RHC Cost Report Planning (Year-End)

HBS
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RHC Cost Report Planning (Year-End)
12/31 Cost Reports are Due 5/31

Step	Description
1	If you would like us to prepare your cost report, please let us know.
2	RHC Cost Report and HIPAA Agreements are currently being sent out. (If you don’t receive one by 11/20, please reach out to me.)
3	Return signed RHC Cost Report and HIPAA Agreements, along with retainer to HBS.

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RHC Cost Report and HIPAA Agreements

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RHC Cost Report Preparation Agreement

Healthcare Business Specialists

and

Name of Clinic
Street Address
City, State Zip Code

Healthcare Business Specialists (HBS) agrees to provide RHC cost reporting services to Name of Clinic in City, State for the fiscal year end December 31, 2022. The cost report will be due May 31, 2023.

The services will include preparation of the Medicare Cost Report, Medicare Workpapers, Electronic Submission File and Print Image, and a USB Drive with a PDF of the submission. The services also include the preparation of the special cost report submission to Medicaid, if the State requires a separate reporting form.

The clinic will receive a copy of the cost report submission for your files and a notebook to maintain the cost report submission. HBS will provide support for any Desk Review that is performed by the Medicare Administrative Contractors (MAC) as a part of this service. If the clinic is selected for a Compensation Audit or a higher-level audit than a Desk Review, there may be additional fees incurred and those will be billed at our standard hourly billing rate.

HBS will not audit or confirm the accuracy of your accounting records or the information that is submitted to us. We will recount visits, flu shots, bad debts, and other information to ensure mathematical accuracy; however, we will not conduct procedures to determine that numbers provided are accurate. It is the responsibility of the clinic to provide HBS with the proper information to accurately prepare a cost report and the clinic will attest to the accuracy and compliance with Medicare reporting requirements by signing the cost report. The clinic should provide auditable, original source documents from their records.

HBS will take the information, compile it, and enter it into the RHC Cost Reporting software in the manner prescribed by Medicare. We cannot guarantee that Medicare will accept all costs claimed. Owner Physician Compensation, Transportation, Bad Debts, Advertising and Promotion, and Related Party Costs may be excluded from reimbursement by the MAC. These

HIPAA BUSINESS ASSOCIATE AGREEMENT

THIS BUSINESS ASSOCIATE AGREEMENT (hereinafter "Agreement") is between Name of Clinic (hereinafter "Covered Entity") and Healthcare Business Specialists (hereinafter "Business Associate"). Covered Entity and Business Associate may be referred to herein individually as "Party" or collectively as "Parties."

Covered Entity acknowledges that it is subject to the Privacy Rule (45 CFR Parts 160 and 164) promulgated by the United States Department of Health and Human Services pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191.

Business Associate provides services or goods to Covered Entity pursuant to one or more contractual relationships detailed below and hereinafter referred to as "Service Contracts". Please check all that apply to your RHC:

1. ___X___ RHC Cost Report Preparation
2. ________ Annual Evaluation Preparation
3. ________ RHC Startup Services
4. ________ Mock Inspection - Walkthrough

In the course of executing Service Contracts, Business Associate may come into contact with, use, or disclose Protected Health Information (defined in Section 1.7 below). Said Service Contracts are hereby incorporated by reference and shall be taken and considered as a part of this document the same as if fully set out herein.

In accordance with the federal privacy regulations set forth at 45 C.F.R. Part 160 and Part 164, Subparts A and E, which require Covered Entity to have a written contract with each of its Business Associates, the Parties wish to establish satisfactory assurances that Business Associate will appropriately safeguard "Protected Health Information" and, therefore, make this Agreement.

1. DEFINITIONS

1.1. Terms used, but not otherwise defined, in this Agreement shall have the same meaning as those terms in 45 CFR §§ 160.103 and 164.501.

1.2. "Designated Record Set" shall have the meaning set out in its definition at 45 C.F.R. § 164.501.

1.3. "Health Care Operations" shall have the meaning set out in its definition at 45 C.F.R. § 164.501.

1.4. "Individual" shall have the same meaning as the term "individual" in 45 CFR § 164.501 and shall include a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).

1.5. "Privacy Officer" shall have the meaning as set out in its definition at 45 C.F.R. § 164.530(a)(1).

