



DEPARTMENT: Legal	POLICY DESCRIPTION: Servicing Patients in Assisted Living Facilities (ALFs)
PAGE: 1 of 2	REPLACES POLICY DATED: 11/1/97, 2/11/98, 1/1/06
EFFECTIVE DATE: July 1, 2021	REFERENCE NUMBER: LL.014
APPROVED BY: Ethics and Compliance Policy Committee	

SCOPE: All Company affiliated Home Health Agencies (HHAs) whether provider-based or freestanding.

PURPOSE: To provide direction to HHAs in providing home health services, including home health aides' services, to patients residing in Assisted Living Facilities (ALFs).

BACKGROUND: Home health services for patients residing in an ALF must meet Medicare qualifying and coverage criteria for a Homecare admission and services should be limited to those not duplicated by the ALF's licensing requirements or the ALF's contract with the resident. An ALF includes any personal care, congregate care or other similar facility.

Under Medicare rules, it is not reasonable and necessary to provide homecare services where the ALF is required by license or contract to provide these same services. Further, it would be inappropriate to provide such services at no charge or a discount to an ALF responsible for performing the services as this could be considered an inducement for referrals in violation of state and federal laws.

POLICY:

HHAs may NOT provide free or discounted services to the ALF or its residents, as this could be considered an inducement for referrals in violation of state or federal laws. For example, it would be inappropriate to provide, without fair market value compensation, a nurse on-site for emergencies, resident consultations regarding wellness, blood pressure or cholesterol screening, staff training or a home health aide to assist patients. If the ALF has a physician who sees patients on-site, the HHA may accept appropriate referrals from this physician. However, the HHA may not offer the physician free space, supplies, equipment or any other inappropriate inducement to do business with the HHA. In addition, the HHA may not provide a nurse to assist the physician while seeing patients at the ALF unless the physician pays for those services on a commercial fair market value basis.

Use of home health aides in an ALF should be provided on an exception basis only and after a determination has been made that the service is not duplicative

However, if allowed by State licensure regulations, an ALF may contract with an HHA directly to provide personal care or other home health services on a fee-for-service or commercial basis. These services are NOT separately billed under the Medicare Homecare benefit and compensation for such services must be consistent with fair market value.

PROCEDURE:

The HHA is responsible for:

- Knowing the level and type of care the ALF is required to provide.
- Obtaining State laws governing facilities and investigating what services the ALF is required to provide to residents. Consult with Operations Counsel for assistance in interpreting state law.

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- If an ALF fails to provide care as required by State licensure regulations, the HHA is to contact the State licensing authority.
- Communicating with ALFs regarding duplication concerns. If an ALF is unable or unwilling to provide the HHA with the necessary documentation to avoid duplication, the Homecare agency must not continue business with that ALF. ALFs will be asked to notify the HHA of any change in the patient's level of care or change in service that the ALF is required to provide the patient.
- HHA caregivers are responsible for reporting any change in a patient's level of care to the HHA.
- If the HHA receives an Additional Development Request (ADR), the HHA should contact the ALF and obtain a list of services provided to the particular patient by the ALF.

The Regional Vice President and Agency Director/Administrator are responsible for:

- Keeping the HHA apprised of any changes in State licensure regulations regarding ALFs and patient care requirements.
- Maintaining applicable State statutes at the agency.
- Approving the use of a Home Health Aide at an ALF.

The HHA Director or designee is responsible for:

- Coordinating education to the ALFs.
- Determining which services the HHA may provide which do not duplicate the State ALF licensure requirements or the patient's contract with the ALF.
- Identifying any personal care services that the ALF is required to provide to the patient and assure that the HHA services do not duplicate the ALF's licensing or contract requirements.
- Following up on any change in patient status and reevaluating the potential for duplicative services.
- Verifying that all documentation to support the use of a HHA in an ALF is secured in the patient's chart.

REFERENCES:

1. 42 C.F.R §409.47, §§1862 (a)(1)(A) and 1862(a)(9) of the Social Security Act
2. Medicare Benefit Policy Manual (100-02), Ch. 7, Section 30.1.2(A)
3. OIG Compliance Program Guidance for Home Health Agencies (63 Fed. Reg. 42418 (Aug. 1998)).