

ACHC Certified Consultant Training

Pharmacy, DMEPOS, & Sleep





ACHCU IS A BRAND OF ACCREDITATION COMMISSION for HEALTH CARE



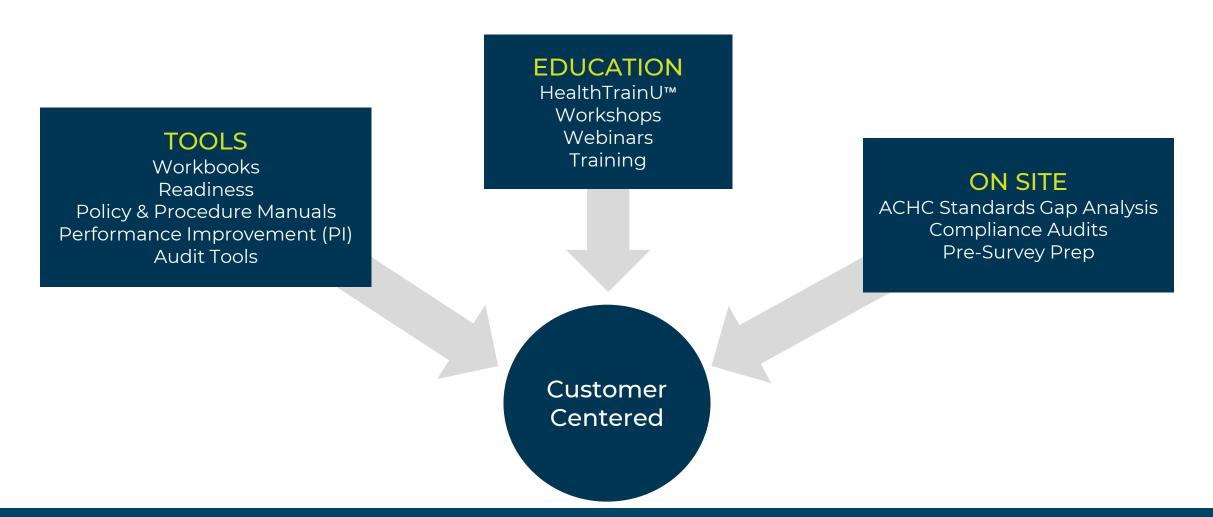
Greg Stowell

Associate Director, Education & Training





ACHCU









Kris Ravotti, RRT, RCP

Clinical Compliance Educator





Learning Objectives

- ACHC history and our commitment to quality
- Look at available Accreditation Programs and "Distinctions"
- Understand ACHC requirements for DMEPOS, Pharmacy, and Sleep Accreditation.
- Become familiar with the initial and renewal accreditation process.
- Look at Customer Central and how to enter and update customer information
- Learn how to prepare an organization for its accreditation survey.
- Establish expectations for your role as an ACHC Certified Consultant.
- Take a detailed look at the post-survey process (Plan of Correction).
- Regulatory resources available to you





About ACHC

- Nationally recognized AO with more than 35 years of experience
- CMS Deeming Authority for Home Health, Hospice, Renal Dialysis, Home Infusion Therapy, and DMEPOS
- Recognition by major third-party payors
- Approved to perform state licensure surveys
- Quality Management System that is ISO 9001:2015 Certified





ACHC Mission & Values

Our Mission

 Accreditation Commission for Health Care (ACHC) is dedicated to delivering the best possible experience and to partnering with organizations and healthcare professionals that seek accreditation and related services.

Our Values

- Committed to successful collaborative relationships
- Flexibility without compromising quality
- Every employee is accountable for their contribution to providing the best possible experience
- We will conduct ourselves in an ethical manner in everything we do





Experience the ACHC Difference

- Standards created for providers, by providers
- All-inclusive pricing no annual fees
- Personal Account Advisors
- Commitment to exceptional customer service
- Surveyors with industry-specific experience
- Dedicated clinical support
- Dedicated regulatory support
- Educational resources









ACHC Commitment To Quality





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Ensuring ACHC Quality

- CMS Deeming Authority
- ISO certification
- Customer satisfaction
- Complaint investigation
- Internal audits
- Quality council
- Surveyor expertise





The Best Possible Experience For Consultants

 ACHC is dedicated to delivering the best possible experience and to partnering with organizations and healthcare professionals who seek accreditation and related services.





