

Empower Your Compliance Officer to Keep Your Company Running Smoothly

Clay Stribling, CHC JD
President, HC Comply

As the HME industry approaches the uncertain deadline for mandatory compliance programs, many companies are taking initiative to implement updated policies and procedures and reinforce compliance concepts to employees. A key element of any compliance program is appointing and empowering your corporate compliance officer. It is not enough to designate an existing employee as the compliance officer; every company must provide the compliance officer with adequate resources to accomplish compliance goals. What follows are five tools a supplier can provide to empower compliance officers.

Five Ways To Empower Your Compliance Officer

Provide Adequate Time

Far too often, companies appoint a compliance officer who has significant additional responsibility. In this case, the compliance officer frequently lacks adequate time to do his/her job. At a minimum, the compliance officer requires adequate time to coordinate policy and procedure implementation, training and auditing functions. In many cases, it is unreasonable to presume that the compliance officer can perform these functions on a part-time basis.

Provide Adequate Support

In order to effectively complete tasks such as chart auditing, a compliance officer will require the assistance of other employees. In many cases, the compliance officer will need support from clinical personnel to resolve issues related to medical necessity. In addition, some compliance officers may rely heavily on HR to assist with employee training. In each of these cases, it is vital that the company provide additional personnel to assist the compliance officer in completing his/her assigned duties.

Provide Adequate Training

Corporate compliance has evolved from a relatively obscure and straight-forward practice into a very complicated and specialized field. In order for compliance professionals to adequately address a company's needs, the compliance professional must receive training from outside the organization.

The Health Care Compliance Association (HCCA) provides continuous training for compliance professionals and also oversees a certification program in health care compliance. HCCA conducts in-person training, telephone conferences and has online resources available to assist compliance professionals.

The compliance professional also needs to remain up to date on issues impacting the HME industry. HME compliance officers should

monitor industry publications, user organization updates, Medicare list serves, and other relevant resources to stay on top of changes impacting the medical necessity and coverage for company products and services.

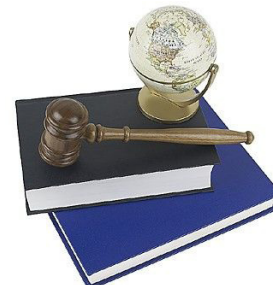
Provide Appropriate Technology

Compliance professionals can utilize a significant number of technology resources to assist in carrying out a company's compliance initiatives, including:

- Company newsletters
- Employee e-mail updates
- Workflow software
- Social media
- Surveillance equipment
- Computer security solutions

Provide an Ethical Environment

Any company's compliance position will be most strongly influenced by the consistent messages provided by management from the top down. If a company provides only lip service to compliance, employees will not take these matters seriously and compliance initiatives will not succeed. Only by providing consistent visible examples of your company's commitment to ethical practices and corporate compliance, will your compliance officer have the adequate staff support to carry out his/her goals.



IN THIS ISSUE

- ✓ From the Director's Desk.....2
- ✓ This Month in ACT.....3
- ✓ HQAA Recently Accredited Companies.....4-5
- ✓ Regulatory Update.....6
- ✓ Compliance Corner.....7
- ✓ News from HQAA Champions.....8
- ✓ Ask the Surveyor.....9
- ✓ Ask the Coaches.....10



Editor's Note:

At the time of posting our articles, Clay Stribling was the president of HC Comply. He has since changed positions. We appreciate his informative and enriching article and we wish Clay the best of luck in his future endeavors. A big "Thank You" for his positive impact 1 in our industry.



From the Director's Desk

Mary Nicholas, MHA
Executive Director

HQAA Renewal Process: Manage Your Process Effectively

Many conscientious suppliers have been asking me if we are "...going to be ready for next year?" Their thoughts are implying "We know 2009 was nuts. Are you able to do that again?" Our answer is always a resounding "Yes!"

There is a big difference for us between 2009 and 2012. We are working with a known group of our currently accredited suppliers and know all of their accreditation expiration dates. In 2009, every day from January to July was living in the unknown. We never knew the critical management issues, such as how many organizations would be signing on, how many would be working in their workrooms, how many would finish the workrooms and many other variables. We are analyzing, studying and collecting data on how we will best approach all of the expirations in 2012 and how we can best manage capacity and efficiency at the same time. Our work begins now.

