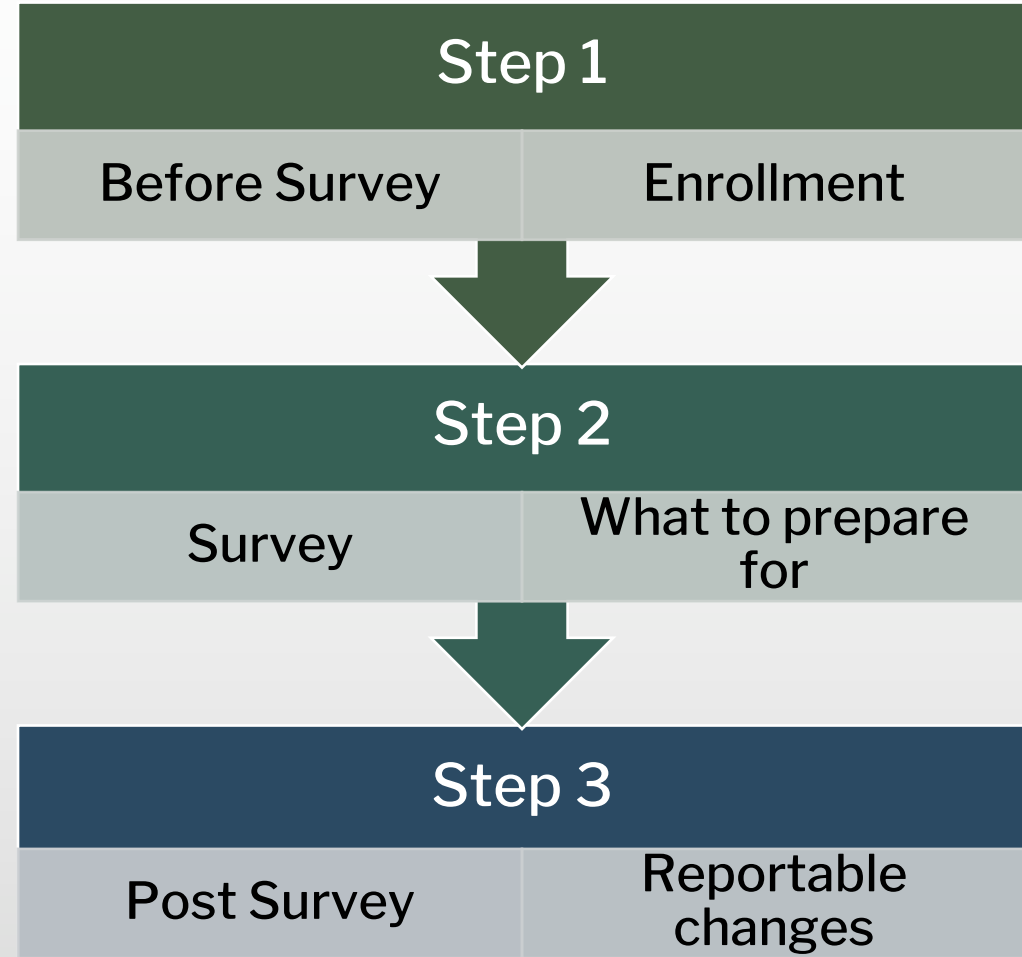# RHC CERTIFICATION A-Z

2023 PRESENTED BY,

HEALTH SERVICES ASSOCIATES INC.

Participants Will...

- Learn the steps for RHC enrollment

- Discover how to prepare for the certification survey

- Understand the steps the clinic will take following survey to finalize certification as an RHC

Step 1	
Before Survey	Enrollment

Step 2	
Survey	What to prepare for

Step 3	
Post Survey	Reportable changes

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BEFORE SURVEY

STEP 1

RHC Certification Determination

Pre-Enrollment Determination:

- Eligibility:
  - To be eligible for certification as an RHC, a clinic must be located in **1) a non-urbanized area**, as determined by the U.S. Census Bureau, and 2) an area designated or certified within the previous **4 years** by the Secretary, HHS, in any one of the four types of shortage area designations that are accepted for RHC certification:
    - Geographic Primary Care HPSA
    - Population-group Primary Care HPSA
    - **MUA** (this does not include the population group MUP designation)
    - **Governor-Designated** and Secretary-Certified Shortage Area (this does not include a Governor's Medically Underserved Population designation)

