Health care providers striving to provide quality health care in home health face many risks and potential legal issues. Providers in all practice settings need to be aware of the constantly changing sea of regulations. Due diligence is made difficult by multiple levels of federal, state, and local agencies and multiple departments that have an impact on how care is provided. There is no single location for current, accurate, and reliable regulatory information for home health. Learning and staying up-to-date on regulatory information requires that providers make an ongoing investment of time and money. The consequences of failing to stay current with regulations pose more than financial risks to providers’ businesses.

In order for an individual in home health to establish and provide best practice that is compliant with applicable laws and contractual obligations and mitigate risk, clinicians need to know where to access regulatory information from the source.

Acknowledgments

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Task Force of the Practice Committee of the Home Health Section

Task Force Members

Nikki Gilroy, PT, DPT Task Force Leader
Sheri Yarbray, PT, MS
Judy Schank, PT, MS

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Kenneth L Miller, PT, DPT. CEEAA
Chair, Practice Committee
Liaison to Task Force

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Therapy related organizations

- APTA (American Physical Therapy Association)
  www.apta.org
  o Guide to Physical Therapy Practice
  o Code of Ethics
  o Specialty Sections
    ▪ Home Health Section

- CAPTE (Commission on Accreditation in Physical Therapy Education)
  www.capteonline.org/
  o is the only accreditation agency recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) to accredit entry-level physical therapist and physical therapist assistant education programs;
  o has been recognized as an independent agency since 1977 and has been the only recognized agency to accredit physical therapy programs since 1983;
  o currently accredits over 200 physical therapist education programs and over 250 physical therapist assistant education programs in the US and three physical therapist education programs in other countries (Canada and Scotland);
  o has 29 members from a variety of constituencies: PT and PTA clinicians, PT and PTA educators, basic scientists, higher education administrators and the public;

- FSBPT (Federation of State Boards of Physical Therapy)
  www.fsbpt.org
  o Focuses on ensuring the ongoing excellence, reliability, defensibility, security and validity of the National Physical Therapy Exam (NPTE) and related examinations.
  o Identifies and promotes regulations in physical therapy that ensure the delivery of safe and competent physical therapy care, while respecting states’ rights and responsibilities.

- ABPTS (American Board of Physical Therapy Specialties)
  http://www.abpts.org
  o A national professional organization representing more than 80,000 members throughout the US with specialist Certifications.
  o Current Specialist Certifications are in the following: Cardiovascular and Pulmonary, Clinical Electrophysiology, Geriatrics, Neurology, Orthopedics, Pediatrics, Sports, and Women’s Health.
Home Health Compass: Navigating the Sea of Home Health Regulators

- ACAPT (American Council of Academic Physical Therapy)
  [http://www.acapt.org](http://www.acapt.org)
  - A component of the American Physical Therapy Association created in 2010 for the purpose of advancing academic physical therapy by promoting the highest standards of excellence.
  - For the purposes of the council and its activities, academic physical therapy includes all aspects of physical therapist education, including clinical education, and post-professional education.

**Governmental Regulatory Bodies**

1. CMS (Centers for Medicare and Medicaid Services)
   a. Provides health coverage through Medicare, Medicaid, and the Children’s Health Insurance Program
   b. [www.cms.gov](http://www.cms.gov)
   c. [www.cms.gov/Medicare/medicare.html](http://www.cms.gov/Medicare/medicare.html)
   d. CMS Home Health Agency Center: [www.cms.hhs.gov/center/hha.asp](http://www.cms.hhs.gov/center/hha.asp)
   e. CMS Conditions of Participation: Medicare Benefits Policy Manual Chapter 7 Home Health Services

2. IRS (Internal Revenue Service)
   a. The United States government agency responsible for tax collection and tax law reinforcement.
   c. Provides clear definitions and distinctions between independent contractors and employees.
   d. Employers have the responsibility to understand federal (IRS) and state (department of labor) regulations in order to avoid potential tax penalties and fines.
   e. Use of same title and different work status under one roof is not accepted practice

3. US Department of Labor
   a. The United States government department charged with preparing the workforce with new and better jobs an ensuing the adequacy of American workplaces.

4. Workforce Commission
   a. A Workforce Commission is a state agency charged with overseeing and providing workforce development services to employers and job seekers of the state. A Workforce Commission strengthens the individual state’s economy by providing the
workforce development component of the Governor's economic development strategy.


5. MAC (Medicare Administrative Contractor) Central point of contact for providers of health care services
   a. CMS established MACs as multi-state, regional contractors responsible for administering both Medicare Part A and Medicare Part B claims.
   b. Making sure services are correctly coded and billed for, both before and after payment;
   c. Deciding which health care services are medically necessary. (MACs follow the national coverage determinations set by the CMS, but in cases where there is no such determination or the rules are too vague regarding a specific procedure, a MAC may develop a local coverage determination)
   d. Collecting overpayments
   e. Enrolling, educating and training Medicare providers on billing procedures

6. ZPICs (Zone Program Integrity Contractors):
   a. The primary goal of ZPICs is to investigate instances of suspected fraud, waste, and abuse. Most MACs will interact with one ZPIC to handle fraud and abuse issues within their jurisdictions.
   b. Seven program integrity zones were created based on the established MAC jurisdictions. New entities entitled Zone Program Integrity Contractors (ZPICs) were created to perform integrity functions in these zones for Medicare Part A, B, Durable Medical Equipment Prosthetics, Orthotics, and Supplies, Home Health and Hospice and Medicare-Medicaid data matching. ZPICs work under the direction of the Center for Program Integrity (CPI) in CMS.
   c. Website for interactive ZPic zones and links for reference.