You may not be aware that HQAA always notifies you when it is time for you to begin your renewal process. This is based on your accreditation expiration date so that you have plenty of time to accomplish all necessary work and have your survey well in advance of your expiration. The Renewal Notification Process is as follows if the supplier has not already renewed:

- Eight (8) to nine (9) months prior to the expiration date, the supplier receives an e-mail notification that they should begin the process
- If the supplier has not yet begun, the supplier receives a courtesy letter via USPS seven (7) months prior to the expiration date
- Four (4) months prior to the expiration date, the supplier receives a certified letter advising that their accreditation is expiring

The general rule of thumb is that a supplier should **finish** their Workroom **at least 4 months** prior to their expiration date. For example, a supplier that is due to expire in February 2012 should be finished in their workroom early in November of this year. January expirations should be finished in October. And for any of you high-achievers, (who we are very proud and thankful for) who are due to renew in late 2012, getting into your workroom in the next few months and getting ahead of the game a little sure wouldn't hurt!

The renewal process begins on our home page, www.hqaa.org where you see the large picture button labeled "Renew". Have your HQAA ID number handy and you'll be on your way!

The actual Workroom process is very efficient. Accessing all of your current P&P items is a snap and your accreditation coach is ready to assist with any questions you may have. The last thing in the world you want to do is put yourself in a position where your work is hurried, pressured and incomplete due to signing up and renewing later than you should. Managing your renewal well in advance of your expiration date is something to be taken seriously. It is far more preferable to sit in the driver's seat of your accreditation process than for the process to be controlling you. As you can see, those who are approaching renewal in the next 18 months will receive adequate notification from HQAA, but you don't have to wait to hear from us. You can get started any day!

If you have any questions about your schedule or your process, please don't hesitate to call the Quality Assistance Center at any time. We are here to ensure you are successful! 🏆

HQAA
On the Road
Come visit us at:

KMESA
5/23-24
(Louisville, KY)

**VGM Heartland
Conference**
6/6-9
(Waterloo, IA)

NCAMES
6/15-16
(Wrightsville Beach, NC)

GAMES
7/17-19
(Savannah, GA)



follow us on **twitter**

twitter.com/HQAA
Follow @HQAA on Twitter, where Mary tweets a tip (#twip) everyday that relates to the standards, quality or efficient business practices for your company.

To sign in and start an account (HQAA follows many DME businesses on Twitter) go to www.twitter.com. This is yet another good place for informative resources. You should see what other DME's are saying and doing!



MAY

Emergency - Disaster Preparedness

JUNE

Infection Control & Safety

JULY

Compliance

AUGUST

Retail

SEPTEMBER

Grievances/Adverse Event Management

OCTOBER

Patient Intake Process

NOVEMBER

Transfers, Terminations, Discharges & Denials

DECEMBER

Delivery Process Review

JANUARY 2012

Materials Management

FEBRUARY

The 3 R's: Recalls, Returns, Repairs

MARCH

Physical Locations

APRIL

Personnel Files

ACT (Accreditation Continuation Toolkit) is the program offered to HQAA accredited providers after their successful accreditation to assist them in maintaining and updating their high quality standards and accreditation requirements on an ongoing, on-line basis so that accreditation renewal is smooth and seamless.

Each month, providers enrolled in **ACT** work with a “bite-sized” component of standards to ensure that they are reviewing and updating their processes as needed. By addressing accreditation compliance requirements in small, bite-sized” components, last-minute renewal work is eliminated, and what can be extensive work is accomplished in efficient, incremental steps. Featured monthly topics assist providers in conducting audits and updating information. Providers who subscribe to **ACT** receive the plans, tools and access to experts in one easy-to-use website, saving both time and money.

In this issue we are highlighting the **ACT** topics for May, June and July and listing some of the questions posed for subscribers to review to ensure that they are meeting their accreditation standard requirements.

May- Emergency - Disaster Preparedness

What is your organization’s definition of an emergency or a disaster? What alternative arrangements have been made with alternate providers in the event that you can’t service your customers? What information do you provide to your clients regarding disaster and emergency preparedness?

June- Infection Control & Safety

Are your new staff members always oriented to infection control and safety issues? What is your process for separating clean items from dirty or contaminated items? Are your vehicles up-to-date regarding safety equipment and cleanliness?

