



RHC Compliance101

Oregon Office of Rural Health

Kate Hill, RN

Survey



Survey

- Develop a Survey Readiness Binder
 - Policies
 - Reports
 - Other evidence of compliance
- Determine space for Surveyor to work
- Determine who will attend/how to inform
- Keep the Clinic "Company Ready"

It starts with being organized
Staff should know where everything is stored.



Remember, This is an open book test. There should be no surprises.

RHC Conditions of Certification

- § 491.1 Purpose and scope.
- § 491.2 Definitions.
- § 491.3 Certification procedures.
- § 491.4 Compliance with Federal, State and local laws.
- § 491.5 Location of clinic.
- § 491.6 Physical plant and environment.
- § 491.7 Organizational structure.
- § 491.8 Staffing and staff responsibilities.
- § 491.9 Provision of services.
- § 491.10 Patient health records.
- § 491.11 Program evaluation.
- § 491.12 Emergency preparedness.

<https://www.law.cornell.edu/cfr/text/42/491.4>

The Survey Starts Here



Signage



Name on the sign is consistent with CMS 855A application.

42 CFR 491.4 Licensing

Staff of the clinic or center are licensed, certified or registered in accordance with applicable State and local laws.

OIG Exclusion list: <https://exclusions.oig.hhs.gov/>

The screenshot shows the official website of the Office of Inspector General (OIG) of the U.S. Department of Health & Human Services. The page is titled "Exclusions Search Results: Individuals" and shows a search for "Hill, Kate". The results indicate that no results were found for this individual. A message states: "If no results are found, this individual or entity (if it is an entity search) is not currently excluded. Print this Web page for your documentation". The page also includes a "Search Again" link and a footer with search details: "Search conducted 1/7/2020 6:57:21 PM EST on OIG LEIE Exclusions database. Source data updated on 12/10/2019 7:00:00 PM EST".

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Exclusions Search Results: Individuals

No Results were found for

» Hill , Kate

If no results are found, this individual or entity (if it is an entity search) is not currently excluded. Print this Web page for your documentation

[Search Again](#)

Search conducted 1/7/2020 6:57:21 PM EST on OIG LEIE Exclusions database.
Source data updated on 12/10/2019 7:00:00 PM EST

[Return to Search](#)

42 CFR 491.4 Licensing

HR Files:

- Application
 - I-9
 - W-4
 - OIG Exclusion
 - Signed Job Description
 - Standards of Conduct
 - Performance evaluations, according to your clinic schedule
 - Annual Training
 - Competency
 - Background checks as appropriate
-
- TB screening on hire
 - Hep B for those who work with patients

42 CFR 491.4 Licensing

Staff of the clinic or center are licensed, certified or registered in accordance with applicable [State](#) and local laws.

Personnel File Audit Tool											
Insert "Y" (YES) if evidence is found, "N" (NO) if evidence of is missing, or "NA" if not applicable.											
Staff Member	Application Resume or CV	I-9 and W-4 For Employees	OIG Exclusion	Signed Job Description	Signed Standard of Conduct	Orientation/ Training & Competency	Current License or Certification	Performance Evaluation	Background Check	Hepatitis B	TB

Posted Hours

Posted Hours of Operation



42 CFR 491.5 location of the Clinic

- **Before moving**: Check with State office of Rural Health and your MAC to be certain your new address is still in a HPSA, even if it's next door.
- Your location is grandfathered in at your present location.
- Report name changes to CMS.
- Report change in Medical Director to CMS.
- Update your 855a and CMS 29 as things change.

