12/10/2019	290-C Verify current Training Evidence	290-C Emergency Preparedness Training All 06132019
12/10/2019	400-B Replace Employment Poster	400-B Labor Law OSHA Posters All 06132019
12/15/2019	110-A Review Ownership and Disclosure	110-A Ownership and Disclosure Statement All 06132019
1/2/2020	220-A Replace sample temperature logs with current temperature logs	220-A Temp Logs for Refrigerated and Frozen Medications All 06132019
1/6/2020	100-D Renew state license. A check will be required, Don't delay.	100-D State Licensing LA 06132019
1/10/2020	410-C Update Employee Training Records	410-C Employee Training All 06132019
1/15/2020	130-C Ensure OCR Notice and Taglines are correct	130-C OCR Language Translation Links All 06132019
2/1/2020	100-A Review 855A to make sure the persons on the 855A are still in the same roles	100-A CMS 855A Application All 06132019
2/4/2020	290-B Update Emergency Preparedness Risk Assessment	290-B Emergency Preparedness Risk Assessment All 06132019
2/5/2020	390-A Update HIPAA Risk Assessment	390-A IT Related Documents All 06132019
3/1/2020	600-B Review / Replace Consent Forms	600-B Consent Forms All 06132019
4/1/2020	220-C Verify Medication Safety Poster in on the wall in the Nursing Station	220-C-Medication Safety Poster All 06132019
4/10/2020	200-A Verify current inspections	200-A Physical Plant Licenses, Inspections, and Permits All 06132019



After Survey

What Comes Next?

Processes after the RHC Survey

It can take 3-12 months after survey to be fully paid as an RHC by all payers.

A

- If survey deficiencies are present, submit Plan of Correction
- Await acceptance and notice of successful certification survey by **Accrediting Organization**

B

- AO forwards survey package to the **State Agency**
- State Agency may validate information or reach out to clinic
- State Agency response times VARY.

C

- State Agency forwards package to the **CMS Regional Office** for final approval.
- Regional Office processing times VARY. Up to 180 days allowed.
- Can ask for a Congressional inquiry if major delays occur. (Last resort)

Things to Do Before or While Waiting on the Regional Office

- Explore what credentialing/re-credentialing will need to be done with your State Medicaid program and managed plans.
- Understanding the Timing is EVERYTHING!
- Start working with your PM/EHR Vendor and other Partners on System Configuration changes. (Vendor, Clearinghouse, EDI, Billing Company, etc.) You will want to give them a heads-up at the beginning of the RHC development and then circle back to them.

Things to Do Before or While Waiting on the Regional Office

- Make any adjustments to the clinic fee schedule or accounting system to accommodate RHC billing. Examples: Adding revenue codes, mapping charges to the GL, creating new cost center, adding RHC-specific codes.
- Set up workflow for RHC processes that need cost report recordkeeping. (vaccine logs, bad debt, carve outs)
- Educate your coding & billing staff or partners on issues specific to RHCs.
- Do provider training on changes to coding and billing.

Processes after the RHC Survey

D

- CMS Regional Office approves and **assigns new RHC CCN** (Provider Number)
- Regional Office notifies the Medicare Administrative Contractor (MAC) of new RHC

E

- MAC will acknowledge the new RHC.
- Interim rate established or MAC informs RHC of rate-setting processes.

F

- Apply with Medicaid program or agency to obtain new RHC Medicaid provider number. A few states will allow Medicaid enrollment prior to Medicare CCN. Most do not.
- Interim RHC Medicaid Rate Set (different methodologies for different states).

Processes for submitting RHC Claims

G

- Finish up loose ends on re-credentialing, EDI enrollment and system configuration.

H

- TEST claims prior to sending a full batch.
- Tweak configuration and troubleshoot issues with claim submissions.