Recognition As Industry Leader

- ACHC/PCAB acceptance
- Industry recognition
- Regulatory recognition
- Payor recognition







Role Of An ACHC Certified Consultant

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Role Of The Consultant

- To only provide consulting services in areas of expertise
- To provide guidance to organizations seeking ACHC Accreditation
- To assist organizations in achieving compliance with ACHC requirements
- To review the organization's policies and procedures to ensure they meet ACHC standards
- To help organizations navigate the application process
- To assist organizations in pre-survey training and audits
- To collaborate with ACHC Surveyors and staff in order to assist organizations with the ACHC Accreditation process
- To partner with ACHC as we continue to strive to provide the best possible experience and to assist our customers in providing the highest quality patient care





Role Of The Consultant (Cont.)

- To assist customers in the Plan of Correction (POC) process and develop strategies to ensure ongoing compliance
- To provide specialized guidance and expertise to ACHC customers
- To abide by the policies and procedures regarding the ACHC survey process
- To encourage customers to utilize the resources on Customer Central in order to maintain compliance





Communicating With ACHC

- Customer's permission:
 - Notify the Account Advisor.
 - Customer can provide you with access to their data.
- During the survey, be accessible for questions and guidance.
- After the survey, customer should address all questions to their Account Advisor.





Account Advisors

- Personal Account Advisors:
 - Primary contact with customers.
 - Assigned once a customer creates an account.
 - Assist customers with the ACHC survey process.
 - Questions that cannot be answered by them will be answered by the appropriate Clinical Manager.





Conflict of Interest

- ACHC Certified Consultants who are also ACHC Surveyors cannot perform a survey for an agency for which they have also acted as a consultant (five years).
- ACHC Certified Consultants who are also ACHC Surveyors cannot consult for an organization that they have surveyed for at least one year after the survey.
- If you have questions, contact the Program Director and get approval in writing.
- ACHC Certified Consultants who are also ACHC Surveyors should not use their Surveyor position as a marketing tool to get consulting business.
- ACHC Accreditation Guide to Success workbooks, policies and procedure manuals, and other tools are proprietary information.





Ongoing Expectations

- Remain up-to-date with ACHC standards as well as policies and procedures:
 - Did You Know emails
 - Regulatory updates on Customer Central
 - The Surveyor newsletter
- Remain up-to-date on the Medicare Quality Standards, supplier standards, specific state requirements, as well as other applicable regulations.
- When possible, attend program specific workshops annually
- Attend Certified Consultant Training every three years.







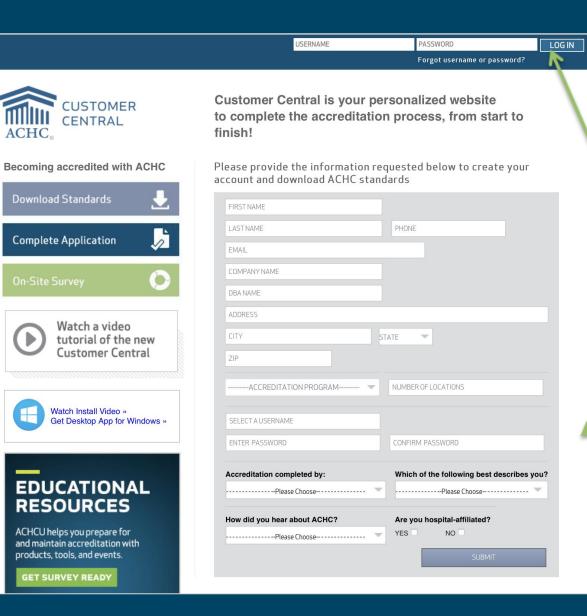
Customer Central & Overview of the Accreditation Process





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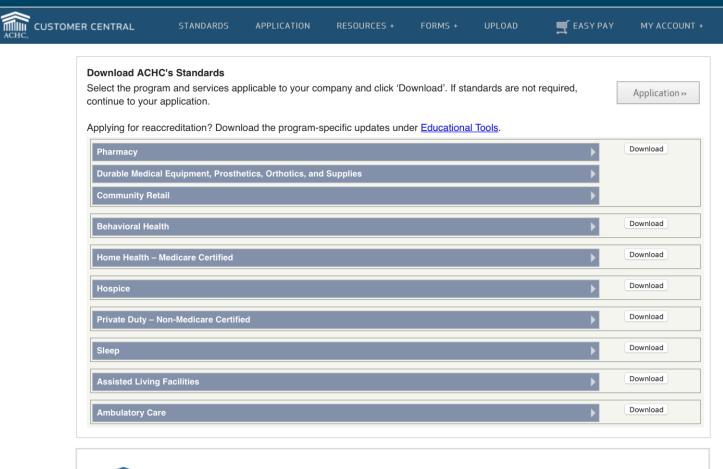


Go to: cc.achc.org

Log in above, or create a new account below.







Once inside your client's account, encourage them to purchase standards.

This allows continuous access to the standards.