491.6 Physical Plant

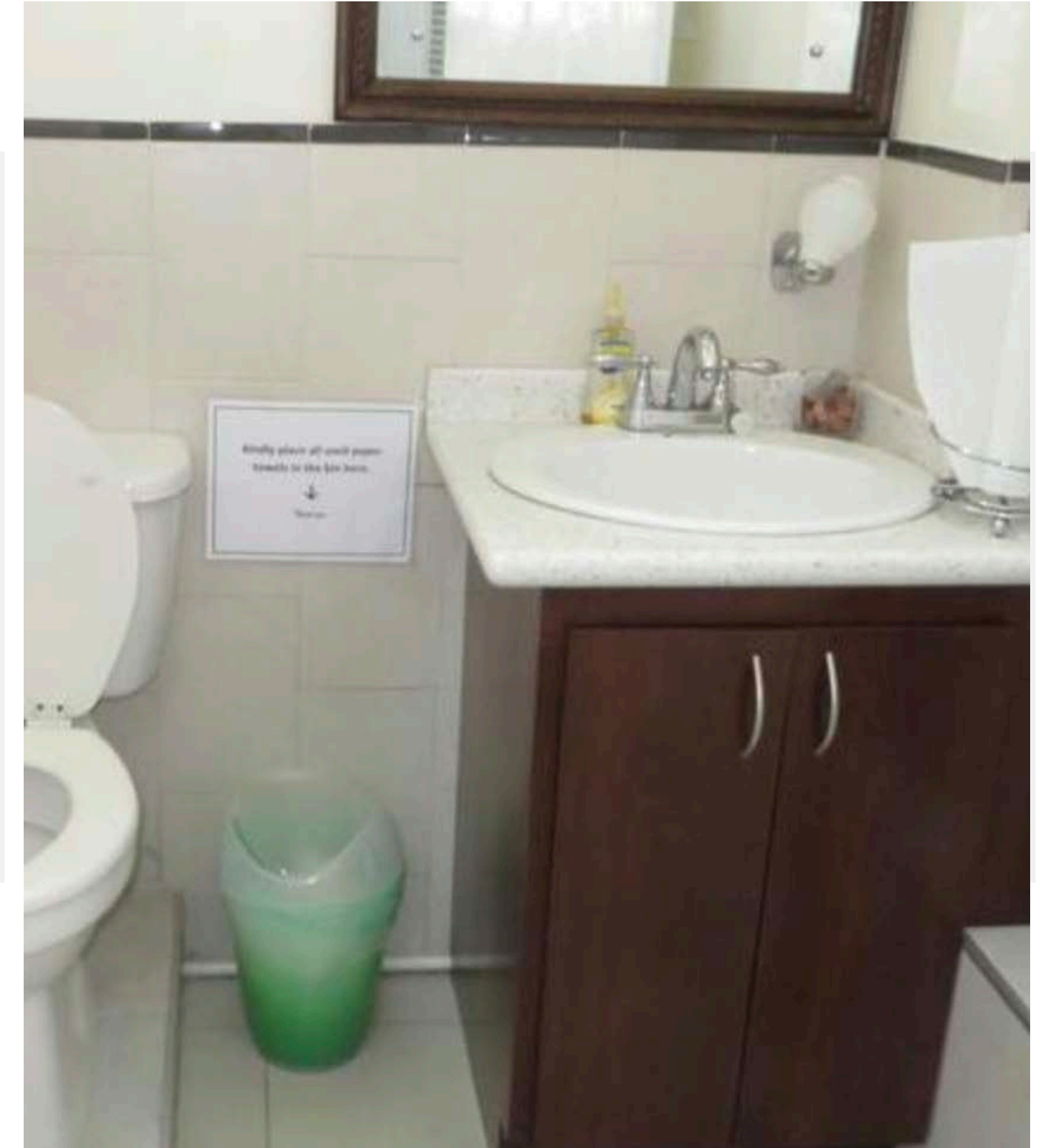
491.6 Physical plant and environment.

- (a) **Construction.** The clinic or center is constructed, arranged, and maintained to insure access to and safety of patients, and provides adequate space for the provision of [direct services](#). (Direct services means services provided by the clinic's staff)
- (b) **Maintenance.** The clinic or center has a preventive maintenance program to ensure that:
- (1) All essential mechanical, electrical and [patient](#)-care [equipment](#) is maintained in safe operating condition;
 - (2) Drugs and biologicals are appropriately stored; and
 - (3) The premises are clean and orderly.