1.6. "Privacy Rule" shall mean the Standards for Privacy for Individually Identifiable Health Information at 45 CFR Part 160 and Part 164, subparts A and E.

1.7. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR § 164.501, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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4	Work on setting up access to the IDM System (instructions to follow).

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Identity Management (IDM) System

CMS created the IDM System to provide providers with a means to request and obtain a single User ID, which they can use to access one or more CMS applications.

The IDM System provides the means for users to be approved to access many other CMS systems and applications. IDM governs access to CMS systems by managing the creation of user IDs and passwords, setting up multi-factor authentication (MFA), and the assignment of roles within CMS applications.

Identity Management (IDM) System
Learning Objectives

- How to Create a New User Account
- IDM Self Service Dashboard (Overview)
- How to Request a Role for a New Application
- How to Add Attributes to an Existing Role
- How to View and Cancel Role Requests

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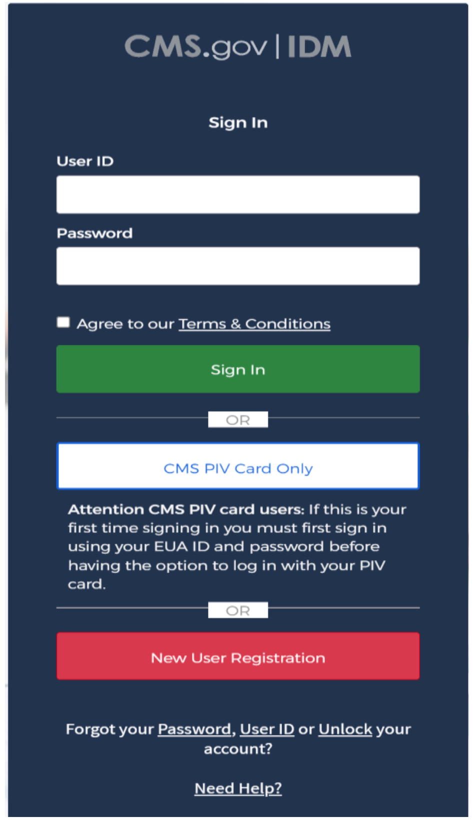
Identity Management (IDM) System
How to Create a New User Account

1. Navigate to https://home.idm.cms.gov/.

2. Click the ***New User Registration*** button.



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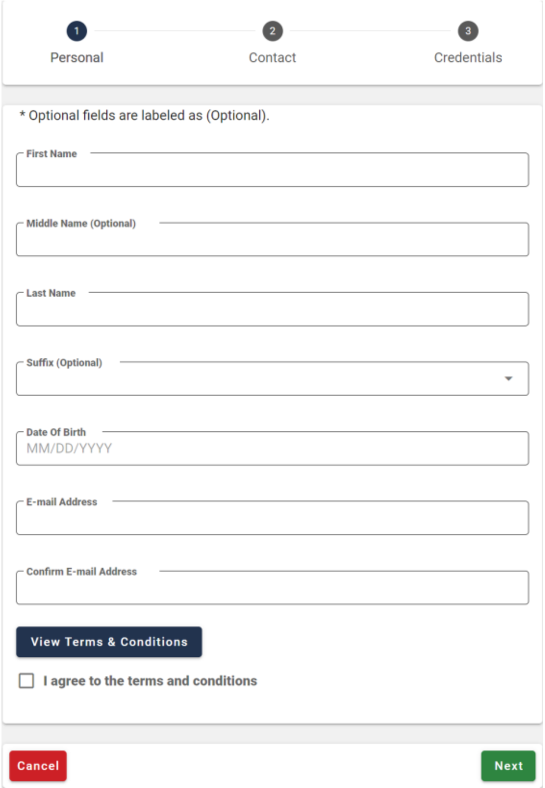
Identity Management (IDM) System

How to Create a New User Account

3. Enter the requested information (i.e., **Name**, **Date of Birth**, **E-mail Address**, etc.)
   - Make sure the you enter an exact match in the ‘E-mail Address’ and ‘Confirm E-mail Address’ fields.

4. Click the ***Terms & Conditions*** button. Read the IDM terms and conditions then click the ***Close Terms & Conditions*** button.