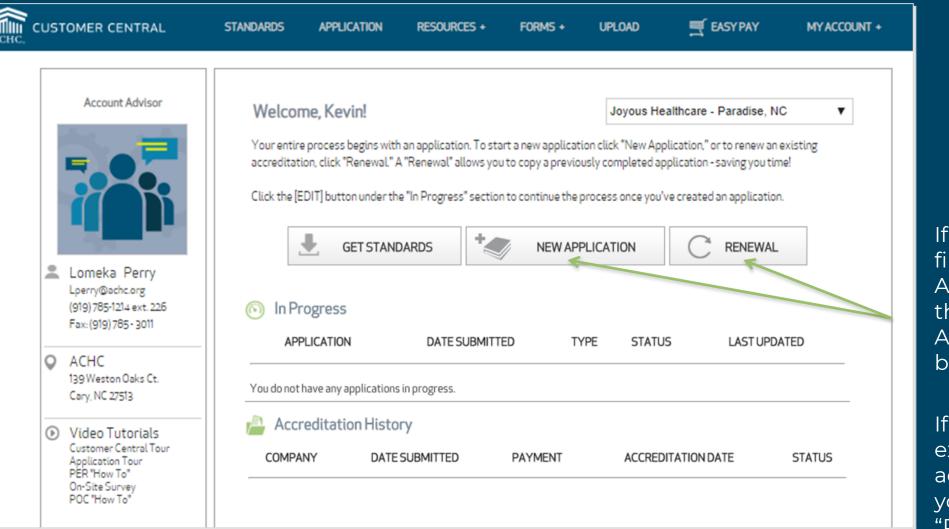


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If this is your client's first time with ACHC Accreditation, click the "NEW APPLICATION" button.

If you're in an existing accredited account (as shown), you can click on the "RENEWAL" button to save time.





Online Application

- NEW APPLICATION or RENEWAL
- Main office:
 - Profile
 - Location
 - Contacts
 - Services
- Additional locations branch locations
- Blackout dates
- Services provided





PER Checklist

PRELIMINARY EVIDENCE REPORT (PER) INITIAL CHECKLIST



DHARMACY

This checklist constitutes the requirements of the PER, which is mandatory for organizations applying for initial Pharmacy accreditation.

Review and acknowledge that all of the following requirements have been met and submit this signed checklist with the required items listed below.

Required items to be submitted to the Accreditation Commission for Health Care (ACHC):

Accreditation application

🗌 Non-refundable deposit

- □ Organization's new client/patient information/admission packet
- It is preferred that this information be provided to ACHC in digital format
- \square Organizational chart by position titles
- Any current citation(s) from a federal or state agency (e.g. FDA, Board of Pharmacy, etc.)
- 🗌 If the pharmacy performs sterile compounding, provide the procedures that outline the process of compounding
- These can be in the form of policies that match the ACHC Accreditation Standards or can be the complete
 procedures that are followed for the compounding process

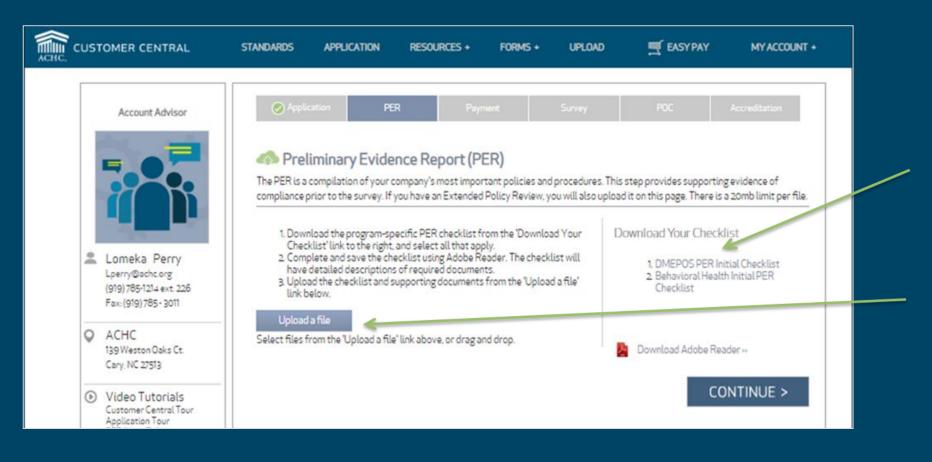
Confirmation of the following (initial in spaces provided):

- I attest that this organization possesses all policies and procedures as required by the ACHC Accreditation Standards
- Organization has 5 client/patient files, or can provide 5 mock files at the time of survey if equipment or supplies have not been provided
- I acknowledge that this organization was/is/will be in compliance with ACHC Accreditation Standards as of ______(date)

I, having the authority to represent this organization, verify that ______(organization's legal name) has met the above requirements for survey. Failure to meet any of the aforementioned requirements when the ACHC Surveyor arrives on site may result in additional charges to the organization for a subsequent survey to be performed when the organization has notified ACHC it has met all of the above requirements. I agree that during my accreditation with







First download the correct PER Checklist.