- Feasibility analysis:
  - Patients served by insurance type (% of total visits) by Fee for Service Payments vs RHC AIR

Enrollment - Medicare (part A) & State

- State License Requirements
  - RHCs in Oregon do not require additional licensing

- Official Start:
  - Medicare CMS855A & CMS588
    - Completing forms & documentation
    - Medicare payment $688 for 2023
    - Processing timeline by MAC (Noridian)
    - Note: It is not required to get a separate NPI for RHC

- State Forms: CMS29, CMS1561A (x2), OCR AOC
  - Submit paper forms with initial approval letter
  - Processing timeline

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Survey Preparation

- Determine surveying entity (State, TCT, QUAD A)
  - TCT & QUAD A will require contract with payment
  - Letter of request

- Policy & Procedure Manual (42CFR491.1 to 491.12)

- HR Audit for all staff
  - Clinician name, title, state license, DEA license, CPR/BLS, emergency plan training, COVID 19
  - If using an accreditation agency, additional elements may be required

- Administrative medical record review
  - Reference 42CFR491.10 for required elements

Survey Preparation Continued

- Emergency Preparedness Plan (review/update biennially)
  - Risk Assessment (facility based & community based) utilizing all hazards approach
    - Include strategies for addressing emergency events identified by the risk assessment
  - Policies & Procedures
  - Communication Plan
  - Training & Testing Program
  - Integrated Plan (RHC is appropriately reflected)

Survey Preparation Continued

- CLIA waived certificate

- 6 required point of care tests
  - Urinalysis, Pregnancy HCG, Occult Stool, Glucose, Primary Culturing, Hemoglobin/Hematocrit

- Staff Education
  - Inform staff of expectations at survey and ensure policy understanding

- Physical plant

Getting The Physical Plant Ready For Survey

- Entry

- Equipment

- Medications & Supplies

- Infection Control

- Laboratory Services

- Safety and Housekeeping

- Administration

- Postings

SELF CHECK

Step 1:

- Am I eligible?
  - Based on location
  - Primarily engaged in primary care services

- Is it feasible?
  - High volume of Medicaid/Medicare population

- Am I ready for survey?
  - Personnel files
  - Medical records
  - Physical plant
  - Documentation

UNANNOUNCED SURVEY

STEP 2:

Day Of Survey

- State or accreditation agency

- Perfect survey vs. plan of correction
  - Perfect:
    - Pass day of survey with zero deficiencies
    - Certification date
  - POC:
    - Standard level
    - Condition level
    - Immediate jeopardy
    - Certification date given once POC is approved, or follow-up survey is completed if necessary

SELF CHECK

Step 2:

- What test am I taking?
  - State, QUAD A, TCT

- How did we do?
  - What deficiencies need to be addressed?

- What determines my certification date?
  - Perfect survey OR accepted plan of correction

POST SURVEY

STEP 3

After Survey

- Surveyor to send the survey approval to the clinic, State processing unit, and CMS

- State to finalize packet and send to CMS

- CMS to finalize packet typically within 6-8 weeks

- **CMS LETTER ARRIVES with CCN and effective date – YAY!**

- MAC to update provider enrollment profile

After Survey

Enrollment – Medicaid

- In order to enroll as a Rural Health Clinic with Oregon Medicaid and seek direct reimbursement from the Oregon Health Authority (OHA)
  - OHP 3104 (Provider Enrollment Attachment)
  - OHA 3972 (Provider Enrollment Request)
  - OHA 3974 (Disclosure Statement of Ownership and Control Interest)
  - OHA 3975 (Provider Enrollment Agreement)
  - Documents:
    - Copy of current license(s), certificates, CLIA, CMS letter, cost report/financial info, etc.

