**Ohio Living Holdings**

**Establishing New Skilled Nursing Facility as an Approved Vendor**

**When Providing Hospice Services within that Skilled Nursing Facility**

**and Related Disbursement Processing**

**As of: November 14, 2022**

**Purpose:** Policy to ensure that that information is appropriately and thoroughly obtained to enable timely establishment as a vendor within the accounts payable software system of a new skilled nursing facility (SNF) when hospice services are intended to be provided within that particular SNF to enable timely disbursement of the hospice Medicaid room and board payments to the SNF.

Currently, Federal regulations require the hospice agency to bill the State of Ohio (Medicaid) or it’s delegated MyCare providers for ‘room and board’ for which hospice agency received 95% of a SNF’s specific Medicaid rate applicable during the month of service provided. SNF’s generally expect to receive 100% of their current Medicaid rate regardless of the hospice agency only receiving 95%.

**Policy/Process:**

1. New hospice referral is processed in accordance with the OLH Referrals-Admissions-Initial Authorizations Process (Referral Process).
2. During that process, Business Development (BD) staff, Health Information Coordinators (HIC) and/or Clinical Team Leaders/Supervisors (CTL) identify the following:
	1. Site has never provided hospice services within the particular SNF and thus does not have a **Residential Hospice Agreement Nursing Facilities** **(RHANF)** on file,
	2. Site has provided hospice services within the particular SNF, but team is aware that ownership has changed, and thus the current RHANF on file may not be effective,
	3. There is no RHANF on file.
3. BD will engage with SNF representative to coordinate obtaining a signed RHANF.
	1. BD will provide the standard RHANF; however, SNF’s may prefer to utilize their own developed agreement which may acceptable.
	2. Any SNF provided RHANF that are being newly established should be sent the Corporate Executive of Operational Planning and Analysis for review.
		1. In that person’s absence, contract may be sent to the Division Manager of Accounts Receivable or the Chief Financial Officer for review (Finance Department).
		2. Those positions are authorized to sign the agreement, as well as the site Executive Director and the Division Executive of Home Health & Hospice, provided that review and approval has been received from one of the designated Finance Department representatives.
	3. Once BD obtains a RHANF signed by both parties, the BD will forward to the site Medical Records Coordinator who will save a pdf version of the Contract to: G:\Corproate SI Efile\Hospice Contracts (separate folders identified by calendar year obtained and by site).
4. BD will also request and obtain from the SNF a current and signed IRS Form W-9 as well as a completed **Hospice Room and Board SNF Billing Contact Information** form.
5. Once those two items are received, the BD will forward to the site Medical Records Coordinator (MRC), or the acting MRC, who will then email to hhaccountspayable@ohioliving.org as well as to HospiceRB@ohioliving.org.
6. Accounts payable team will identify the document within the email, review the information, and establish the new SNF within the general ledger accounts payable software as well as the paperless software.
	1. If there is incomplete or unverifiable information that was provided to the AP team, then an email will be sent to the site Medical Records Coordinator requesting them to obtain corrected or missing information.
	2. Once received, AP team will finish processing the request.
	3. AP team saves the W-9 in a designated AP e-folder.
7. Disbursement to the SNFs will be made on a monthly basis subsequent to the month that services were provided.
	1. Disbursement will be made within that timeframe provided that the BD’s and/or HIC’s have appropriately identified that the patient resides in a SNF as communicated on referral information, and that the HIC has documented as such within the designated field within Home Care Home Base. That identification and action should occur during the completion of the Referral Process.
	2. With each month end close, a HCHB **Hospice Room & Board Roster Report** will be generated by the Accounts Receivable Coordinator (ARC) assigned to that particular site and will be sent to each site Medical Record Coordinator. This report is intended to be released to the MRC by the 6th business day of the month.
	3. The MRC is responsible for reviewing (or coordinating the review with site colleagues) the HCHB Hospice Room & Board Roster Report to confirm whether all hospice patients for which service is being provided within a SNF have been appropriately captured.
		1. If a SNF is missing from that monthly HCHB report, site MRC will notify the ARC team of the missing site as well as determine whether supporting RHANH is on file and information to have established within the AP system has been provided in accordance with above-reference process. If not, then such information needs to be obtained and provided, while providing status update to ARC team.
		2. ARC’s will maintain confirmation of review and any needed additions within a designated G:\Holdings Billing folder for purposes of future referral should there be an issue non-payment raised by a SNF.
		3. Response from the MRC to the ARD should be provided within 2 business days of having sent the HCHB report (8th business day of the month).
		4. Once response from MRC is received, ARC will then generate SNF specific statements from HCHB.
		5. ARC will email to each site (based on Billing Contact Information obtained above) their monthly statement by the 10th business day of the month from the HospiceRB@ohioliving.org email address.
		6. Messaging to the SNF is that they have by 2 business days from receipt to provide any questions, corrections or confirmations. If no confirmation is received by that time, ARC will assume that it was confirmed.
		7. ARC will email monthly statements to the AP team to enable statement routing to the AP Team to load in the system, then obtain approval sign-off by the authorized approver.
		8. Provided that information is available to the AP team and statements are approved before noon on Thursday, then check disbursements will be generated within the Thursday-Friday timeframe of that same week. Any delays will push the check disbursement processing to a following week.

End