Completely fill out the PER Checklist and upload with supporting documents.





Extended Policy Review

- Optional review of complete policies and procedures by an ACHC Surveyor to determine compliance prior to the on-site survey
- Feedback from an ACHC Surveyor regarding the alignment of agency's policies and procedures to ACHC Accreditation Standards
- Option to purchase through the Customer Central portal
- Customized Reference Guide for Required Documents; policies and procedures available as a download





DMEPOS Addendum

- As part of your application process, you will be asked to complete a section titled "DMEPOS Supply Categories."
- It is very important that this information is completed accurately for each location.
- You will be asked to verify whether each branch location will bill Medicare and will have a Medicare number.
- Only select the codes for items that each location is actually providing; you should not select codes for items you hope to provide in the future.
- Your application addendum guides ACHC to ensure we have the proper accreditation programs and tools selected for your survey, and that we send a Surveyor with the necessary expertise.





Addendum

- During your survey, your Surveyor will fill out and ask you to sign a new DMEPOS Addendum.
- The Surveyor can only include items for which your organization can fill an order the day of the survey.
- You cannot add codes on your survey day that were not included in your application, as those additions may require additional standards, P&P, or specially trained/licensed personnel and could move you into a new accreditation category (e.g., OR01, S02-S03, MO8-9A, PE05).
- Make sure your application includes all addendum items you provide.





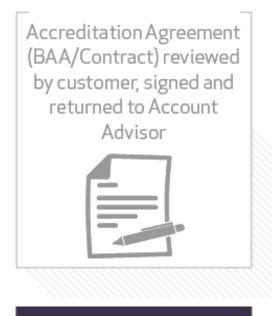
Addendum (Cont.)

- ACHC must know the states in which you are supplying products.
- Many states require license to ship or deliver products into their borders.
 - It is your responsibility to have the appropriate license or documentation as to why you believe you do not need one.
- An addendum item cannot be included without the proper state license.
- Organizations that will NOT bill for products under the DMEPOS program do not need to complete an addendum (they will not be included in reports to Medicare).





Agreement



14 Calendar Days

Payment Information

Deposit Received: <<<<INSERT DEPOSIT AMOUNT HERE>>>>

Discount (if applicable): <<<INSERT DISCOUNT AMOUNT HERE>>>

Remaining Balance: <<<<REMAINING BALANCE>>>

<<<<FIRST PAYMENT>>>> Due on line upon execution of this Agreement.

<<<SECOND PAYMENT>>> Due 12 months from date of the Accreditation Decision Letter.

<<<THIRD PAYMENT>>>> Due 24 months from date of the Accreditation Decision Letter.

Payment Method:

I wish to pay my bill online (an email with a link to online payment will be sent following the execution of this agreement)

└ I wish to receive a paper invoice for payment





So when am I officially "in process?"

- Completed application (online)
- Deposit (online)
- Completion and return of PER (online)
- Signed and returned Accreditation Agreement
- When will your survey be conducted?
 - New application Some point after "Date of Readiness" (excluding blackouts)
 - Renewal Based on when you apply and when accreditation expires



