



Getting Started With Joint Commission Accreditation: A 10 Step Checklist for Home Health Agencies

To help ensure an on-site survey in a timeframe that meets your needs, we suggest you complete the following:

Before you apply for Joint Commission accreditation:

Step 1 Fulfill your state's licensure requirements (if applicable in your specific state).

Step 2 If your agency plans to seek Medicare reimbursement, complete and submit the CMS 885a application to Medicare.

We require verification that your 855a application has been accepted by CMS before we can schedule your on-site survey. The form can be found at the CMS website (www.cms.hhs.gov)

Step 3 Begin serving patients.

Our evaluation reviews the care provided to patients therefore we require that your agency has serviced at least 10 patients in the past 12 months and has at least 2 active at the time of your on-site survey. For home health agencies seeking initial Medicare certification, 7 active patients are required at the time your on-site survey is conducted; all must be receiving skilled care. Additionally 5 home visits MUST be conducted for CMS to consider your survey complete. Those patients visited should be receiving skilled care also.

Step 4 Learn about our program and requirements.

Review our free Q & A Guides, attend a free upcoming webinar/teleconference and request free 60 day trial access to our electronic standards manual. Go to the home care page on our website to learn more. We are also happy to personally answer any questions you have, call us at 630.792.5070.





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You are now ready to apply for Joint Commission accreditation!

Step 5 Request access to our online application. Go to www.jointcommission.org/homecareapplication and tell us more about you.

You'll subsequently receive a password by email to access our online application at a dedicated extranet site where all future communications from the Joint Commission will be conveniently housed for you!

Step 6 Complete the application, submit your deposit.

Indicate on the application a realistic "ready" month within the next 12 months for your on-site survey. Most organizations need 3-4 months to prepare. Submit your \$1700 nonrefundable deposit online at your dedicated extranet site. The deposit is applied toward your annual and onsite fees. For information on our fees, please contact us at 630-792-5070.

Step 7 Notify your state in writing if you intend to utilize Joint Commission accreditation to satisfy Medicare certification survey requirements.

Send a letter to your state and keep a copy to share with your Joint Commission account executive.

Step 8 Complete a successful OASIS test transmission (if seeking Medicare Reimbursement).

Have verification of the successful transmission to share with your Joint Commission account executive.

Step 9 Verify your application information with your Joint Commission account executive.

Your account executive will be in contact with you by phone to validate information, collect supporting documentation needed for Medicare certification purposes, and provide additional support to you throughout the rest of the process.

Step 10 Prepare!

Upon receipt of your application deposit you will receive your standards manual (in hard copy and electronic form). Work with your colleagues to review requirements and identify any areas you need to address prior to your on-site survey. For questions on our requirements, contact our Standards "Help Desk" at 630.792.5900. For education and publications that can help as you prepare, visit www.jcrinc.com.