5. Click the checkbox to acknowledge agreement with the terms and conditions, then click the ***Next*** button.



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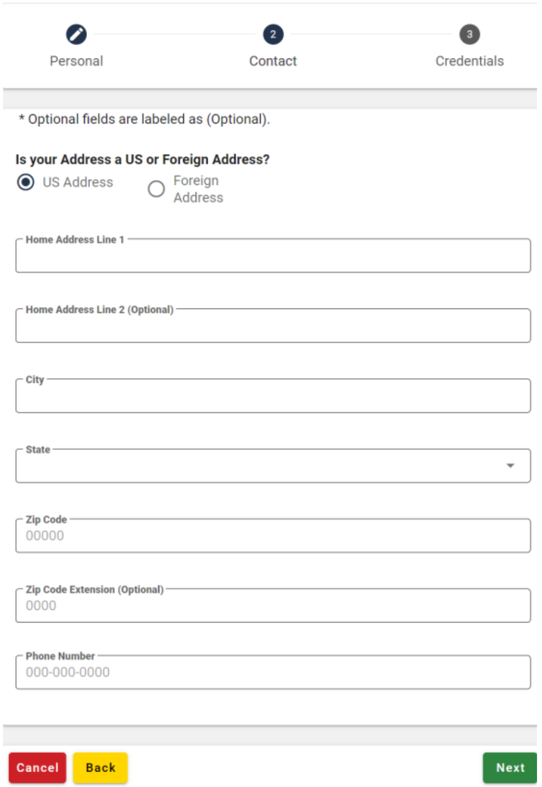
Identity Management (IDM) System
How to Create a New User Account

6. Enter the **Home Address**, **City**, **State**, **Zip Code** and **Phone Number**.

7. Click the ***Next*** button.



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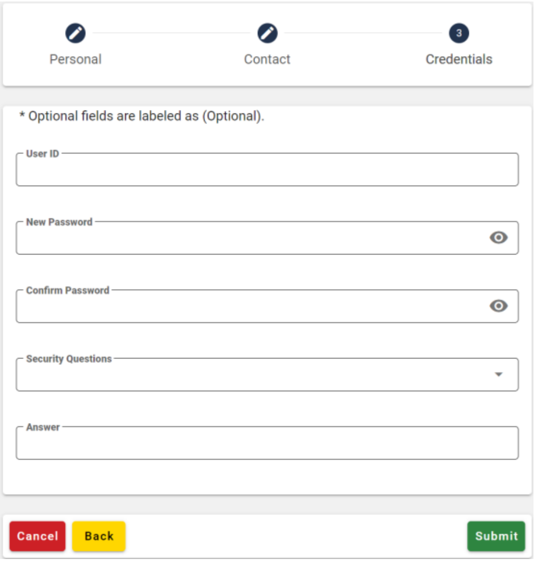
Identity Management (IDM) System
How to Create a New User Account

8. Enter the desired **User ID**, **Password** and **Confirm Password**.
   - The Password and Confirm Password must match.

9. Select a **Security Question** from the list.
   - Type the security question answer into the Answer dialog box.

10. Click the ***Submit*** button to submit the account registration request. The system will display a message that indicates the account was successfully created.

