
SECTION ONE

Organization and Administration

	Policy No.
Mission Statement	1-001
Governing Body	1-002
Addendum: Governing Body Members *	1-002.A
Addendum: Governing Body Orientation Checklist *	1-002.B
Conflict of Interest	1-003
Addendum: Conflict of Interest Statement *	1-003.A
Referral Disclosure and Care Decisions	1-004
Public Disclosure Statement	1-005
Administrative Qualifications and Responsibilities	1-006
Appointment of Executive Director/Administrator	1-007
Designation of Individual in Absence of Executive Director/Administrator *	1-008
Home Health Administrator	1-009
Regulatory Compliance	1-010
Addendum: Additional State Requirements *	1-010.A
Professional Advisory Committee (OPTIONAL).....	1-011
Addendum: Professional Advisory Committee Members *	1-011.A
Policy Decisions	1-012
Development of Policies and Procedures	1-013
Addendum: Required Policy Checklist *	1-013.A
Addendum: Administrative Policy Renewal/Revision Flow Sheet *	1-013.B
Clinical Policies and Procedures	1-014
Use of Organizational Chart	1-015
Addendum: Organizational Charts *	1-015.A
Uniform Quality of Care	1-016
Experimental Research and Investigational Studies	1-017
Organizational Planning	1-018
Addendum: Organizational Goals and Objectives *	1-018.A
Contingency Planning	1-019
Contingency Plan if Organization Closes	1-020

SECTION ONE
Organization and Administration

	Policy No.
Branch Control	1-021
Contracted Service Providers	1-022
Home Health Contracted Services	1-023
Addendum: Home Health Contracted Services Review *	1-023.A
Written Agreements for Contracted Services	1-024
Addendum: Written Agreement for Home Care Services *	1-024.A
Scope of Services	1-025
Addendum: Organization-Specific List of Procedures and Treatments *	1-025.A
Listing of Services Provided *	1-026
Scope of the Behavioral Health Program	1-027
Financial Responsibility and Medicare Written Notices	1-028
Addendum: Advance Beneficiary Notice of Noncoverage (ABN)	1-028.A
Addendum: Home Health Change of Care Notice (HHCCN)	1-028.B
Addendum: Generic Expedited Determination Notice	1-028.C
Addendum: FFS Expedited Review Detailed Notice	1-028.D
Addendum: Additional CMS Resources for Expedited Notices	1-028.E
Program Planning	1-029
Marketing Plan	1-030

SECTION TWO

Program/Service Operations

	Policy No.
<u>Availability of Services</u>	2-001
<u>Patient Bill of Rights</u>	2-002
<u>Admission Criteria and Process</u>	2-003
Addendum: <u>Face-to-Face Encounter Procedure*</u>	2-003.A
<u>Admission Documents</u>	2-004
<u>Informed Consent/Refusal of Treatment</u>	2-005
Addendum: <u>Sample Informed Consent for Medical Photography</u>	2-005.A
<u>Physician Licensure Verification</u>	2-006
<u>Financial Responsibility</u>	2-007
<u>Complaint/Grievance Process</u>	2-008
<u>Fostering Internal Communication</u>	2-009
<u>Interface of Patient Data and Management Systems</u>	2-010
<u>Clinical/Service Data Collection</u>	2-011
<u>Access to Information</u>	2-012
<u>Principles of Information Management</u>	2-013
<u>Patient Privacy Rights</u>	2-014
Addendum: <u>Notice of Privacy Practices*</u>	2-014.A
<u>Minimum Necessary Uses of PHI</u>	2-015
<u>Minimum Necessary Disclosures of PHI</u>	2-016
<u>Uses and Disclosures of PHI</u>	2-017
<u>Authorization for Use or Disclosure of PHI</u>	2-018
<u>Minimum Necessary Requests For PHI</u>	2-019
<u>Privacy of Health Information of Deceased Individuals</u>	2-020
<u>Patient Requests for Privacy Restrictions</u>	2-021
<u>Patient Requests for Confidential Communications</u>	2-022
<u>Patient Requests for Access to PHI</u>	2-023
<u>Patient Requests to Amend PHI</u>	2-024
<u>Patient Requests for Accounting of PHI Disclosures</u>	2-025