491.6 Physical Plant



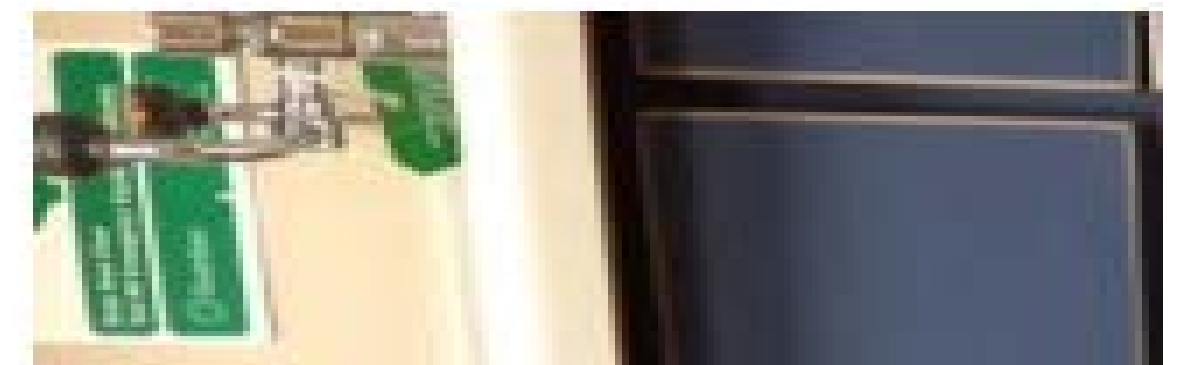
Physical Plant



Physical Plant

- Hazardous material under the sink.
- Nothing should be under the sink!

UNUSUAL RISKS OBSERVED DURING SURVEY:



Physical Plant

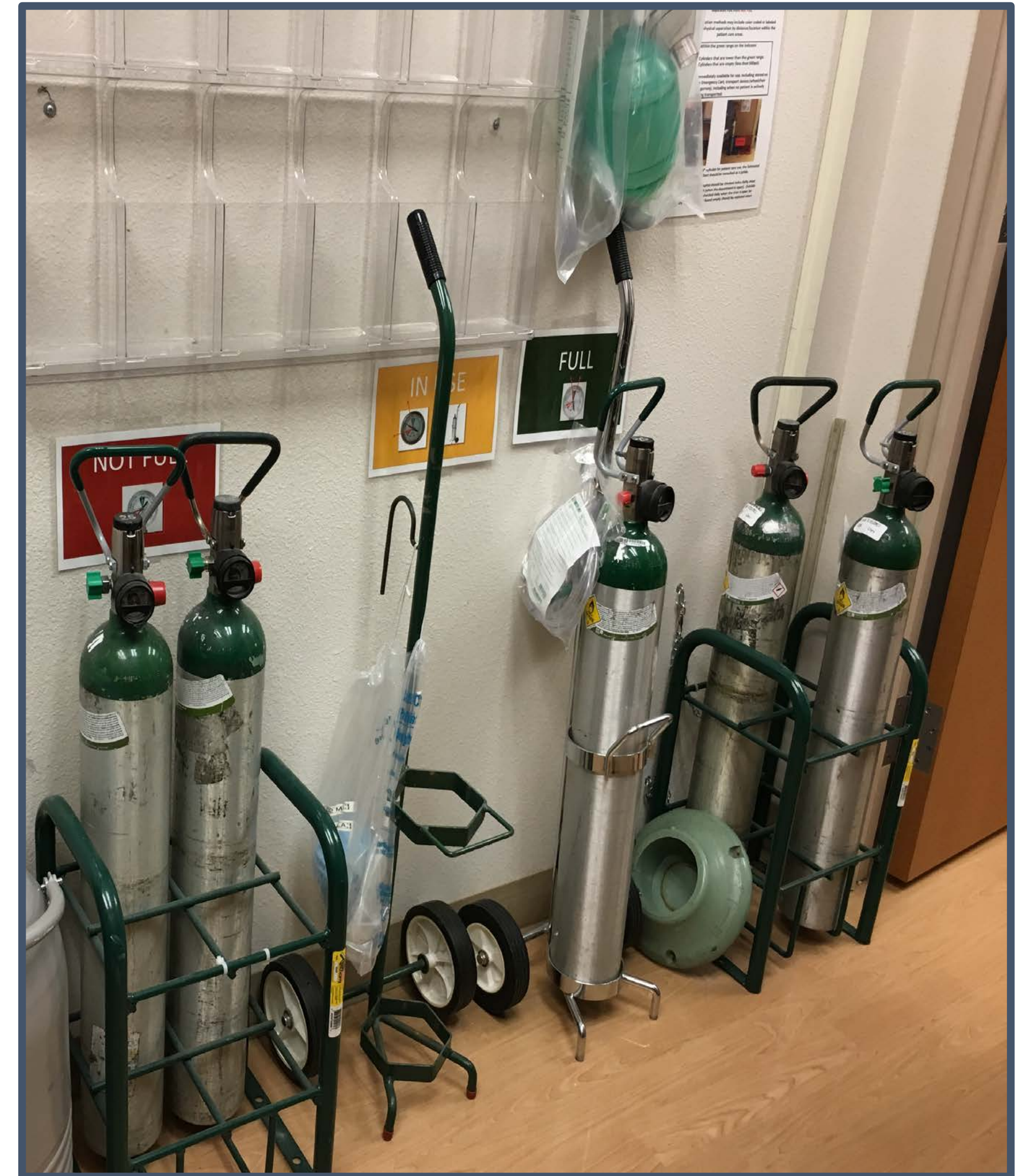
- Sharps containers cannot be easily accessible.
- Several states require specific times on emptying of sharps containers.
- Must be marked with Bio-Hazard sticker