July- Compliance

Your compliance program must be much more comprehensive than when you were first accredited. Ensure that your program is complete and effective. Are you auditing your claims to ensure that you are billing correctly? Using the appropriate modifiers when necessary? Are you collecting co-payments appropriately? If you identify an overpayment, is it refunded promptly?

*Since March, all companies awarded accreditation receive 3 months of the **ACT** program for FREE! We appreciate your continued trust in HQAA as your accreditor!*

For more information, contact:
gabe.nicholas@hqaa.org
866.490.7980

Thank You for your Loyalty!

Here’s what one of our current **ACT subscribers is saying:**

“HQAA was the light at the end of the tunnel for us! Since applying for accreditation, they took our hand and guided us every single step of the way, showing us what works and is required for a DME company to work more efficiently and be in compliance. In addition, the ACT Program helps you maintain your accreditation status through their bite-size approach of following up on all policies and procedures each week. Simply put, the ACT Program is a lifesaver!”

**Adriana Jimenez, Owner
Alamo Med Connection, Inc.**



HQAA

Recently Accredited Quality Champions

Please join us in congratulating
these recently accredited providers.

Aegis Enterprises, LLC	9/21/2010	CompreCare Services	2/7/2011
Arianna Medical Pharmacy	4/12/2011	Dallas Oxygen Corporation	9/28/2010
Asante Community Services, LLC	4/12/2011	Detroit Oxygen & Medical Equipment Co.	3/10/2011
Backel Corp	2/22/2011	Fallston Pharmacy, Inc.	1/3/2011
Bates Drug Stores, Inc.	3/16/2011	Foster Drug Company, Inc.	3/15/2011
Bele Medical, Inc.	1/24/2011	Gator Custom Mobility, Inc.	1/11/2011
Benchmark Mobility Corporation	1/12/2011	Genesee Home Healthcare Products, Inc.	4/11/2011
Best Aid Medical Supplies	2/28/2011	Guardian Home Care Services	2/9/2011
Better Lives Medgroup, LLC	2/17/2011	GWR Medical, Inc.	2/17/2011
Bitting` s Apothecary, Inc.	2/2/2011	Healing Air, Inc.	3/30/2011
Brossart Pharmacy, Inc.	9/30/2010	Hill's Apothecary, Inc.	1/6/2011
Byard-Mercer Pharmacy	3/21/2011	Hometown Respiratory, LLC	1/10/2011
C & C Pharmacy, LLC	1/25/2011	Host Management Co., Inc.	1/17/2011
C J Pharmacy Services, LLC	1/19/2011	Hubbard Pharmacy, LLC	3/24/2011
Caldwell and Wilhoit, Inc.	2/23/2011	In Home Medical, Inc.	1/25/2011
Cammack` s Pharmacies, Inc.	3/2/2011	Janilcar, Inc.	1/11/2011
Caring Corners, Inc.	11/16/2010	Jefferson Pharmacy, Inc.	2/14/2011
Caring Medical Distributors	6/8/2010	Jeffreys Medicine Shoppe, Inc.	1/18/2011
Chase Drugs, Inc.	4/6/2011	Kathy Collins McNeill	1/25/2011
Clinical Care Pharmacy of Owasso	11/16/2010	Kingwood Pharmacy, LLC	3/17/2011
Comfort Medical Supply, LLC	3/15/2011	Knox Professional Pharmacy, Inc.	1/13/2011

We look forward to listing your company as one of our Quarterly Champions! Come join our family!