<table>
<thead>
<tr>
<th>ZPIC</th>
<th>Zone</th>
<th>States in Zone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safeguard Services (SGS)</td>
<td>1</td>
<td>California, Hawaii, Nevada, American Samoa, Guam, and the Mariana Islands</td>
</tr>
<tr>
<td>AdvanceMed</td>
<td>2</td>
<td>Washington, Oregon, Idaho, Utah, Arizona, Wyoming, Montana, North Dakota, South Dakota,</td>
</tr>
<tr>
<td>Provider</td>
<td>Number</td>
<td>States</td>
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<td>--------------------------</td>
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</tr>
<tr>
<td>Cahaba</td>
<td>3</td>
<td>Nebraska, Kansas, Iowa, Missouri, Alaska</td>
</tr>
<tr>
<td>Health Integrity</td>
<td>4</td>
<td>Minnesota, Wisconsin, Illinois, Indiana, Michigan, Ohio, Kentucky</td>
</tr>
<tr>
<td>AdvanceMed</td>
<td>5</td>
<td>Colorado, New Mexico, Texas, and Oklahoma</td>
</tr>
<tr>
<td>Under Protest</td>
<td>6</td>
<td>Arkansas, Louisiana, Mississippi, Tennessee, Alabama, Georgia, North Carolina, South Carolina, Virginia, West Virginia</td>
</tr>
<tr>
<td>Safeguard Services (SGS)</td>
<td>7</td>
<td>Pennsylvania, New York, Delaware, Maryland, D.C., New Jersey, Massachusetts, New Hampshire, Vermont, Maine, Rhode Island, Connecticut</td>
</tr>
</tbody>
</table>

*Adapted from MLN Matters Number: SE1204 Revised

7. Medicare Fee-for-Service Compliance Program
   a. RAC (Recover Audit Contractor)
      i. The Recovery Audit Program’s mission is to identify and correct Medicare improper payments through the efficient detection and collection of overpayments made on claims of health care services provided to Medicare beneficiaries, and the identification of underpayments to providers so that the CMS can implement actions that will prevent future improper payments in all 50 states.
      ii. Publish what they will be going to be auditing. Can only look back three years from the date the claim was paid.
      iii. Need staff that is multi-disciplinary.
   b. CERT (comprehensive Error Rate Testing)
      i. Collect documentation and perform reviews on a statistically-valid random sample of Medicare FFS claims to produce an annual improper payment rate.

8. US Department of Health and Human Services (HHS)
   a. Principal federal agency for protecting Americans’ health and providing essential human services, especially for those least able to help themselves
   b. [www.hhs.gov](http://www.hhs.gov)
   c. OIG (Office of Inspector General) is to protect the integrity of the Department of Health and Human Services (HHS) programs as well as the health and welfare of program beneficiaries.
      i. [https://oig.hhs.gov](https://oig.hhs.gov)

9. OSHA (Occupational Safety and health Administration)
   a. [www.osha.gov](http://www.osha.gov)

b. Developed with the Occupational Safety and Health Act of 1970 to assure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education, and assistance.

10. CDC (Centers for Disease Control and Prevention)
   a. www.cdc.gov
   b. Developed to monitor disease progression and prevent transmission
   c. Home health care workers are frequently exposed to a variety of potentially serious or even life-threatening hazards. These dangers include overexertion; stress; guns and other weapons; illegal drugs; verbal abuse and other forms of violence in the home or community; blood borne pathogens; needle sticks; latex sensitivity; temperature extremes; unhygienic conditions, including lack of water, unclean or hostile animals, and animal waste. Long commutes from worksite to worksite also expose the home healthcare worker to transportation-related risks.
   d. Helpful Links for CDC

11. State DOH (Department of Health)
   a. Monitor the health status of the population
   b. Identify and eliminate preventable illness and accidents
   c. Reduce the severity of illness and disability
   d. Promote healthy behaviors
   e. Improve health care quality, access, continuity and accountability
   f. Lead the development of health policy and planning
   g. Generally the governing authority for health care organization operating licenses and oversee certificate of need process, where applicable.

12. State Professional Licensing
   a. May be under Department of Education, Department of the Professions or other departments (start at the State government homepage and search for professional licensing).
   b. State Regulations
      i. State Practice Act
   c. Licensing of Therapists

13. Accrediting and Certifying bodies
   a. The Joint Commission
      i. Independent, not-for-profit organization that accredits and certifies health care organizations and programs in the US that commit to meeting certain performance standards.
      ii. www.jointcommission.org
   b. CHAP (Community Health Accreditation Program)
      i. Surveys agencies providing home health, hospice, and home medical equipment services, to determine if they meet the Medicare Conditions of Participation and CMS quality standards.
      ii. www.chapinc.org

14. Quality
   a. Home Health Compare
      i. Quality of care ratings per OASIS and Medicare quality measures
      ii. www.medicare.gov/homehealthcompare
   b. CAHPS (Consumer Assessment of Healthcare Providers and Systems)
      i. Consumer survey to measure the experience of people receiving home health care from Medicare-certified home health agencies.
      ii. www.homehealthcahps.org

Suggested Additional Regulatory Resources:
1. Accreditation for Health Care: www.achc.org/
2. CMS Home Health Agency Center: www.cms.hhs.gov/center/hha.asp
3. Community Health Accreditation Program: www.chapinc.org/
5. Home Health PPS: www.cms.hhs.gov/HomeHealthPPS/
6. Home Health Quality Initiatives: www.cms.hhs.gov/HomeHealthQualityInits/01_Overview.asp#TopOfPage
   Occupational Safety & Health Administration (OSHA): www.osha.gov