11. Click the ***Return*** button.



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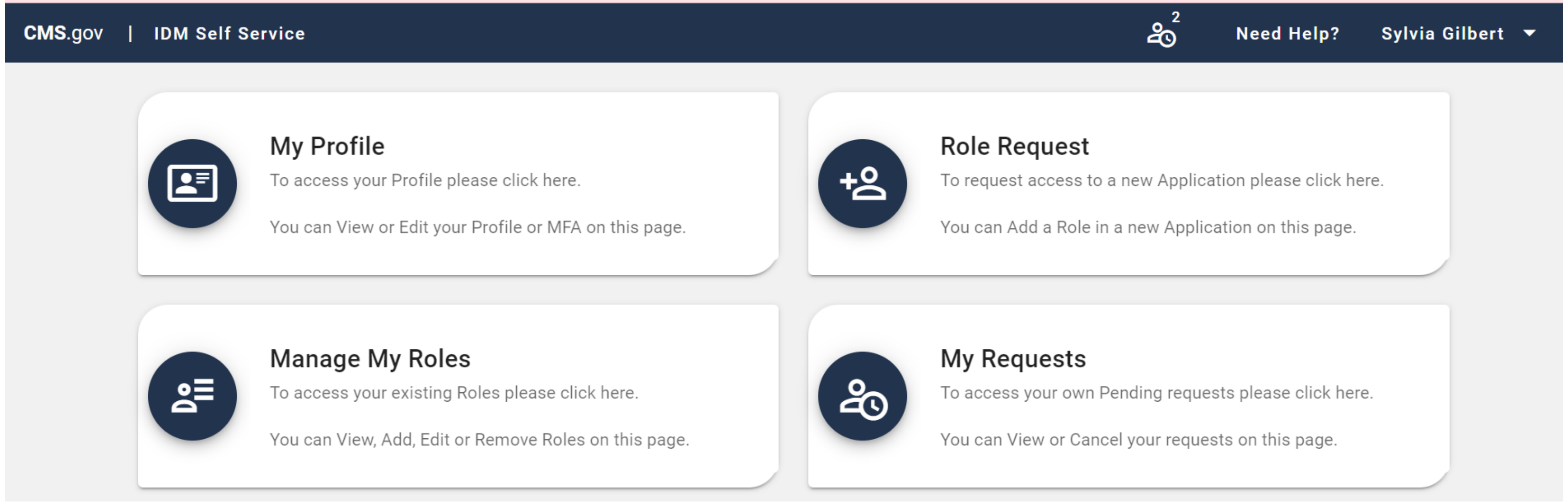
Identity Management (IDM) System
IDM Self Service Dashboard (Overview)

The IDM Self Service Dashboard provides access to functions that allow users to manage their user profile, request new applications, and manage roles for applications to which they have been granted access.



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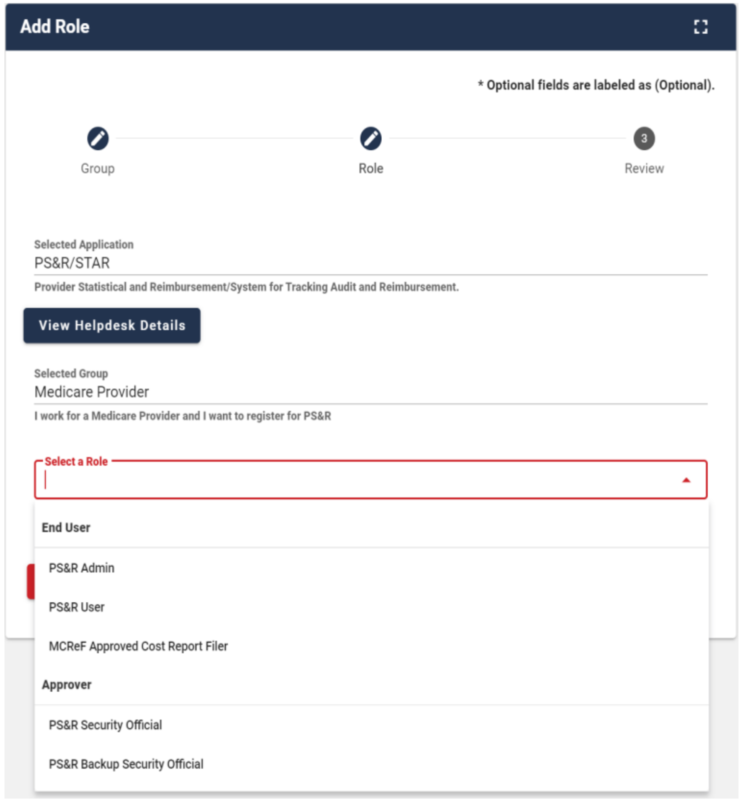
Identity Management (IDM) System
How to Request a Role for a New Application

1. Click the ***Role Request*** button.

2. Select an application (PS&R/STAR). The Select a Role menu appears after an application is selected.
   - You will want to select either 'PS&R Security Official' or 'PS&R User', depending on if someone from your clinic is already set up with access.

3. Select a role. The Remote Identity Proofing (RIDP) terms and conditions appear after role is selected.



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Identity Management (IDM) System
How to Request a Role for a New Application

4. Review the RIDP terms and conditions, check the “I agree to the terms and conditions” selection box, then clinic the ***Next*** button.

5. Complete the Identity Verification form and click the ***Next*** button.

6. Answer the proofing questions and click the ***Verify*** button.

7. Select the required attributes from the Attribute menu.

8. Review the role request information and click the ***Review Request*** button. The Reason for Request dialog box appears.