HQAA
Recently Accredited
Quality Champions



Krishna Narayanan MD, LLC	1/13/2011	Prohealth Medical Supply Inc.	1/13/2011
Llewellyns, Inc.	3/15/2011	R.W.K. Inc	4/5/2011
Long Term Medical Supply Corp.	1/4/2011	Respiratory Medical Solutions, Inc.	1/25/2011
Mars Medical Equipment & Supplies	2/1/2011	Resurgence Durable Medical Equipment, LLC	8/4/2010
McFarland Group, Inc.	3/2/2011	Rocky Mountain Medical Equipment, Inc.	3/7/2011
MCS Enterprises, Inc	1/25/2011	Shaver Holdings, Inc.	1/25/2011
Mid-States Medical, Inc.	2/21/2011	Sleep Centers of Fort Wayne DME	3/1/2011
Miende Medical Supply	1/31/2011	Smalls Medical Supply, LLC	9/7/2010
Move About Medical Supplies, Inc.	3/16/2011	Steverson Pharmacy Services, Inc.	6/14/2010
My Ideal Care, LLC	3/8/2011	Sure Medical Equipment LLC	1/10/2011
My Pharmacy of Homestead, Inc.	6/23/2010	Telcare Medical Supply, Inc.	1/25/2011
National Medical Supply, Inc.	9/8/2010	The Medicine Shoppe of Asheboro NC, Inc.	2/22/2011
Ocean View Health Care, Inc.	3/30/2011	TPN Camargo	10/25/2010
Omni Measurement Systems, Inc.	3/4/2011	Union Prescription Center	2/1/2011
Perfect Medical Solutions, LLC	9/28/2010	Waltz Pharmacy, Inc.	9/29/2010
Perimeter Spine & Rehabilitation Center	9/15/2010	Weston Orthopedic Office	1/12/2011
Perrotta Pharmacy, Inc.	3/29/2011	William G. Craddock	4/4/2011
Perry Drug Store, LLC	2/28/2011	William Jeremy Harvey	2/22/2011
Plymouth Towne Care Pharmacy, Inc.	1/31/2011	WNF Medical, LLC	2/24/2011
Power Chairs and Scooter Store Medical Supply, LLC	3/8/2011	Xinim Corporation	2/22/2011
Prairie Medical, LLC	8/12/2010		



Champion Chat's Regulatory Update is provided by industry consultant Mary Ellen Conway. Mary Ellen can be reached at 301.896.0193 or maryellen@capitalhealthcaregroup.com

Regulatory Update

Mary Ellen Conway, President
Capital Healthcare Group

Every week there is "breaking news" that suppliers need to evaluate. Sometimes it's good news, sometimes it is not and sometimes it's hard to tell which it is! This month we need to focus on two items in the news that you are well aware of.

1. CMS delayed Round 2 of Competitive Bidding. Is this good news or bad news?

Frankly, it's both. It seems that CMS has responded to some of the pressure from the industry who has continued to point out the fatal flaws in Round 1 which began in 9 regions on January 1st of this year. Leading national economists who have no relationship to our industry have pointed out how poor the bidding was handled and that to continue with this process for Round 2 would be disastrous. They have also pointed out that it takes more than three to six months to determine the economic success or failure of a program. In the meantime, contract winners are announcing that they are closing, non-winning suppliers are supplying products for free in the hopes of the program being overturned, patients are not getting serviced in some areas with refill supplies and many discharge planners are only referring new patients to suppliers who won in multiple categories. So the good news is that it has been delayed but the bad news is that it has only been delayed for 6 months. The train is racing down the track for Round 2 to begin in 91 areas in 2013 with the bidding process beginning later this year.

2. HR 1041 was introduced to eliminate Competitive Bidding altogether.

This is GREAT news. Representatives Jason Altmire (D) and Greg Thompson (R), both from Pennsylvania, have introduced a bill to eliminate Competitive Bidding altogether. What makes this bill GREAT are several factors: 1. It has bi-partisan support; 2. It does not delay the program, it eliminates it; and 3. It does not require that the industry accept any reduced payment for products, as we did in 2009 for the delay of Round 1. It is funded entirely by monies "left over" from projects that were funded over the past several years but the dollars were not spent.

You need to be aware that Competitive Bidding is going to really decimate our industry. If your business is heavy in Medicare, whether you are in a Competitive Bidding region or not, you are going to be in trouble. Providers cannot survive on these margins and we know that old saying "As goes Medicare, so goes Medicaid" will be an additional disaster with Medicaid payments averaging 40% less. And the third party payers are always the next to follow Medicare cuts. We've already heard from one that they are reducing payments. In HME News, editor Liz Beaulieu wrote on April 22nd about Healthspring, a company that owns Medicare Advantage plans in 11 states and Washington, DC:

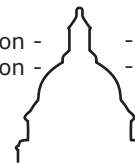
"If you still think competitive bidding doesn't affect you... here's a wake-up call. This provider will adjust its rates based on the "new competitive bidding rates," thus affecting areas that have not been included in the competitive bidding program. "This is a corporate initiative to standardize our DME fee schedules across all states and markets," said the company. In its letter, HealthSpring explains that the new competitive bidding rates represent 68% of the current Medicare allowable. As such, it plans to reduce its rates to 70% of the allowable, down from 80%."