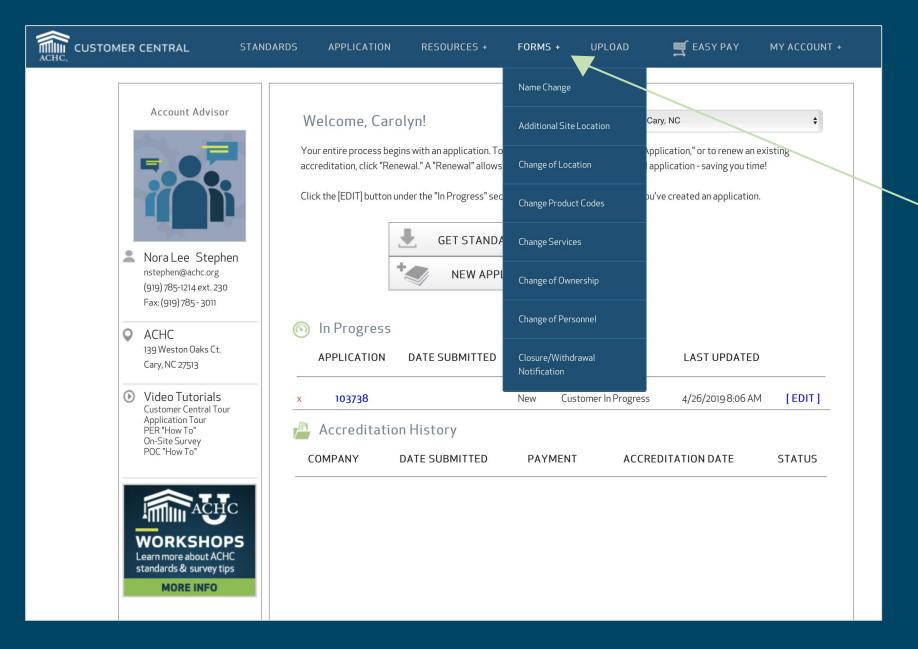




Customer Central Regulatory Resources



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Use the FORMS tab to edit company information





Branch Addition

| | R CENTRAL | STANDARDS | APPLICATION | RESOURCES + | FORMS + | UPLOAD | 🛒 EASY PAY | MY ACCOUNT + |
|---|---|--|---|--|--|--|--|---------------------|
| Т | he options below | ation and fees may | s that are curren | tly accredited and | need to make | e changes to t | neir company inforr | nation. Expand] |
| | DMEPOS/P Home Healt Florida Hom Home Healt Packet » PCAB Brand | e this form if you we te location, drop-sit harmacy Branch Ac th Branch Addition ne Health Branch A th/Hospice/Private ch Addition Packet Health Branch Add | e, warehouse, call Idition Packet » Packet » ddition Packet » Duty Parent Addi » | center, etc. Private Florida » tion Hospice Packet Sleep B | Duty Branch / Private Duty I Multiple Loc » ranch Additio cy (not PCAB) | Addition Packe Branch Addition ation Branch Ad | s include: branch, mu t >> n Packet ddition | Expand] Itiple |
| | CHANGE OF LOCA | ATION | | | | | | Expand] |
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Change of Ownership

| CUSTOMER CENTRAL | STANDARDS | APPLICATION | RESOURCES + | FORMS + | UPLOAD | 🛒 EASY PAY | MY ACCOUNT + |
|--|---|----------------|---------------------|---------------|----------------|---------------------|--------------|
| The options belo | y Inform w are for companies nation and fees may | that are curre | ntly accredited and | I need to mak | e changes to f | their company infor | mation. |
| NAME CHANGE | | | | | | | [Expand] |
| ADDITIONAL SI | TE LOCATION | | | | | | [Expand] |
| CHANGE OF LO | CATION | | | | | | [Expand] |
| CHANGE PRODU | JCT CODES | | | | | | [Expand] |
| CHANGE SERVI | CES | | | | | | [Expand] |
| CHANGE OF OV | VNERSHIP | | | | | / | [Expand] |
| have any quest Change of Change of Change of Change of | Please complete this form if your organization has gone through an ownership change. Please contact your Account Achave any questions on what qualifies as a change of ownership. Change of Ownership Checklist for DMEPOS and Pharmacy >> Change of Ownership Checklist for Home Health and Hospice >> Change of Ownership Checklist for PCAB >> Change of Ownership Checklist for Private Duty >> Change of Ownership Checklist for Sleep >> | | | | | | |
| CHANGE OF PER | RSONNEL | | | | | | [Expand] |
| CLOSURE/WITH | IDRAWAL NOTIFICATIO | DN | | | | | [Expand] |





Education Library

| | STANDARDS APPLICATION RESOURCES + FORMS + UPLOAD 🛒 EASY PAY | MY ACCOUNT + |
|---|---|-----------------|
| Account Advisor Account Advisor Nora Lee Stephen nstephen@achc.org (919) 785-1214 ext. 230 Fax: (919) 785- 3011 ACHC 139 Weston Oaks Ct. Cary, NC 27513 Video Tutorials Customer Central Tour Application Tour PER "How To" On-Site Survey POC "How To" | Contraction Library ACHC is dedicated to providing its customers with up-to-date news and education. Below is a list of educational mater has provided to customers. You will also find a list of helpful links to industry websites. Please contact your organization's Account Advisor with any questions. Educational Tools Educational program-specific documents for your industry. Image: Select-rest of Your You Know Temails Review archived program-specific emails. "Did You Know" Emails Section >> ACHC Today Review ACHC Today news. ACHC Today >> Industry Links Great resources for state-specific industry links. DMEPOS Image: Select-rest of Your You | erial that ACHC |