SAMPLE

SECTION TWO

Program/Service Operations

	Policy No.
Fundraising and PHI	2-026
Marketing and PHI	2-027
Privacy Training	2-028
Sanctions for Privacy and Security Violations	2-029
Identity Theft Prevention Program	2-030
Addendum: Identity Theft Risk Assessment Worksheet*	2-030.A
Addendum: Identity Theft Risk Response Matrix*	2-030.B
Safeguarding/Retrieval of Clinical/Service Record	2-031
Computer Access to Information	2-032
Business Associates	2-033
Advance Directives	2-034
Addendum: Advance Directive Information Statement	2-034.A
Addendum: Durable Power of Attorney for Health Care*	2-034.B
Do Not Resuscitate/Do Not Intubate Orders	2-035
Cardiopulmonary Resuscitation	2-036
Assessment of Possible Abuse/Neglect	2-037
Addendum: Organization List of Private and Public Community Agencies That Provide or Arrange for Assessment of Suspected or Alleged Abuse/Neglect*	2-037.A
Ethical Issues	2-038
Nondiscrimination Policy and Grievance Process*	2-039
Facilitating Communication*	2-040
Addendum: Organization List of Interpreters Language*	2-040.A
Corporate Compliance Plan	2-041
Addendum: Sample Compliance Report	2-041.A
Corporate Compliance Officer	2-042
Internal Control Systems/Accountabilities	2-043
Addendum: Kickbacks, Inducements and Self-Referral	2-043.A

SECTION TWO

Program/Service Operations

	Policy No.
Social Media	2-044
Addendum: Social Media and Blog Guidelines	2-044.A
Privacy of PHI	2-045
Breach Analysis	2-046
Breach Notification	2-047
Security Management Process	2-048
Workforce Security	2-049
Information Access Management	2-050
Security Awareness and Training	2-051
Security Incident Procedures	2-052
Contingency Plan	2-053
Evaluation	2-054
Facility Access Controls	2-055
Workstation Use and Security	2-056
Device and Media Controls	2-057
Access Controls: Technical Safeguards	2-058
HIPAA Security Audit Controls	2-059
Integrity Controls	2-060
Person or Entity Authentication	2-061
Transmission Security	2-062
Whistleblower Protection	2-063

*Requires state or organization-specific information.

SECTION THREE

Fiscal Management

	Policy No.
<u>Annual Operating Budget</u>	3-001
<u>Capital Expenditure Plan</u>	3-002
<u>Financial Management and Control</u>	3-003
<u>Fiscal Solvency</u>	3-004
<u>Financial Reports</u>	3-005
<u>Fee Determination</u>	3-006
<u>Charity Care</u>	3-007
<u>Charge Verification</u>	3-008
<u>Billing and Collections</u>	3-009
<u>Accounts Receivable Review</u>	3-010
<u>Bad Debt Policy</u>	3-011
<u>Contractual Allowances</u>	3-012
<u>Cash Receipts</u>	3-013
<u>Purchasing Authorization and Accounts Payable*</u>	3-014
<u>Fixed Assets and Depreciation</u>	3-015
<u>Payroll Processing</u>	3-016
<u>Allocation of Time Worked</u>	3-017
<u>Donated Funds</u>	3-018
<u>Certificates of Insurance</u>	3-019
<u>OASIS Data Transmission</u>	3-020

*Requires state or organization-specific information.

SECTION ONE

Organization and Administration

	Policy No.
<u>Personnel Policies</u>	1-001
<u>Human Resources</u>	1-002
<u>Home Health Staffing Guidelines</u>	1-003
<u>Recruitment, Retention, Development, and Continuing Education</u>	1-004
<u>Categories/Qualifications of Personnel</u>	1-005
<u>Selection/Hiring of Personnel</u>	1-006
<u>Licensure/Certification/Registration</u>	1-007
<u>Equal Opportunity Employer</u>	1-008
<u>Standards of Care, Service, and Practice</u>	1-009
<u>Scope of Assessments/Qualifications</u>	1-010
<u>Job Descriptions</u>	1-011
<u>Termination</u>	1-012
<u>Personnel Turnover</u>	1-013
<u>Attendance and Absenteeism</u>	1-014
<u>Personnel Grievance Process</u>	1-015
<u>Personal Vehicle Use/Mileage Reimbursements</u>	1-016
<u>Dress and Appearance</u>	1-017
<u>Sexual Harassment</u>	1-018
<u>Standards of Conduct/Ethical Behavior</u>	1-019
<u>Personnel Record Contents</u>	1-020
<u>Performance Evaluations</u>	1-021
<u>Orientation</u>	1-022
Addendum: <u>Personnel Orientation Checklist</u>	1-022.A
Addendum: <u>Comprehensive Controlled Substances Diversion Prevention Program</u>	1-022.B
<u>Personnel Development</u>	1-023
Addendum: <u>Personnel Development/Inservice Needs Assessment</u>	1-023.A
<u>Resource Information</u>	1-024
<u>Competency Program</u>	1-025

*Requires state or organization-specific information.