Physical Plant



- Safe storage of Oxygen: chained or in an approved cart.
- Keep full separated from empty.



Physical Plant

- State and Federal Posters are required to be in places visible to the staff.
- Make sure you have the current year.
- Provider based clinics must have these postings in the clinic even when the clinic is in the hospital building.



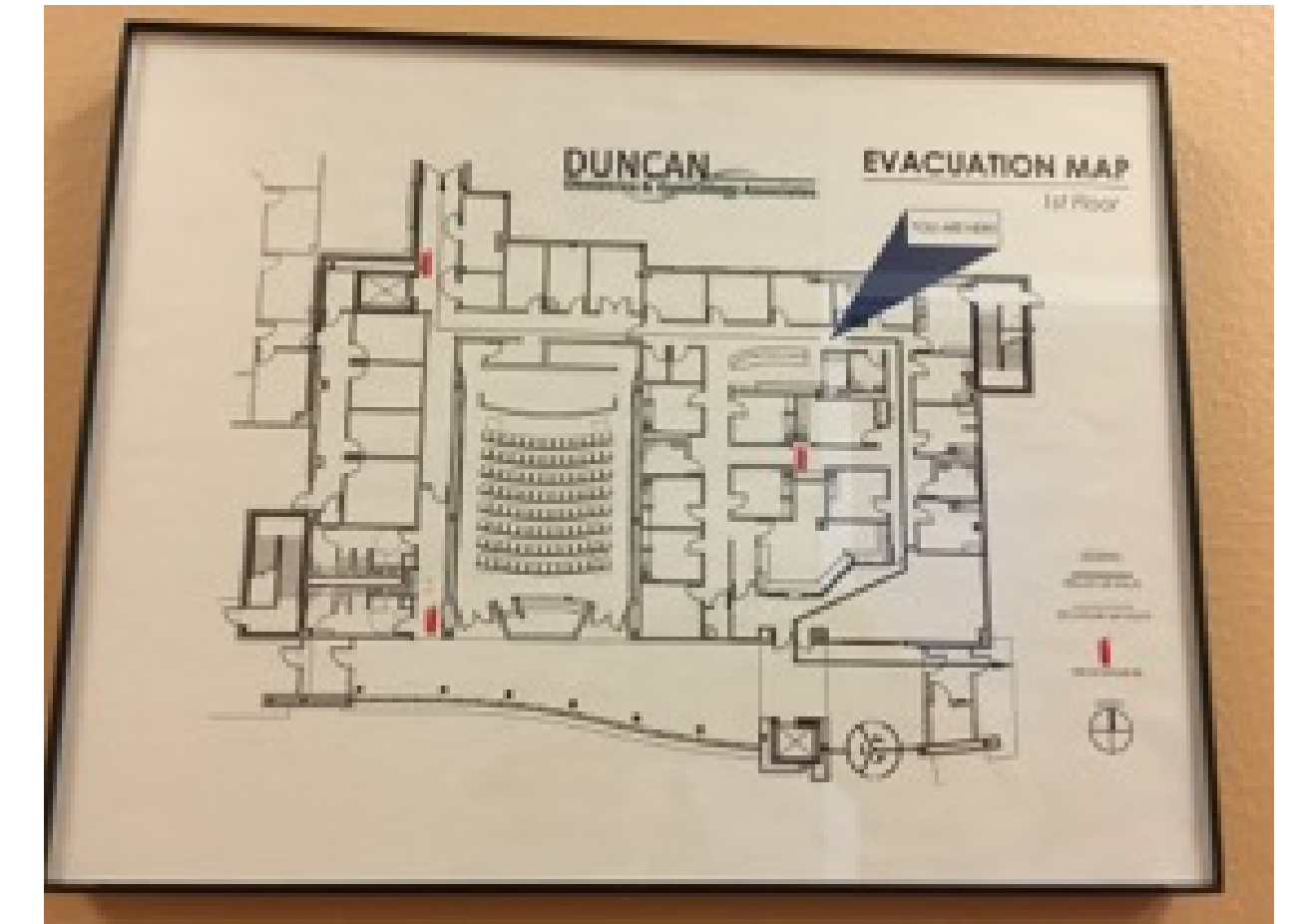
Physical Plant



Physical Plant



Physical Plant



Fire Safety Process per State Regulations

HIPAA



Computer Time Out



Visible PHI

491.7 Organizational structure

§ 491.7 Organizational structure.

(a) *Basic requirements.*

- (1) The clinic or center is under the medical direction of a [physician](#), and has a health care staff that meets the requirements of [§ 491.8](#).
- (2) The organization's policies and its lines of authority and responsibilities are clearly set forth in writing.

(b) *Disclosure.* The clinic or center discloses the names and addresses of:

- (1) Its owners, in accordance with section 1124 of the [Social Security Act](#) ([42 U.S.C.132](#) A-3);
- (2) The person principally responsible for directing the operation of the clinic or center; and
- (3) The person responsible for medical direction.

491.8 Staffing and Staff Responsibilities

(a) Staffing.

- (1) The clinic or center has a health care staff that includes one or more [physicians](#). Rural health clinic staffs must also include one or more [physician](#)'s assistants or nurse practitioners.
- (2) The [physician](#) member of the staff may be the owner of the rural health clinic, an employee of the clinic or center, or under agreement with the clinic or center to carry out the responsibilities required under this section.