Continued Compliance

| CUSTOMER CENTRAL STAN | DARDS APPLICATION | RESOURCES + FOI | RMS + UPLOAD | 🛒 EASY PAY MY ACCOUNT 🕂 |
|--|-------------------|-------------------------------|---|---|
| Account Advisor | | intain ongoing compliance and | employ industry best practices. I d and then click to download the 24 Month checklist | Below are continued compliance checklists. 30 Month checklist |
| Nora Lee Stephen nstephen@achc.org (919) 785-1214 ext. 230 Fax: (919) 785 - 3011 | | | | |
| ACHC 139 Weston Oaks Ct. Cary, NC 27513 | | | | |
| Video Tutorials Customer Central Tour Application Tour PER "How To" On-Site Survey POC "How To" | | | | |





Account Advisors

- Key resource in navigating the accreditation process.
- Experts on the process, but not Pharmacists.
- If asking a regulatory or pharmacy practice question, your Account Advisor (AA) will direct your question to the appropriate clinical or regulatory department.
- Phone calls are good, but a well-worded email can help get you the most accurate answers.
- Customer Central and your workbook answer many of the most common process questions.







ACHC Accreditation Visits To Providers

Overview of the Accreditation Survey Day 



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Surveyors

- Who is your Surveyor?
 - Registered Pharmacist or expert in DMEPOS/Sleep
 - Expert on the services you provide
 - More than 20 years of experience
 - Completed comprehensive ACHC training
 - Completed required field training (precept)
 - Background checks and completed Business Associate Agreement (BAA)
 - Selected for your survey based on experience
 - Asked to verify that survey does not create a conflict of interest
 - You will not know the name of your Surveyor in advance





Survey Day

- Your unannounced survey date is selected with several factors in mind:
 - The date you apply and submit all required information
 - The date your accreditation expires (for renewals)
 - A date of readiness selected by new organizations
 - Your selected blackout dates
 - ACHC-listed holidays
- On your survey date, the Surveyor will attempt to call the main number listed on your applications:
 - They will not leave a call-back number but will state their name and that they will be arriving today for your survey.
- SRX (only) surveys with no DMEPOS accreditation may be announced surveys.





Survey Day (Cont.)

- The Surveyor is only a data collector; the Surveyor does not play any role in the ultimate review decision or the status of your accreditation.
- You will be given the opportunity to correct deficiencies during the survey day (if reasonable).
- Correcting deficiencies as you go eliminates the need to submit a Plan of Correction for those items, although the item is still recoded as a "no."
- If requested items cannot be located in a "reasonable time frame," the item must be marked as a deficiency.





Survey Day (Cont.)

- Opening conference (set the schedule for the day).
- Tour of facilities.
- Staff interviews.
- Personnel record review.
- Patient record review.
- Patient visits/interviews.
- Review of logs and Medicare-required documents.
- Review of PI/QI data.
- Exit conference.





Opening Conference

- Begins shortly after arrival of Surveyor.
- Management may invite all staff members.
- Good time to gather information needed by the Surveyor:
 - Logs, inspections, reports
 - Licenses, bonds, insurance as required
 - Personnel list
 - Staff schedules
 - HR records
 - PI/QI data
- The Surveyor will use this time to set the schedule for the day.





Personnel Record Review

- Surveyor will review personnel records for key staff and contract staff.
- Must be selected randomly by the Surveyor.
- May include all staff members or only select ones.
- Preferable to have someone from your organization review charts with us.
- Looking for items to include:
 - Application, tax forms, I-9 (as applicable)
 - Job descriptions and evaluations
 - Verification of qualifications/licenses
 - Orientation records, trainings, competencies, ongoing education
 - Medical information (TB/HepB as applicable)
 - Background checks
- For a complete listing of items required in the personnel record, review DRX4-1C of the ACHC Accreditation Standards.





Client Record Review

- Client records must be selected randomly by the Surveyor:
 - Preferable to choose from a list/printout of payments (EOB).
 - Preferable to have someone from your organization review with us.
- May include current patients and discharged patients.
- Both billing and medical records:
 - Representative of the care/services provided.
- Review of patient paperwork and education provided.
- Review of Plan of Service/Plan of Care and updates.
- DRX5-1A details the requirements of the client record.





Patient Visits/Interviews

- ACHC Surveyors will expect you to arrange for us to visit patients/customers as part of your accreditation visit.
- Please provide the Surveyor with a list of potential customers (who are within a reasonable driving distance).
- The Surveyor may also call some recent customers for a phone interview.
- If you have a location that customers may come to for products and/or services, the Surveyor may ask to speak with some of those customers as well.
- The customer needs to give you permission for us to visit or interview them (we do not require that it be in writing).