It is imperative that all providers, regardless of whether or not they are in a competitive bid area, TAKE ACTION NOW. Both the Senate and the House members must be contacted and urged to support a repeal of Competitive Bidding. If you want to save your business and save this industry, you NEED to get vocal with your congressional representatives. If you never have before, you may not have time to in the future. Contact their offices and tell them that you need their support on HR 1041. They need to understand that this program will result in job loss and a reduction in patient access to quality care and equipment across the country, not just in competitive bid areas. Tell them that the bill is budget neutral. Call their Congressional offices locally and in D.C. Visit them in their town hall meetings when they are home on recess and get vocal about the issues. Time is critical.

To sign up to receive **Champion Chat** directly, click **here** or contact us at 866-909-HQAA and ask us to add you to our mailing list

EXPERT CONSULTING SERVICES FOR DMEPOS|Home Health|Hospice

- Accreditation Preparation -
- Survey Remediation -
- Regulatory Compliance
- Recruitment and Retention



Capital Healthcare Group

Mary Ellen Conway, President
P.O. Box 34416 • Bethesda, MD 20827
301-896-0193 • www.capitalhealthcaregroup.com
Consultants Available Nationwide



Compliance Corner

Curtis McLees
Director of Compliance

Each quarter, Champion Chat features information provided by Curtis McLees, that highlights common problematic areas of compliance

In reviewing the recent journals, there were several situations and outcomes that I want to share with you. The first one involves “straw ownership” (owners on paper only). The OIG is holding them liable for fraudulent activity. One case in Nevada and another in Florida involved individuals that either knowingly or unknowingly had relatives use their names on the 855S application as a part owner. The resulting prosecution was due to the actions of the unscrupulous family member and now the straw “owner” is behind bars.

On the audit front, CMS continues to study the outcomes of prepayment reviews focusing on specific products. The latest study to be reported involves nebulizers. The review involved a prepayment complex medical review of 294 claims submitted by 183 suppliers. Responses to the Additional Documentation Request (ADR) were not received for 73 (25%) of the claims. For the remaining 221 claims, 76 claims were allowed and 145 were denied resulting in a claim denial rate of 65.6%. Of the denied claims, 61% were missing any clinical information to support medical necessity - no medical records of any sort were submitted and 24% of the denied claims had *insufficient* clinical documentation. There are a number of reasons that the suppliers did not have sufficient documentation. The biggest reason cited was that the physician did not forward the documentation needed for the supplier to respond to the audit.

Another issue in the news is the fraud being discovered when a supplier sets up store fronts out of state.

Mento Nnana Kaluanya, 50, was sentenced by a U. S. District Court Judge to 70 months in prison and a fine of \$1,573,042.52. Kaluanya, who plead guilty to health care fraud and aggravated identity theft on March 1, 2010, was the sole owner of HyCentral Medical Supplies and Equipment, (“HyCentral”) a DME supplier in Derry, New Hampshire. The \$3.9 million worth of claims billed by HyCentral were primarily for Texas Medicare beneficiaries. It was discovered that the DME was not ordered or prescribed by treating physicians, not medically necessary, not delivered to some beneficiaries and it was not wanted by others. Physician orders with the forged signatures of at least twelve (12) Houston area physicians were found in the documentation.

The judge used a legal rule applying an enhancement for “sophisticated means” since Kaluanya established a false storefront business out of state (in New Hampshire) in order to improve the success of his fraud plan. He created false and fraudulent patient files to make his fraud harder to detect. The judge also applied an abuse of trust enhancement to the sentence noting that Medicare had entrusted Kaluanya not to submit false and fraudulent claims when he signed the certification of his Medicare application.

Infusion Accreditation

April 4 -7 provided a happy respite from the cold winter when home infusion providers from around the country gathered at the Hilton in Orlando for NHIA, the National Home Infusion Association’s 2011 Annual Meeting. HQAA had a wonderful booth and the team on-site was able to meet and greet the many HQAA accredited providers in attendance. The educational sessions were stellar and the opportunities to network were plenty. Thanks to all who came to visit our booth and wore their HQAA accredited ribbons and pins so proudly on their ID badge. We are already looking forward to NHIA in 2012 in Phoenix!