After Survey

Medicaid Enrollment Continued

- Medicaid Enrollment Notes
  - Fax initial enrollment forms and call or email provider enrollment within 48 hours to confirm receipt
  - The effective date may be backdated up to one year from date received. If no effective date is provided, date of receipt will be used. Updates are effective the date received, and revalidation effective date is dependent on all information requested being received complete and accurate

Billing & EDI

Billing
- Rate set with Medicare and Medicaid
- Recommend flipping switch to Medicare & Medicaid billing at same time

EDI (Electronic Data Interchange)
- Enroll with EDI for electronic claims submission for Medicare & Medicaid
- Send test claim

Reportable Changes

In accordance with 42CFR424.516(d) changes must be reported in their enrollment info to your MAC within 30 days of the change in:

- Change in Ownership (CHOI) & Change of Ownership (CHOW)

- Adverse Legal Action

- Change in practice location

SUBMIT: Forms to payers (ie, CMS855A, CMS29, CMS1561A), document support (org chart, floor plan, etc)

All other changes must be made within 90 days:

- Board of director(s)

- Medical Director

- Expansion of clinic space

- Any changes on 855A such as phone #, fax #, bank account, etc

- Revalidation is due every 5 years with payment

SELF CHECK

Step 3:

- Did I receive my CMS and MAC approval letters?

- Did I receive my Medicaid welcome letter?

- Did I receive my rate letters?

- Did I apply with EDI?

- Is my information with CMS current?
  - Change in information
  - Change in medical director
  - Change in address

Common Enrollment Deficiencies

- Use current form(s)

- Document support

- Submit forms to proper MAC jurisdiction

- Sign & date forms

- Timely responses

- Check for accuracy

- Follow up as things change

- Medicare Benefit Policy Manual Chapter 13 - Rural Health Clinic (RHC)
  - https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c13.pdf

- Noridian Medicare part A JF
  - https://med.noridianmedicare.com/web/jfa

- CMS Regional Office Rural Health Coordinator
  - Cecile Greenway, Region X – Seattle
  - E: cecile.greenway@cms.hhs.gov
  - P: (206) 615-2428

- SOM, Appendix G – Guidance for Surveyors, RHCs
  - https://www.cms.gov/files/document/appendix-g-state-operations-manual

RHC RESOURCES

Medicare

- Provider Enrollment
  - E: provider.enrollment@odhsoha.oregon.gov
  - P: 800-336-6016 option 6

- Provider Revalidations
  - E: provider.revalidation@odhsoha.oregon.gov

- Provider Services (claims)
  - E: dmap.providerservices@odhsoha.oregon.gov
  - P: 800-336-6016 option 5
  - Provider Services can assist with fee-for-service claims inquires, web portal unlocks and password resets.

- Provider Web Portal password reset/unlock/PIN access
  - E: team.provider-access@odhsoha.oregon.gov

- Provider Portal NPI Verification Tool
  - Check a provider's status as an Oregon Medicaid Provider using the providers NPI.
  - https://www.or-medicaid.gov/ProdPortal/Validate%20NPI/tabid/125/Default.aspx

- Provider Web Portal
  - https://www.or-medicaid.gov/ProdPortal/

RHC Resources Continued

Medicaid

- State Healthcare Regulation and Quality Improvement Program (HCRQI)
  - Survey and Certification: mailbox.hclc@odhsoha.oregon.gov
  - P: 971-673-0540

- **Determining eligibility or ?'s rural health clinic program:**
  - SORH Clinic Technical Assistance Specialist
    - P: 503-494-4450
    - E: ruralweb@ohsu.edu

- Office of Rural Health:
  - http://www.ohsu.edu/xd/outreach/oregon-rural-health/clinics/index.cfm

- 42 CFR 491.1-491.12:
  - https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-491

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RHC Resources Continued

State Licensing and Certification

Part 491 – Subpart A RHC Conditions for Certification

- AOC: Assurance of Compliance
- CMS: Centers for Medicare & Medicaid Services
- CCN: CMS Certification Number
- DOS: Date of Service
- HHS: Health and Human Services
- HPSA: Health Professional Shortage Area
- MAC: Medicare Administrative Contractor
- MUA: Medically Underserved Area
- OCR: Office Civil Rights
- OHA: Oregon Health Authority
- PPE: Personal Protection Equipment
- PT: Patient
- RHC: Rural Health Clinic

Glossary

Acronyms & Definitions

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QUESTIONS?