

Physcology



**ASSIGN
BUSTER**

GUIDELINES FOR DEVELOPMENT ??“ LICENSED HOME HEALTH AGENCYThese guidelines are for use in development of a licensed home health agency. (If you desire Medicare certification in addition to state licensure, please refer to the Home Health Medicare Certification and State Licensure Forms and Resources website link.) Home health agencies must meet the licensure requirements specified in Chapter 25, Section 197. 400197.

475 and 19 CSR 30-26. 010. Please review these statutes and regulations before proceeding with this process. If you wish to participate as a state licensed home health agency, submit the following information to: Missouri Department of Health and Senior Services Bureau of Home Care and Rehabilitative Standards P. O. Box 570 Jefferson City, MO 65102 The application will not be processed until all of these items are received: 1.

2. 3. 4. 5. 6. Letter of Intent for State Licensure and/or Medicare Certification Application for Home Health Agency License \$600 licensure fee made payable to the Missouri Department of Health and Senior Services (non-refundable) State Disclosure of Ownership and Control Interest Statement Agency policy and procedure manual Proof of current registration with the Missouri Secretary of State.

If the agency is using a “ doing business as” (d/b/a) name, you will need to provide proof of the fictitious filing. For any questions regarding the registration process or fictitious filing, contact the Secretary of State office at 573- 751-4153. All forms received by the Bureau must list the legal entity name and the d/b/a, if applicable. Missouri statute at 197. 445 requires all licensed home health agencies to meet the standards for Medicare

certification. In developing your policy and procedure manual refer to the website link for Interpretive Guidelines ??“ Home Health Agencies (State Operations Manual ??“ Appendix B.) Policies and procedures must address all of the standards listed in the Interpretive Guidelines except for those related to the Outcome and Assessment Information Set (OASIS) data collection and submission (484.

11, 484. 20, 484. 55(e)). In addition, you must include policies and procedures regarding: Criminal background checks ??“ refer to website link for Criminal Background 660. 317 RSMo and Family Care Safety Registry Alzheimers and dementia specific training ??“ refer to website links for Alzheimers and Dementia Specific Training 660.

050 RSMo Advance Directive information- refer to website link for Missouri Law Regarding a Patients Right to Make Health Care Decisions and Advance Directive Information CFR 489. 100-489. 104 Home Health Aide Competency Evaluation ??“ call the Bureau at (573) 751-6336 to obtain a copy Infection control including Hepatitis B requirements per OSHA ??“ refer to website link for Hepatitis B 29 CFR 1910. 1030 (f)(1)(i)(ii),(ii)(A),(2)(iv)rev 01/071" Possession of drugs by a home health agency ??“ refer to website link Possession of Drugs by a HHA or Hospice 4 CSR 220-2.

010 (8) Patient Rights ??“ statement given to patient must be verbatim from federal regulation ??“ refer to website link Patient Rights (484. 10).

Additional information may be added. Organizational chart Job descriptions for all disciplines Administrator qualifications ??“ send resume with policy manual. The administrator must be (a) a licensed physician; or (b) a

registered nurse; or (c) has training and experience in health service administration and at least 1 year of supervisory or administrative experience in home health care or related health programs. Orientation Geographic area to be served by agency ??“ the service area will be limited to the county of the parent agency and any requested bordering counties of the parent agency for the first 6 months following the date of your initial survey.

An agency may not request approval to operate a branch office for at least one (1) year after the initial date of certification/licensure. CLIA Certificate of Waiver ??“ required if skilled nursing personnel perform fingerstick blood glucose or prothrombin testing. Contact 573-751-6318 for application.

The governing body and group of professional personnel appointed by the home health agency must approve the policy and procedure manual prior to the initial survey. After receipt of the required forms and policy manual a surveyor will be assigned to your agency. The following process will be followed: 1. Surveyor reviews and approves policy manual.

If additional information is needed from agency before manual can be approved, surveyor will notify agency. Information needed to complete the manual approval process must be submitted by agency within 30 days of request. If timeframe is not met by agency, the application will be withdrawn.

Surveyor approves geographic area. Surveyor approves administrator. Surveyor gives agency permission to develop a patient caseload. The initial caseload for home health agencies seeking state licensure shall be ten (10)

patients, with at least seven (7) patients on service at time of survey. During the start-up period, the home health agency shall provide at least two services. If the home health agency has not developed the required caseload within ninety (90) days from the date the agency is given permission to develop a caseload, your application will be withdrawn and your policy manual returned.

The licensure fee is non-refundable. 5. 6. 7. The Bureau will send a confirmation letter to the agency regarding permission to start a patient caseload. The home health agency notifies the Bureau when the required caseload has been achieved. Surveyor schedules initial survey (preferably within 3 weeks). 2.

3. 4. The initial survey is unannounced by state requirements. The exit date of the survey is the earliest that your agency can be licensed as a home health agency. If deficiencies are cited at the time of the survey the earliest date of licensure will be the date that the plan of correction has been approved by the Bureau. You will receive your license by mail within two to three weeks of one of the above dates.

rev 01/072"Those agencies that are denied licensure will be sent notification, indicating the reason for the denial and information about their rights to appeal the decision. If agency fails to complete process within one year of initial application, Bureau will notify agency that application is withdrawn and agency will need to begin the application process again. Additional information regarding licensure and current home health issues is available on our website at <http://www.dhss.mo>.

gov/HomeCare. All of the website links mentioned are available at the above website by clicking on “ Applications and Forms” and then “ Home Health State Licensure Forms and Resources.” Please contact the Bureau of Home Care and Rehabilitative Standards at (573) 751-6336 with any questions. rev 01/073