- (3) The [physician assistant](#), [nurse practitioner](#), nurse-midwife, clinical social worker or clinical psychologist member of the staff may be the owner or an employee of the clinic or center, or may furnish services under contract to the clinic or center. In the case of a clinic, at least one [physician assistant](#) or [nurse practitioner](#) must be an employee of the clinic.
- (4) The staff may also include ancillary personnel who are supervised by the professional staff.
- (5) The staff is sufficient to provide the services essential to the operation of the clinic or center.
- (6) A [physician](#), [nurse practitioner](#), [physician assistant](#), certified nurse-midwife, clinical social worker, or clinical psychologist is available to furnish [patient](#) care services at all times the clinic or center operates. In addition, for RHCs, a [nurse practitioner](#), [physician assistant](#), or certified nurse-midwife is available to furnish [patient](#) care services at least 50 percent of the time the [RHC](#) operates.

491.8 Staffing and Staff Responsibilities

(b) *Physician responsibilities.* The [physician](#) performs the following:

- (1) Except for services furnished by a clinical psychologist in an [FOHC](#), which [State](#) law permits to be provided without [physician](#) supervision, provides medical direction for the clinic's or center's health care activities and consultation for, and medical supervision of, the health care staff.
- (2) In conjunction with the [physician assistant](#) and/or [nurse practitioner](#) member(s), participates in developing, executing, and periodically reviewing the clinic's or center's written policies and the services provided to Federal program patients.
- (3) Periodically reviews the clinic's or center's [patient](#) records, provides medical orders, and provides medical care services to the [patients](#) of the clinic or center.