I

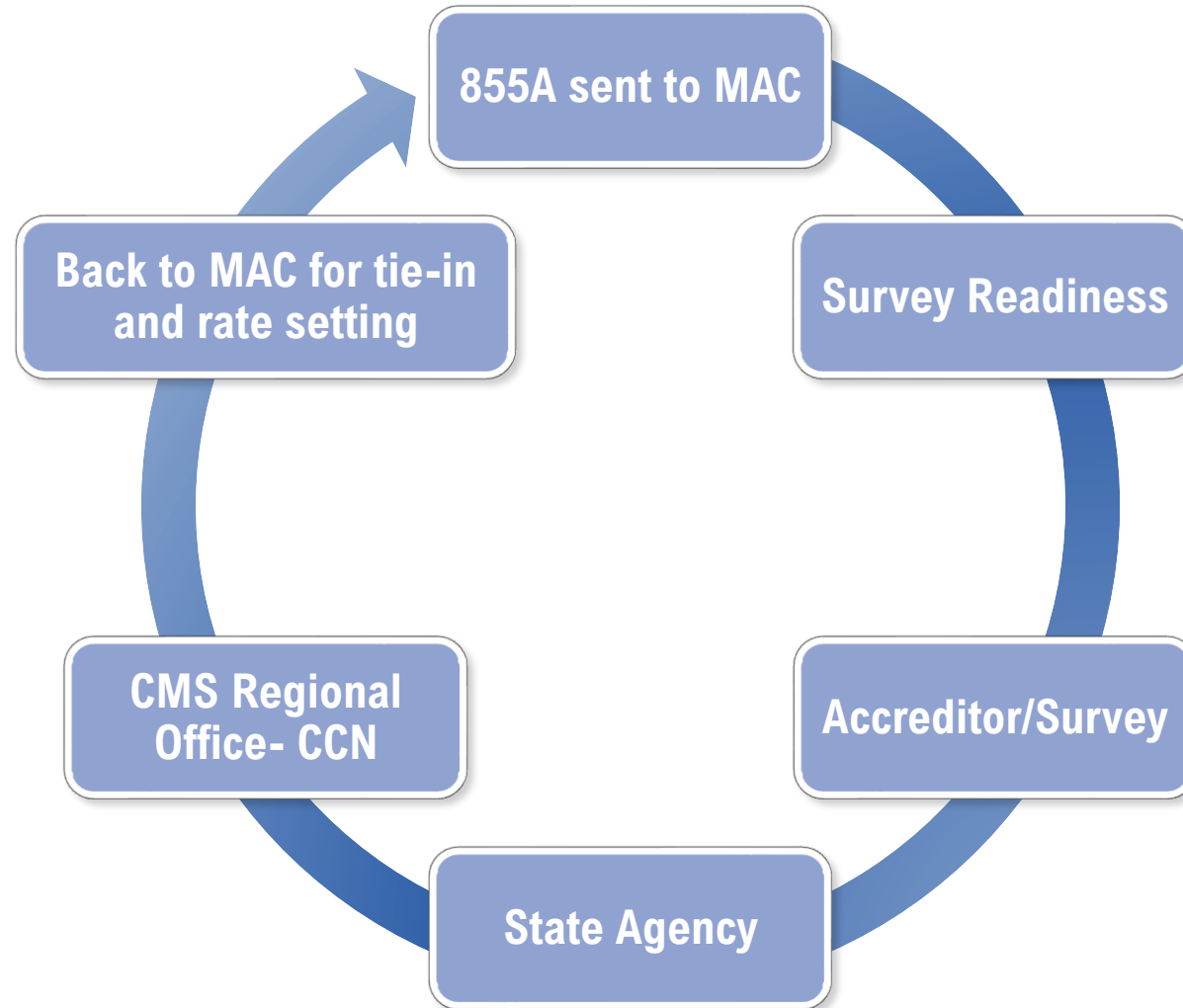
- Monitor RHC remittance advices to identify revenue cycle issues.
- Trouble shoot reimbursement issues.

To Hold Claims or Not?

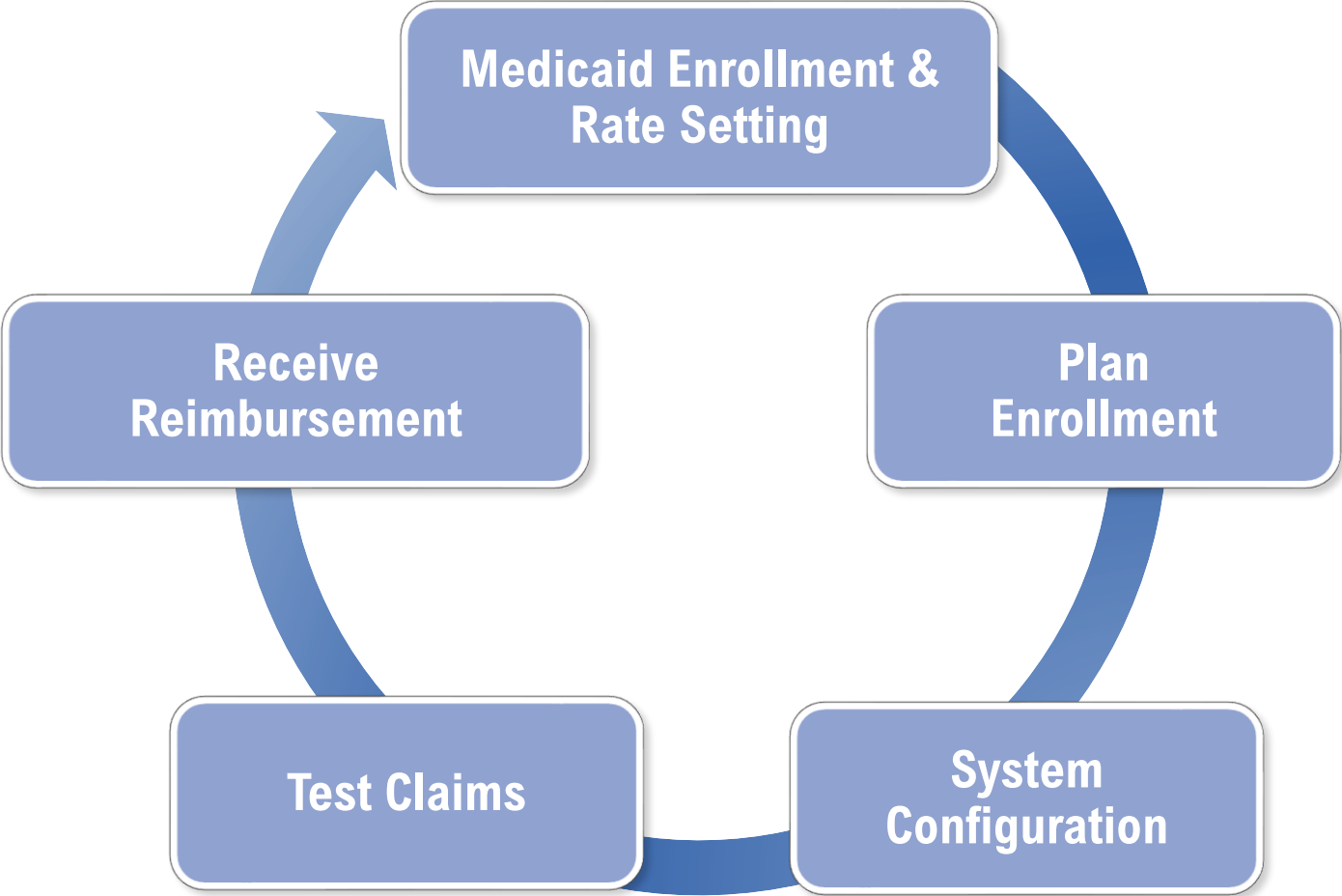
This is a discussion/decision that needs to be made administratively considering many factors. Talk about this in advance to minimize any gap in revenue stream.