Visit www.HQAA.org

Call: 866.909.4722 | E-mail: info@HQAA.org

News From HQAA Champions

We are happy to share this news provided to us by one of our HQAA Champions



I wanted to share this quick story with you since I think it really hits home as to the “why” of an HQAA Standard. We always understood the “whys” of standards that focused on customer protection, education and product placement and we understood there were reasons behind the facility standards as well. But I admit, not all of the standards made sense to us.

One of the standards requires us to pick a place to meet in case of an emergency. We were really stumped by this standard. We thought, “Why wouldn’t we just call everyone and tell them the building fell down?” We all have Smartphones, get our work email within seconds, are all online, etc. It seemed inconceivable to us that we would need a place to meet other than our own building.

But we went along with this requirement and chose the Park’n Ride parking lot as our meeting place. It is a large lot built for commuters who can park and then ride a bus into downtown. We treated this requirement as a sort of a joke. Every time I reviewed the meeting place with them, there were groans and the inevitable “Why do we have to have this standard?” When the surveyor asked one of my employees where the meeting place was, he jokingly said it was the local pub – but then corrected himself to say it was the Park’n Ride.

Fast forward to yesterday when we experienced the third largest snowstorm in Vermont history, dropping 30 feet of snow in less

than 24 hours. The company we hired to plow was literally stuck on a mountain road and had not been able to plow the private roads leading up to our building. The result was an impassable road to our facility, even though the highways were accessible.

When I realized I couldn’t make it to work, I didn’t know what to do. There’s no cell phone service in that particular area, so I couldn’t call or get my e-mail or access our website for instructions. Then I remembered – I knew what to do! Go to the Park’n Ride!

And when I arrived, I found all my employees gathered there, safely. I really can’t tell you how much it meant to me. I knew they were safe, they knew where to go and we had a plan in place to help them. I actually sat in my car and cried in relief.

I am happy to share our story with you. Throughout the entire accreditation process, I’ve seen the standards improve our business, improve our customer relationships and improve how we conduct ourselves. But I never thought they would make my employees safe and, for that, I am really grateful.

*T. Jarvis, Sales Coordinator
Omni Measurement Systems, Inc.
d/b/a: Omni Medical Systems, Inc.*



We’re your support while you are focused on the accreditation goal.

Your HQAA coach is your crew chief.

From the time you sign up, through your standards documentation. Beyond the survey to post-accreditation. Your crew chief will help you not only finish the process, but finish strong — with high quality standards.

To get started, visit www.HQAA.org/coach or call **866.909.4722**.

**Healthcare
QUALITY**
ASSOCIATION ON ACCREDITATION ©
Become a Quality Champion.





Ask the Surveyor your questions answered...

Jim Moyer

Assistant Director of Survey Services

Q: How do I ensure that my personnel files are complete for survey?

A: This is a common question for us. Providers vary in the ways they audit and maintain their files. There are many choices that are up to you, such as the types of file folders you use, whether your files are on paper or in an electronic format and more. You must maintain the files in a secure and organized manner and have them available for the surveyor during your unannounced survey. The "how" you do it is up to you. The HQAA standards are very clear with regards to what is expected to be in each employee or contractor's file. Here is a review of what a complete personnel file should contain:

- Application and/or resume.
- Evidence of date of hire.
- Evidence of interview(s).
- Two (2) or more reference checks.
- Criminal/OIG background checks when applicable. Know your state or payer source requirements. If this report contains a date of birth, it is to be located in a separate file, such as the Health Information File.
- Current professional license or certification with evidence of the validation of that license.
- Signed/dated orientation checklist completed for all new hires since your last accreditation. Make sure the checklist you use includes all of the key items including an orientation to your infection control and safety programs.
- Signed/dated job description for the position currently held.
- Completed competency assessment upon hire and annually for all staff who teach or instruct customers with DME items
- Signed/dated annual performance review(s).
- Signed and dated forms that the company deems necessary, such as Conflict of Interest, Confidentiality, etc...
- Current driver's license, if driving company vehicles. Since it contains a date of birth, it must be located in a separate file, such as the Health Information File.