491.8 Staffing and Staff Responsibilities

(c) Physician assistant and nurse practitioner responsibilities.

- (1) The [physician assistant](#) and the [nurse practitioner](#) members of the clinic's or center's staff:
 - (i) Participate in the development, execution and periodic review of the written policies governing the services the clinic or center furnishes;
 - (ii) Participate with a [physician](#) in a periodic review of the patients' health records.
- (2) The [physician assistant](#) or [nurse practitioner](#) performs the following functions, to the extent they are not being performed by a physician:
 - (i) Provides services in accordance with the clinic's or center's policies;
 - (ii) Arranges for, or refers [patients](#) to, needed services that cannot be provided at the clinic or center; and
 - (iii) Assures that adequate [patient](#) health records are maintained and [transferred](#) as required when [patients](#) are referred.

491.9 Provision of Services

§ 491.9 Provision of services.

Link to an amendment published at [84 FR 51832](#), Sept. 30, 2019.

(a) *Basic requirements.*

- (1) All services offered by the clinic or center are furnished in accordance with applicable Federal, [State](#), and local laws; and
- (2) The clinic or center is primarily engaged in providing outpatient health services and meets all other conditions of this subpart.
- (3) The laboratory requirements in [paragraph \(c\)\(2\)](#) of this section apply to RHCs, but do not apply to FQHCs.

491.9 Provision of Services

(b) Patient care policies.

- (1)** The clinic's or center's health care services are furnished in accordance with appropriate written policies which are consistent with applicable [State](#) law.
- (2)** The policies are developed with the advice of a group of professional personnel that includes one or more [physicians](#) and one or more [physician assistants](#) or nurse practitioners. At least one member is not a member of the clinic or center staff.
- (3)** The policies include:
 - (i)** A description of the services the clinic or center furnishes directly and those furnished through agreement or arrangement.
 - (ii)** Guidelines for the medical management of health problems which include the conditions requiring medical consultation and/or [patient](#) referral, the maintenance of health care records, and procedures for the periodic review and evaluation of the services furnished by the clinic or center.
 - (iii)** Rules for the storage, handling, and administration of drugs and biologicals.
- (4)** These policies are reviewed at least biennially by the group of professional personnel required under [paragraph \(b\)\(2\)](#) of this section and reviewed as necessary by the clinic or center.

491.9 Provision of Services

The policies include:

A description of the services the clinic or center furnishes directly and those furnished through agreement or arrangement.

In a policy the clinic states their services. For example “ABC clinic provides primary care for patients from birth to 99” or ABC clinic provides women’s health care”.

Agreement or arrangement: Make a list of a few those things you always refer: Colonoscopy, cardiology, etc.

Guidelines for Medical Management:

- A reference for medical guidance, agreed to by the Medical Director and the NP or PAs.
- It is named in the Medical Management/Patient Care Policy

Policies

- Keep policies organized
- Review a few policies each staff meeting
- Keep your policies simple don't lock yourself into a tight corner
- Know what requires a policy
- P&P personalized, not generic templates
- Staff should be familiar with policies
- Must follow the state's physician on-site and chart review regulations

Policies

Patientcare Policies

Biennial Review of Policies by Advisory Group

Storage, Handling, & Dispensing of Drugs & Biologicals

Emergency Preparedness

Health Records

HIPAA

Scope of Services provided and referred

Lines of Authority

Categories of Practitioners

Equipment Maintenance

Infection Prevention

Hiring, training and orienting

Quality Improvement

Biennial Evaluation

Survey Findings

- 100% compliance is necessary for RHC Certification
- Statement of Deficiency will be received within 10 business days
- Clinic has 10 calendar days to submit an acceptable Plan of Correction.
- Standard level deficiencies must be corrected within 60 calendar days.
- Condition level deficiencies require re-survey within 45 calendar days from the original survey date (can lose billing number).

Trusted Resources



Thank You

Questions



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