SECTION ONE

Organization and Administration

	Policy No.
<u>Competency Assessment</u>	1-026
<u>Responsibilities/Supervision of Clinical Services</u>	1-027
<u>Training/Inservice Education</u>	1-028
<u>Home Health Aide Training</u>	1-029
<u>Home Health Aide Supervisor Visits</u>	1-030
<u>Specialized Services</u>	1-031
<u>Requirements for Supervisors/Preceptors</u>	1-032
Addendum: <u>Performance Observation Report (Sample)</u>	1-032.A
<u>Report to the Governing Body</u>	1-033
Addendum: <u>Organization Competence Report (Sample)</u>	1-033.A
<u>Access to Qualified Consultation</u>	1-034
<u>Consultation for Specialty Services</u>	1-035
<u>Communication with Office</u>	1-036
<u>Progressive Discipline Policy</u>	1-037
<u>Workplace Violence Prevention Plan</u>	1-038
Addendum: <u>Workplace Violence Prevention Incident Report Form</u>	1-038.A

*Requires state or organization-specific information.

SECTION TWO

Job Descriptions

	Policy No.
Policy Statement	2-001
Addendum: Job Description (Template)	2-001.A
Addendum: Physical Requirements	2-001.B
Professional Services Agreement for Medical Director	2-002
Addendum: Professional Services Agreement for Medical Director (Sample)	2-002.A
Executive Director/Administrator	
Finance Director	
Controller	
Human Resources Director	
Information Systems Director	
Marketing/Community Relations Director	
Clinical Director	
Clinical Records Manager	
Clinical Supervisor	
Managed Care Coordinator	
Referral/Intake Supervisor	
Performance Improvement Coordinator	
Home Care Coordinator	
Home Health Nurse Practitioner	
Infusion Therapy Nurse Coordinator	
OASIS Review Nurse	
Registered Nurse	
Addendum: Performance Evaluation for the Registered Nurse	
Licensed Practical/Vocational Nurse	
Addendum: Performance Evaluation for the Licensed Practical/Vocational Nurse	
Certified Home Health Aide	
Addendum: Performance Evaluation for the Certified Home Health Aide	
Addendum: Home Health Aide Training Agreement (Sample)	

*Requires state or organization-specific information.

SECTION TWO

Program/Service Operations

[Nurse Assistant](#)

[Rehabilitation Supervisor](#)

[Physical Therapist](#)

[Physical Therapy Assistant](#)

[Speech-Language Pathologist](#)

[Occupational Therapist](#)

[Certified Occupational Therapy Assistant](#)

[Social Services Supervisor](#)

[Medical Social Worker](#)

[Registered Dietician](#)

[Secretary/Receptionist](#)

[Billing Manager](#)

[Accounting Clerk](#)

[Data Entry/Computer Operator](#)

[Billing/Collections Clerk](#)

[Filing/Data Processing Clerk](#)

[Office Manager](#)

[Payroll and Benefits Coordinator](#)

*Requires state or organization-specific information.

SECTION THREE

Clinical Competency Program

	Policy No.
Scope of the Program/Process Methodology	3-001
Competency Based Orientation	3-002
Addendum: Initial Competency Assessment Skills Checklist – Registered Nurse	3-002.A
Addendum: Initial Competency Assessment Skills Checklist – Licensed Practical/Vocational Nurse	3-002.B
Addendum: Initial Competency Assessment Skills Checklist – Infusion Nurse	3-002.C
Addendum: Initial Competency Assessment Skills Checklist – Home Health Aide	3-002.D
Addendum: Initial Competency Assessment Skills Checklist – Physical Therapist	3-002.E
Addendum: Initial Competency Assessment Skills Checklist – Physical Therapy Assistant	3-002.F
Addendum: Initial Competency Assessment Skills Checklist – Speech-Language Pathologist	3-002.G
Addendum: Initial Competency Assessment Skills Checklist – Occupational Therapist	3-002.H
Addendum: Initial Competency Assessment Skills Checklist – Occupational Therapy Assistant	3-002.I
Addendum: Initial Competency Assessment Skills Checklist – Medical Social Worker	3-002.J
Addendum: Initial Competency Assessment Skills Checklist – Registered Dietician	3-002.K
Core Competency Skills	3-003
Annual Core Competence	3-004
Addendum: Performance Criteria (Template)	3-004.A
Addendum: Performance Criteria (Sample)	3-004.B
Addendum: Performance Criteria – Infusion Nurse	3-004.C

*Requires state or organization-specific information.