It is best to audit your personnel files on an ongoing basis, possibly 2-4 times annually to ensure that the files are complete and up-to-date. Any new hire file should be flagged as such until all the completed documentation has been received and the file is considered complete.

Here are a few items that are common deficiencies found during onsite surveys. Be sure that these items are complete.

"I-9" form:

The I-9 form has various sections that need to be completed by either the employee or the designated staff member/employer.

In each issue we address questions our customers send to our surveyor team

The top section of the form (Section 1) is completed by the employee, signed and dated.

The middle section of the form (Section 2) is completed by the organization's staff member witnessing the documents shown as evidence of List A or of List B and List C and certifies that the information listed was reviewed and is acceptable.

Competency Assessments:

The organization must ensure that every staff member who teaches or instructs a customer/client has been trained appropriately on each item they instruct and that their competency has been assessed in order to perform the tasks assigned through their job description.

Organizations ensure that all staff are qualified through the use of competency assessments. These assessments are required "at hire" and annually by the accreditation organization.

Competency assessments need to be designed for the specific position the employee has and are completed with a supervisor or peer with the same knowledge base or background.

Examples: A Respiratory Therapist (RT) would be reviewed by another RT. A Service Technician (Tech) would be reviewed by his/her supervisor or another Tech with the same ability to assess the competency of that employee.

These assessments should be specific to the staff member's job description and job requirements.

Separation of any document containing a date of birth:

This is one area that tends to be overlooked when reviewing the personnel files for completeness. Any document containing a date of birth should be in a separate file, such as the Health Information File.

Signed Job Descriptions:

Job descriptions must be present for every employee within the organization (although owners can be exempt). Job descriptions for the employee's current job/duties must be in the file and are to be signed and dated.

All job descriptions must contain:

- Job title
- Reporting requirements
- Expected work hours
- Basic position requirements and listing of major duties/tasks.
- Information to comply with ADA requirements, such as physical demands and activities.
- Education requirements, including continuing education requirements.

Ask the Coaches

Here we feature questions often asked of our coaches

With a recent increase of questions regarding the ACT Service, this edition focuses on some of the most frequently asked of our coaches.

Q: How much does the ACT Service cost?

A: The ACT Service is available for the low flat rate of \$75.00 per month. When it's time to renew your accreditation, 20% of the ACT fees you have paid will be deducted from your accreditation fee.

Q: What types of things will I expect to find in the ACT Service?

A: There are numerous helpful tools, checklists and information in ACT. Just to name a few: monthly webinars, weekly worksheets to track your progress, access to your Workroom, industry related resources and links and a message center to keep you informed on HQAA happenings.



Q: If I sign up for the ACT Service can I skip the Workroom when it's time to renew?

A: The ACT Service allows you full Workroom access and the opportunity to review and update your documents so that you are ready for renewal. You will still be required to renew your accreditation, but your Workroom documents will already be up to date, which will significantly decrease your Workroom time and costs.

Q: Will someone be tracking my progress?

A: HQAA will not be tracking your progress; however the ACT Service includes a function that will allow you to print or e-mail a monthly progress report to someone within your organization if you choose to use this feature.

Q: Where do I sign up for the ACT Service?

A: You can sign up on HQAA's home page by logging in with your username/password. You will then be taken to the ACT sign-up page to get the process started.

Here's Our Latest News - What's Yours?

*We hope you are enjoying your issues of Champion Chat as much as we enjoy providing them to you. Help us stay in touch with what's happening in your world by keeping us up-to-date. We rely on you to suggest stories, submit questions to our team of experts and give us feedback on the items and articles you are reading. We need you, our industry colleagues and accredited providers, to keep us in your "loop". If you, a co-worker, supervisor or owner of your company has been recognized in some way, or has done an outstanding job of demonstrating Champion behavior, submit your nominations for HQAA Champions in the News to info@hqaa.org so that we can share your pride in making a difference in your customers lives, your community or in the industry. We appreciate the questions you've sent to **Ask the Surveyor** and **Ask the Coaches** and hope the questions and answers we've featured have been helpful. Your involvement helps us stay informed and in touch. Keep those e-mails coming!*

Visit www.HQAA.org

Call: 866.909.4722 | E-mail: info@HQAA.org