Review of Logs & Medicare-Required Documents

- Training/in-service logs
- Referral logs
- On-call schedule/logs
- Infection control tracking logs
- Temperature logs
- Fire and disaster drill logs
- Maintenance, repair, and cleaning logs
- Complaint logs
- Surety bond, liability and vehicle insurance, organizational chart, budget, contracts/BAAs, required licenses





Review of PI/QI Data

- Your Surveyor will expect to see evidence of ongoing PI/QI activities for the previous three years (if a renewal); PI/QI meeting notes alone do not meet these requirements.
- If an initial ACHC Survey, documentation of a PI plan will be limited, but the plan should be in place and evidence that you have started the process.
- If you are part of a large health system, your PI/QI data can be included in your corporate plan, but you need to be able to show compliance with each requirement.
- Refer to the Performance Improvement Made Simple Document located on Customer Central.





Closing Conference

- The ACHC Surveyor conducts a closing conference with the organization's representatives.
- Management may decide which staff members attend.
- Can provide a scheduled time for closing to accommodate phone participation by remote staff.
- Surveyor covers all areas of noncompliance with reference to the standard requirement.
- Great opportunity for you to provide missing items or seek clarification.
- The Surveyor cannot comment on how you performed, as they only collect and submit the data.
- The Surveyor should complete the closing conference by the end of the business day.





During Your Survey

- Management is welcome and encouraged to be a part of the entire accreditation process.
- Deficiencies may be corrected during the survey, if practical:
 - The deficiency will be corrected on-site but will be recorded as a "no."
- Seek clarification from your Surveyor while still on site:
 - If you believe they have misunderstood something, provide clarification.
- Surveyors are experts in the industry and have hands-on knowledge regarding the implementation of the ACHC standards.
 - Take advantage of their knowledge and experience.





Initial Surveys

- Initial surveys can be "complicated."
- Surveyor is assessing your level of compliance with a set of standards.
- Evidence is limited because ACHC can only hold you accountable back to a "date of readiness" (the date that you represent that you were in full compliance with ACHC requirements).
- As an example, let's assume that was 90 days before survey:
 - ACHC cannot hold you accountable for compliance prior to that date (but when you represent that you are in compliance you must be fully in compliance).





Initial Surveys

- Example:
 - Personnel record for someone hired three years ago:
 - You did not do reference checks, background checks, or initial orientation or training.
 - You can't go backward and do it now, however:
 - Surveyor will expect to see a background check completed since your date of compliance.
 - They will expect to see trainings and competencies since the date of compliance.





Initial Surveys

- Startups
- Mock Files
- PI Plan
- Audits/Inspections
- Personnel Training and Competencies
- Your job is to convince the Surveyor you know what to do and how to do it





Post-Survey Process

- Plan of Correction (POC) The POC template will be sent electronically from your Account Advisor.
 - All documentation must be on the POC template.
 - The POC is provided for you to document the plan to correct each deficiency noted on the SOF as well as your plan to prevent a recurrence.
 - POC must be submitted electronically.





Summary Of Findings Report For Survey On 12/13/2017 | Services: HME, IRX, SRX

Deficiency Category - Policies & Procedures Standard

DRX2-10F

Written policies and procedures are established and implemented that document the requirement calls that are received from the clients/patients that the organization serves. The organization has a tollfree telephone number available to clients/patients and providers.

Comments

At the time of survey the organization did not have a X policy that addressed tracking the response time frames in which calls are answered, the abandonment rate of the calls that are received and the generation of reports required by contracted payors and manufacturers of the products.

Corrective Action: The organization should add to their policy related to phone procedures the company's goals for response time frames in which calls should be answered and for call abandonment rates. The policy should also discuss the generation of any reports that might be required by payors. The organization is working with their current phone service provider to ensure the required information can be provided.





Deficient

Summary Of Findings Report For Survey On 12/13/2017 | Services: HME, IRX, SRX

| Deficiend | cy Category - Interviews/Observations | | Defi- |
|-----------|--|--|-------|
| Standard | | Comments | cient |
| DRX1-7A | The organization is in compliance with all applicable federal, state, and local laws and regulations. | Best Practice: The organization should ensure that the FDA side effect statement is on new and refilled prescriptions. | |
| DRX7-1A | Written policies and procedures are established and implemented that address the surveillance, identification, prevention, control, and investigation of infectious and communicable diseases and the | At the time of survey the organization did not have a TB exposure plan which included regional TB prevalence rates that were updated when new data is released by the CDC. | x |
| | compliance with regulatory standards. | Corrective Action: A TB exposure plan with the regional TB prevalence rates should be available and updated as new data is released by the CDC. | |
| DRX7-1D | The organization reviews and evaluates the effectiveness of the infection control program. | At the time of survey, the organization did not have an infection control tracking log for employees. | х |
| | | Corrective Action: The organization should develop and implement an infection control tracking log for employee related infections. | |





