Medicare
Home Health Agency
Administrative
Policies and Procedures
Manual

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MEDICARE HOME HEALTH CARE AGENCY ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL
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   gkenyon@kenyonhcc.com
EDITING YOUR MANUAL

This document’s formatting is controlled by the use of Word styles. It is a Microsoft Word document and should operate on systems using Office 2007 software or higher. Kenyon HomeCare Consulting has done it’s best to ensure reformatting will be minimal for most agencies, but we do not assume liability for any formatting errors that may occur.

There are a number of text placeholders that will need to be replaced with your agency’s information. Text placeholders are as follows:

[AGENCY NAME] — Your agency’s business name
[BUSINESS TYPE] — Your agency’s business type
[STATE] — The state your agency is licensed in
[OPENING TIME] — Your agency’s opening operating time
[CLOSING TIME] — Your agency’s closing operating time
 [GEOGRAPHIC COVERAGE AREA] — Your agency’s geographic coverage area, including cities, towns, and/or counties
[HOLIDAYS OBSERVED] — Your agency’s observed holidays that you will be closed for
[DOLLAR LIMIT] — Your agency’s dollar limit within document
[JOB TITLE] — Your agency’s Administrator title
[STATUS] — Your agency’s status: for-profit or non-profit

To Find and Replace Text Placeholders:
1. On the Edit menu, click Replace.
2. In the Find what box, enter the placeholder text exactly as it is above that you want to search for.
3. In the Replace with box, enter the replacement text.
4. Click Find Next, Replace, or Replace All.
5. To cancel a search in progress, press ESC.

To Update Table of Contents:
You can update either the whole table of contents or page numbers only.
1. Hold down CONTROL key, click the table of contents, and then click Update Field.
2. Click the option that you want.
ACCEPTANCE OF THE ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL

I attest that the following administrative policies and procedures have been reviewed by me and have been accepted and approved by the Governing Body as the policies and procedures that guide the practices and services for [AGENCY NAME].

Owner/Administrator  Date
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ORGANIZATION AND ADMINISTRATION
MISSION STATEMENT

POLICY

The [AGENCY NAME]’s Governing Body has adopted a written mission statement that reflects its commitment to the provision of efficient, effective, quality home health care services to patients in the communities we serve. The agency will serve its patients with dignity and comfort, prioritize service goals based on patient/representative input, and deliver timely, coordinated, and culturally sensitive service.

PURPOSE

To serve as the guiding principles for the agency’s personnel, policies, procedures, services, and programs.

PROCEDURE

1. The mission statement is established with appropriate interdisciplinary team and administrative staff input and review, and approved by the Governing Body.
2. The mission statement is reviewed, revised (if needed), and approved at least every 36 months by the Governing Body.
3. The mission statement is included in all orientations. (not required by ACHC)
4. A written copy of the mission statement is available for patients or their representatives, referral sources, employees and other interested parties.

EXAMPLE

[AGENCY NAME] is dedicated to providing excellent and respectful home health care agency services to patients served in our communities that are provided by qualified and dedicated personnel in a fiscally responsible manner.

REFERENCES:

CMS 42 CFR 484.12(a)
ACHC HH1-2A
CHAP CI.1, HHI.1
POLICY AND PROCEDURE DEVELOPMENT AND IMPLEMENTATION

DEFINITIONS

Policy: A statement of principles formulated, approved, and enforced by the Governing Body/designees to direct and limit its actions as related to a specific subject.

Procedure: A set of established steps or a prescribed method to be followed routinely for optimally effective achievement of a desired result.

POLICY

[AGENCY NAME] follows an established process for the development, approval, implementation, and access to its policies and procedures. Agency policies and procedures reflect an emphasis of quality service, current and ethical standards of practice, patient rights, and the agency’s mission statement.

Policies will conform to Medicare Home Health Care Conditions of Participation policies and procedures, state and federal regulations, and applicable home health care agency accreditation standards.

Administrative policies and procedures delineate lines of authority and responsibilities for governance, planning, public communications, and financial control of the agency.

Operational policies and procedures define personnel management, infection control, and compliance with federal and state employment regulations.

Agency patient care policies and procedures are developed by the clinical management with staff input, reviewed by the Professional Advisory Committee (PAC), and approved by the Governing Body.

Exceptions to the Governing Body approval of procedures may occur due to legal or regulatory mandates, generally accepted clinical-based standards of practice, or manufacturer instructions for use and maintenance of agency equipment. The Administrator with clinical management will identify procedure approval exceptions.

The Administrator or designee(s) may develop or amend policies and procedures on a need basis when required for the continuity of care and submit them for Governing Board approval.

The Governing Body will approve all new and revised policies and applicable procedures by electronic and/or written notation.
Policies and procedures will be reviewed and revised if needed at least annually by the Owner/Governing Board and PAC.

**PURPOSE**

1. To ensure a consistent methodology for the development, review, revision, approval and distribution of administrative and clinical policies and procedures.

2. To ensure accountability and responsibility in the oversight, review and approval of policies and procedures which direct the services of the agency.

**PROCEDURE**

1. Policies and procedures may be generated by staff or management suggestions and may be assigned to an individual or committee for development. Input from appropriate staff will be solicited during the development process. Outside consultants may be sought, if the policy involves greater subject expertise.

2. Policies and procedures will be written in a standardized format, maintained and organized for efficient reference and access by the Administrator or designee, accessible via the Internet, and available to authorized personnel during normal business hours.

3. If the annual review of policies and applicable procedures results in a revision, the revision follows the same approval process. Policy reviews will be documented on the policies updated and on any new ones that are developed.

4. Before submission to the Governing Body for approval, the PAC as required will review policies and procedures.

5. Upon review and approval, the President of the Governing Body will sign and date the “Acceptance of the Administrative Policies and Procedures Manual.” This form will appear at the front of the manual or by electronic signature.

6. Once approved, the Administrator will implement the policy by notifying affected persons and distributing related instructions (if needed) to affected entity managers for related staff education. If a policy or procedure requires competency testing to confirm new practice, the Administrator or designee will arrange for that competency testing.

7. Policies and procedures may be shared with community resources and facilities serving the agency patients for continuity of care, patients or their representatives, and federal and state authorities upon request. Personnel will have access to all policies including personnel policies.
REFERENCES:
CMS 42 CFR 484.10(c)(ii), 484.14(e), 484.52(a)
ACHC HH1-1A.01, HH4-6A.01
CHAP CI.5c, HIV.1a1