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# Home Care Association of Colorado Management Report

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**New updates added weekly to [www.hcaonline.org](http://www.hcaonline.org)! Check it out!**

## Your Dues Working for You: State Licensure and Medicare Survey - An Update

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## Quick Links...

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- [Don't Miss: Lisa Selman-Holman on "Coding," Sept. 17-19](#)
- [CAHABA Resources](#)
- [Read all about HCAC's Annual Convention in Vail](#)
- [Visit Our Brand New 24/7 Virtual trade Show](#)
- [Check Out HCAC's Jobs and Services Store](#)
- [Click here for Members Only State Legislative Bulletin Board](#)

**Welcome to a special edition of the *HCAC Management Report* highlighting the association's advocacy in the state licensure and Medicare survey arenas:**

**Home Care Licensure:** HCAC worked with the Colorado Dept. of Public Health and Environment to write and pass a sound home care licensure bill in the 2008 session of the Colorado General Assembly. Before the new law can be implemented, rules must be written. [Click here](#) to read a brief description of the bill, key provisions and the rule making process:

Representing HCAC on the Home Care Agency Licensure Advisory Committee are **Sonya Neumann**, Physicians Home Health, with locations in Colorado Springs, Pueblo and Denver; **David Johnston**, Argus Health Network, with locations in Pueblo, Denver and Canyon City; **Donna Floyd**, Interim HealthCare of Western Colorado, Grand Junction and Crag Business Group, Delta. All are members of the HCAC Board of Directors. Other HCAC members serving on the 14-person committee are **Tiffany Walters**, Maxim / Max-Health, with locations in Aurora, Colorado Springs, Fort Collins, LaJunta, Pueblo and Westminster, and **Leanne Smiley**, Total Longterm Care / PACE program, Denver.

[Click here](#) to follow progress of rule making.

[Click here](#) to read SB 08-153.

[Click here](#) for HCAC's Member Only Legislative Bulletin to read HCAC's position on SB 08-153.

Please send your questions or comments to [hcac@assnoffice.com](mailto:hcac@assnoffice.com). We will forward them on to

our committee members.

## Medicare Certification & Survey Process

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HCAC's Survey Task Force (**Crystal Day**, Rehabilitation & VNA, with locations in Greeley and Fort Collins; **Linda Bagby**, Acaria, Inc., Lakewood; **Donna Floyd**, Interim HealthCare of Western Colorado, Grand Junction and Crag Business Group, Delta, and **Ellen Caruso**, HCAC Executive Director), meet frequently with the Dept. of Public Health and Environment (DPHE) survey division.

HCAC members provided topics for the August 11th meeting including: 1) Exit interviews (vague, no specifics, no tags, delay in receiving results); 2) Medication / Drug Regimen (OTC drugs; therapists updating medication list and compliance); 3) CNA performing bowel program; 4) Separate verbal order form for start of care; 5) Missed visit reports, and 6) Separate statement on reason for "homebound."

These issues will be further discussed and clarified by the Colorado survey team at the next Home Health Advisory Committee meeting on Wednesday, Sept. 3rd.

[Click here for Home Health Advisory Committee meeting information!](#)

## OIG May Target Repeat Offenders

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A study of home health agencies that have been cited for the same violation of a Medicare Condition of Participation (CoP) in each of three consecutive years has been released. You can access the report at: [Deficiency History and Recertification of Medicare Home Health Agencies](#) (OEI -09-06-00040).

In the report, it is stated that 15 percent of home health agencies are repeat offenders. In the report the OIG recommends that Medicare targets surveys at these HHAs as high risk providers and recommends that Medicare implement "intermediate sanctions" under statutory authority as an alternative to the current power to terminate an HHA's provider participation in Medicare. Primary deficiencies included: failure to have timely physician review of the plan of care and compliance

with the plan of care.

The OIG evaluated 5,661 home health agencies survey data and found that 873 had repeat deficiencies in three consecutive surveys beginning with the first survey of four. The study found three consecutive surveys with the same deficiency beginning with the second of four surveys in 655 of 5,011 HHAs. Seventy-nine percent of deficiencies are standard level. Typically these deficiencies are isolated, minor incidences of noncompliance. Condition level deficiencies typically are indicative of systemic problems.

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