| Deficien Standard | cy Category - Pharmacy with ** <u>Evidence R</u> | Comments | Defi- cient |
|----------------------|--|--|----------------|
| DRX5-2B | All clients/patients receive an evaluation/assessment of their needs prior to initiation of Pharmacy Services. | 3 of 3 files reviewed did not have evidence of an initial assessment/evaluation: Action Required: All client files need evidence of: Client/Patient information: Client/Patient demographics Physical health component: Appropriateness of in home therapy, (if applicable) Identification of health problems Review of medications Dosing Frequency Method Special dietary requirements Other needed information that could impact the level of care/ services required to meet the client's/patient's needs Principle diagnosis and other pertinent diagnoses Allergies. The social component: Identification of the responsible party An emergency contact The environmental component: Identification of safety or health hazards Presence of adequate living arrangements Home environmental assessments include the potential for safety and security hazards (i.e., throw rugs, furniture layout, bathroom safety, cluttered stairways and blocked exits, unsecured doors, lack of smoke detectors, fire risks). The economic component: A review of the financial resources available to pay for the services/care provided. Functional limitations: Documentation of all functional limitations. The mental component: Orientation/memory Reasoning/judgment . | |





ACHC Accreditation Decisions



ACCREDITED

Provider meets all requirements for full accreditation status. Accreditation is granted but Plan of Correction (POC) may still be required.*



ACCREDITATION PENDING

Provider meets basic accreditation requirements but accredited status is granted upon submission of an approved POC.



DEPENDENT

Provider has significant deficiencies to achieve accreditation. An additional on-site visit will be necessary to be eligible for accreditation.



DENIED

Accreditation is denied. Provider must start process from the beginning once deficiencies are addressed.





PLAN OF CORRECTION (POC)



ONCE COMPLETED, PLEASE EMAIL THIS FORM TO THE ATTENTION OF YOUR ACCOUNT ADVISOR

Organization: Greg's Pharmacy

| Standard | Plan of Correction (Specific action taken to bring standard into compliance) | Date of Compliance (Date correction to be completed) | Title (Individual responsible for correction) | Process to Prevent Recurrence (Describe monitoring of corrective actions to ensure they effectively prevent recurrence) | POC Compliant (ACHC internal use only) | Comments (ACHC internal use only) |
|----------|--|--|---|---|---|--------------------------------------|
| TCRX3-B | What would be a proper POC for this deficiency? | What's a reasonable time frame? | | How do you prevent this from happening again? | | |
| | | | | | | |
| | | | | | | |





Plan of Correction

- Required when a deficiency is found.
- Must be submitted within 30 days of receipt.
- Follow a specific format.
- Submitting a thorough and complete Plan of Correction (POC) will expedite your accreditation.
- All deficiencies require a POC.
- Some deficiencies require evidence of correction.







Marketing Your Consultant Business



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ACHC Certified Consultant

- Becoming an ACHC Certified Consultant is a notable accomplishment that you should be proud to display:
 - It shows a dedication to providing the very best service to your clients.
 - It provides assurance to healthcare providers when choosing your business.
 - It highlights your knowledge of ACHC Accreditation and your ability to guide them through the process.
 - Allows you access to materials, such as audit tools, designed for our Certified Consultants to help with customer preparation.





Consultant Portal

- Access and update your consultant profile displayed on achc.org.
- As a consultant, you will have access to tools to use with your customers through the portal.*
- Access to your branding kit.
- Stay in-the-know with updates from ACHC and ACHCU:
 - Upcoming webinars
 - Did You Knows
 - News updates from ACHC specifically for you

*Only accessible to Certified Consultants.

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| accreditation organization ACHC has CMS Deeming management system that |
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Consultant Listing

- ACHC is proud to host the listing of all of our certified consultants on our website.
 - Customers can search the list to find the best consultant based on their needs:
 - Searchable by P&P manuals, mock surveys, training events, etc.
 - Be sure to keep you profile up-to-date through the portal.





Branding Elements

- ACHC is committed to providing the tools you need to leverage your certified status:
 - Certificate
 - Logos and Brand Guidelines
 - Sample Press Release
 - Certified Consultant Pin







In Conclusion

- As an ACHC Certified Consultant, you can establish trust with providers.
- Utilize the resources available to you to enhance the value of your consultant business.
- Use multiple communication channels to create multiple touch points and reach a broader audience with your message.





ACHC Resources

- ACHC's Marketing Department is available to help with your marketing needs.
- Feel free to contact them at ainfo@achc.org or (855) 937-2242.







THANK YOU

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ACHCU IS A BRAND OF ACCREDITATION COMMISSION for HEALTH CARE