



ACCREDITATION RENEWAL RESOURCES



Protect Yourself with ACHC Accreditation

Accreditation is a valuable tool to optimize and strengthen your organization. It also can help you maintain compliance in an ever-changing regulatory environment. Choosing Accreditation Commission for Health Care (ACHC) to complete your Medicare recertification survey can significantly reduce your risk of having an enforcement remedy imposed upon your hospice agency.

ACHC can help. To avoid fines that can total thousands of dollars per day, an essential strategy is a strong compliance program achieved through earning and maintaining ACHC Accreditation. Since ACHC Standards are written for providers by providers and incorporate the Centers for Medicare & Medicaid Services (CMS) Medicare Conditions of Participation (CoPs), choosing to become accredited reduces the risk of financial penalties or enforcement remedies being imposed.

What are the enforcement remedies that CMS has the authority to impose?

Section 1822(c)(5)(B) of the Social Security Act authorizes the Secretary of Health and Human Services to create a Special Focus Program for poor-performing hospice providers. The program allows for enforcement penalties against noncompliant hospice providers when deficiencies are identified during survey. The purpose is to ensure prompt compliance with the Medicare Conditions of Participation in order to protect the health and safety of patients receiving hospice services.

One or more sanctions can be imposed when noncompliance with one or more Conditions of Participation has been identified through a Medicare recertification survey or a complaint survey has been conducted by the state.

Available remedies include:

- Civil monetary penalties in an amount not to exceed \$11, 413.00 for each day of noncompliance.
- Suspension of all or part of the payments.
- Appointment of temporary management of the hospice agency.
- Directed Plan of Correction.
- Directed in-service training.

The factors considered in the determination of an enforcement remedy/remedies include:

- The extent to which the deficiencies pose immediate jeopardy to patient health and safety.
- The nature, incidence, manner, degree, and duration of the deficiencies or noncompliance.
- The presence of repeat deficiencies, the hospice agency's overall compliance history, and any history of repeat deficiencies at either the parent location or any multiple location.
- The extent to which the deficiencies are directly related to a failure to provide quality patient care.



- The extent to which the hospice agency is part of a larger organization with performance problems.
- An indication of any system-wide failure to provide quality care.

How ACHC Can Support You

In addition to the widely recognized benefits of accreditation, here are examples of how ACHC will help you avoid these sanctions:

- Condition-level and standard-level violations cited during any on-site survey conducted by ACHC are not subject to the alternative sanctions.
- For providers who have deemed status, Centers for Medicare & Medicaid Services (CMS) conducts on-site surveys only for a complaint, significantly limiting the risk of an on-site visit during which sanctions could be imposed.
- New hospice agencies are frequently less familiar with CMS requirements. ACHC providers have access to a variety of resources, as well as a personal Account Advisor and Surveyors with industry-specific experience aimed at helping them before, during, and after the accreditation process.

Use the Annual Compliance Checklists to assist you in maintaining compliance with the CoPs along with the ACHC Accreditation Standards. These checklists, along with the additional survey preparation materials available on the ACHC customer portal, will help you determine if your organization is in compliance with applicable local, state, and federal laws and regulations and will assist in identifying issues of non-compliance that can be corrected before your renewal survey. Using the Plan of Correction (POC) template will allow you to develop and implement a POC to monitor your compliance.

Six to nine months before the expiration of your accreditation, complete your renewal application and prepare your hospice agency for your renewal survey. Using the data gathered from your quarterly medical record audits, your personnel record audits, the annual Compliance Checklists, the Items Needed for On-Site Survey tool, and the Survey Checklist – Personnel Files audit tool will allow you to have a comprehensive assessment of your hospice agency's preparedness.

Need Extra Assistance?

ACHC recognizes the important role education plays in helping customers achieve accreditation, which is why we have developed and compiled numerous resources to assist you with the initial and renewal accreditation process.

Creating a customer portal account allows you 24/7 access to free educational resources, including our monthly Did You Know emails, which you can print and share with your staff; ACHC tools and resources; and CMS information. You can locate these resources and more by logging in to your account at [achc.org](https://www.achc.org).

ACHCU

ACHCU, the educational division of ACHC, is committed to your agency's success in preparing for and maintaining accreditation through a full range of educational resources, such as:

- The *ACHC Accreditation Guide to Success* workbook.
- Survey Readiness Packets.
- Survey Prep workshops.

- Program-specific webinars, which are free to current ACHC customers.
- Gap Analysis (virtual or on-site).

You can locate these resources and many more at [ACHCU.com](https://www.achcu.com).

HealthTrainU

HealthTrainU™ helps ACHCU achieve its goal to provide more than accreditation assistance. This platform helps us provide industry-relevant training, management, and compliance resources for managers and students. Courses also offer continuing education units (CEUs) to meet relevant annual training requirements.

You can locate more information on HealthTrainU at [healthtrainu.com](https://www.healthtrainu.com).

ACHC.org

ACHC also strives to keep you up to date on the latest state-specific regulations. The Regulatory Updates page on [achc.org](https://www.achc.org) allows you to check on state- and program-specific proposed and adopted regulations as well as up-to-date CMS information. Please use the information we provide to supplement your other sources of regulatory information and not as your only source. You can locate this resource at [achc.org/regulatory-updates](https://www.achc.org/regulatory-updates).

Account Advisor

Perhaps the most valuable resource available to you is your personal Account Advisor (AA), who is ready to assist you with any questions you may have about the survey process, standards interpretation, CoP interpretation, and more. Your AA, along with ACHC's dedicated clinical support and regulatory support team members, are available to help you untangle the regulatory requirements to allow you and your agency to maintain compliance and protect you against the alternative sanctions.

Completing Your Renewal Application

Follow these steps for your renewal application process:

- Log in to [achc.org](https://www.achc.org) and complete your application for your renewal accreditation.
 - » You can copy a previously completed application, and you can edit the existing information by clicking on the "Edit" button for each section of the application.
- Include on your application:
 - » Demographic information for the main office (parent agency) as well as for each branch that is associated with the main office.
 - » Identify the number of employees assigned to each location, along with the contact information for each location.
 - » Record the number of unduplicated admissions (every patient admitted to each location one time in the past 12 months, regardless of payor). This information is vital to ensure ACHC conducts a valid survey.
- If you have added locations since your last survey, click on the "Add Location" button and complete the information.
- Identify the services for which you want to be accredited.
- Submit the online application with the deposit.
- Download the ACHC Accreditation Standards (if you have not already).

- Your personal Account Advisor will conduct an application validation call, and upon completion of the call, your Account Advisor will send you the contract for review and signature.
- Once all information is complete and returned, your survey will be scheduled by ACHC.
- If you need to postpone your survey, you must notify your Account Advisor.

We want you to be well-prepared for your survey, so we provide useful tools. Be sure to use the Items Needed for On-Site Survey tool and the Survey Checklist – Personnel Files audit tool to gather and audit the information that will be reviewed by the Surveyor. Keep this information in a secure location to have readily available when the Surveyor arrives. Include any internal Plans of Correction you implemented to ensure you receive credit for identifying and correcting any issues of non-compliance.

Please reach out to your personal Account Advisor with any questions about the renewal process.

*For more information on the enforcement remedies, visit

<https://www.federalregister.gov/documents/2021/07/07/2021-13763/medicare-and-medicaid-programs-cy-2022-home-health-prospective-payment-system-rate-update-home>.