The Connecticut Association for Healthcare at Home supports its members in the provision of exceptional quality and accessible services through collaboration, leadership, provision of information, advocacy and education.

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HOME HEALTH

Use This Last-Minute Checklist to Comply with the Revised Home Health CoPs

Source: HHL

Agencies should carefully review the checklist below to determine whether they're complying with the revised Home Health Conditions of Participation (CoPs), which took effect Jan. 13.

Agencies in noncompliance could be cited during surveys.

Continue Reading to View Full Checklist

CMS Launches New Low Volume Appeals Settlement Option

Source: NAHC

As reported previously, the Centers for Medicare & Medicaid Services (CMS) is launching a new Low Volume Appeals (LVA) Initiative to help address the significant backlog of Medicare appeals that are currently in line for resolution. Under the program eligible providers and suppliers may submit an Expression of Interest (EoI) to CMS to be considered for an administrative settlement process to address a portion of pending appeals in exchange for a 62% partial payment of the net Medicare approved amount. Given the length of time that it is taking for Medicare appeals to be resolved, the National Association for Home Care & Hospice (NAHC) encourages eligible providers to examine the LVA Initiative as a potential option for addressing outstanding claim disputes.

Continue Reading

Buckle Up: IRS Drives Mileage Rates Up One Cent for 2018

Source: HHL
The IRS has announced that standard mileage rates for the use of a car in 2018 rose to 54.5 cents per mile of business travel.

That's a one-cent increase from 2017.

The standard mileage rate is based on an annual study of variable and fixed costs of operating a car, according to a Dec. 14 post on the IRS website.

"Taxpayers always have the option of calculating the actual costs of using their vehicle rather than using the standard mileage rates," the IRS notes.

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### HOSPICE

**CMS Top 10 Hospice Survey Deficiencies**  
*Source: NHPCO*

CMS identifies the top frequent survey deficiencies cited during Medicare hospice recertification surveys. Is your program at risk? The 2017 hospice survey deficiency report is available and the top 10 issues show that plan of care, the comprehensive assessment, and supervision of hospice aides are still a problem for some hospice providers. NHPCO develops resources annually that provide a three year comparison of the top 10 hospice survey deficiencies and a compliance audit tool specific for the recent calendar year's deficiencies. Members can access these resources on the [NHPCO Survey & Certification webpage](#).

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**Fraud and Abuse in Home Care and Hospice: Understanding Risk Areas; Preparing for Review**  
*Source: NHPCO*

**Wednesday, February 21, 2018**  
2:00 - 3:30 pm ET  
[CE/CME Information](#)

*Jointly provided by the National Hospice and Palliative Care Organization (NHPCO) and the National Association for Home Care & Hospice (NAHC)*

Audits by government auditors (Medicare Administrative Contractors (MACs); Medicaid Integrity Contractors (MICs); Recovery Audit Contractors (RACs) and Zone Program Integrity Contractors (ZPICs), now renamed Unified Program Integrity Contractors (UPICs), are on the increase. For the homecare industry, these audits have recently focused on physician certification requirement, eligibility for care, and reasonable and necessary services. For the hospice industry, the focus has been on eligibility, physician involvement and live discharges. As the focus shifts in the early part of 2018, this Webinar will provide you with up to the minute summaries of audit activity and identify new areas for scrutiny. Though home care and hospice each have distinct areas of concern, both are at high risk for the challenging scrutiny that audits bring.

[Continue Reading](#)
Message from Edo Banach on Sunday's New York Times Essay
January 9, 2018

Let us take this situation as an opportunity for all of us to remember our commitment to quality and excellence.

I'm sure that many providers have seen the essay that ran in The New York Times Sunday Review this past weekend, "This Was Not the Good Death We Were Promised". Journalist Karen Brown shared her family's personal experience with hospice surrounding her father's death. For those who have not seen the opinion piece, the experience did not end well. Ms. Brown did acknowledge the good care that was provided while her father was stable; however, when her father's condition suddenly took a turn for the worse and he was in great pain and actively dying, the hospice failed to provide the service that was promised and expected.

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QUESTIONS? CONCERNS? COMMENTS?
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