Please pull in your financial management team, your RHC consultant, your cost report preparer, your IT department, your vendors and other 3rd party partners.

CMS RHC Process Recap



Process Recap after CCN Tied-In





Maintaining Perpetual Compliance

Don't Let Your Hard Work Go To Waste

- Follow your policies on the required intervals for training, performance evaluations, quality projects, chart review, policy review and emergency preparedness.
- Replace survey evidence documents to ensure compliance.
- Update policies whenever there are changes to the Conditions for Certification, CMS Guidance or your Accreditor's standards.
- Perform your RHC Program Evaluation at least once every two years. Document the findings and any corrective plans.
- Keep your 855A Provider Enrollment and CMS-29 documents updated to report changes in ownership, key personnel and other changes to identifying information.
- Keep in touch with your RHC consultant, cost report preparer and state agency.

Updating Evidence

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Crossroads Clinic (2) / Administration / 100 - Regulatory Compliance

Evidence (Unrestricted): Crossroads_100-C_CLIA Certificate Updated On: 5/1/2019 3:33:07 PM

1 of 1 Automatic Zoom

**CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS
CERTIFICATE OF WAIVER**

LABORATORY NAME AND ADDRESS Crossroads Clinic	CLIA ID NUMBER
LABORATORY DIRECTOR Dr. Michael James	EFFECTIVE DATE 07/10/2015
	EXPIRATION DATE 07/09/2017

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

 **CMS**
CENTERS FOR MEDICARE & MEDICAID SERVICES


Karen W. Dyer, Acting Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

Edit Evidence

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Edit Evidence

Type: Evidence (Unrestricted) × ▾

Name:

Filename: CLIA_Crossroads .pdf

Content:

1 of 1 Automatic Zoom

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS
CERTIFICATE OF WAIVER

LABORATORY NAME AND ADDRESS
Crossroads Clinic

CLIA ID NUMBER

Replace document and set new reminder

Evidence Upload: *Uploading Protected Health Information (PHI) is strictly prohibited!*
The file size may not exceed 2MB.

No file chosen

Replace evidence document

Is Active?:

Clinic:

Set a Reminder?:

Set email reminder

Date:

Subject:

Message:

Other Items to Keep Up With

- Local inspections
- Fire extinguisher inspections
- Essential equipment inspections
- Any staff or provider training that is required annually or periodically
- Any professional licenses or certifications
- Continuing education
- Employee Health
- Credentialing and revalidations
- Drug and Supply expirations

Questions or Comments

Patty Harper, RHIA, CHTS-PW, CHTS-IM, CHC®

InQuiseek Consulting

Pharper@inquiseek.com

318-243-2687



Patty Harper is CEO of InQuiseek Consulting, a healthcare consulting company based in Louisiana. She has over 24 years of healthcare experience in the areas of healthcare finance & reimbursement, health information management, compliance, and practice management. She began her healthcare career as a hospital controller and reimbursement analyst. Patty holds a B.S. in Health Information Administration (cum laude) from Louisiana Tech University. She is credentialed through AHIMA as a RHIA, CHTS-IM, and CHTS-PW. Patty successfully completed AHIMA's ICD-10 Academy and has previously been recognized as an ICD-10 Trainer. She is also Certified in Healthcare Compliance (CHC®) thorough the Compliance Certification Board. Patty is a frequent speaker and contributor for national, state and regional and rural healthcare associations on these and other reimbursement-related topics. She has held memberships regional, state and national organizations throughout her healthcare career including NARHC, NRHA, AHIMA, MGMA, and HFMA. Patty currently serves on the Board of NARHC.