9. Enter a justification and click the ***Submit Role Request*** button. The Role Request window displays a Request ID and a message which states that the request was successfully submitted to an approver for action.

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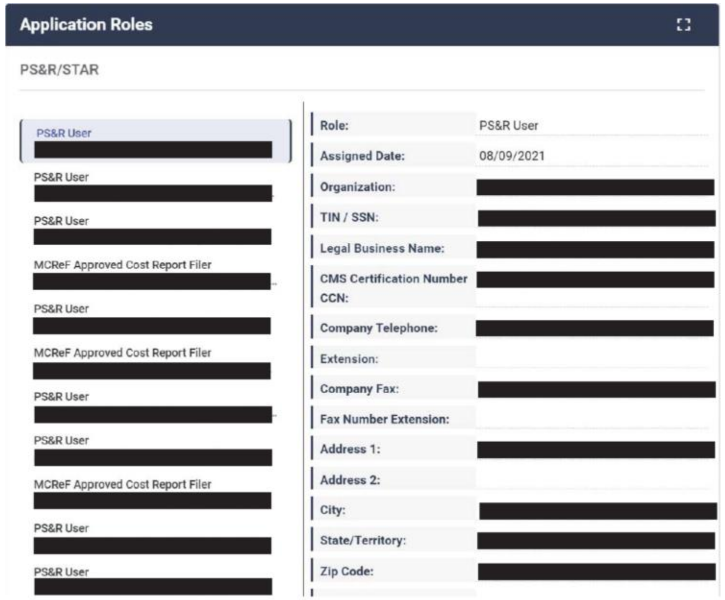
Identity Management (IDM) System

How to Add Attributes to an Existing Role

1. Click the ***Manage My Roles*** button.

2. Click the ***View Details*** button.



Identity Management (IDM) System

How to Add Attributes to an Existing Role

3. Click the ***Modify Role*** button. The Edit Role Details window appears. This window contains fields that are similar to those used during the initial role request, but it only permits the user to modify role attributes.

4. Add one or more role attributes.

5. Enter a justification statement and click the ***Submit Changes*** button.

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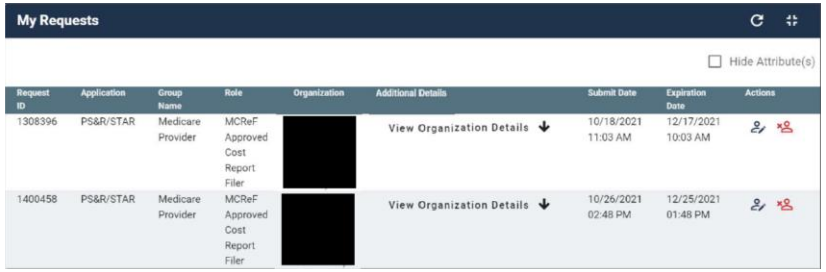
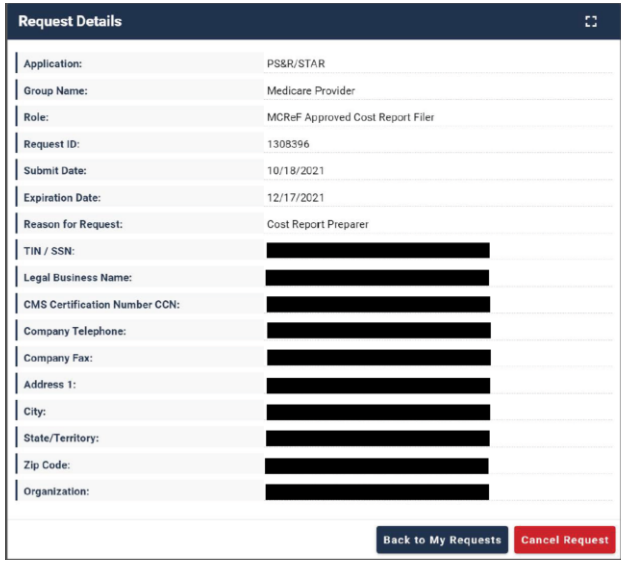
Identity Management (IDM) System

How to View and Cancel Role Requests

1. Click the ***My Requests*** button.



2. Click the ***View Details*** button.



3. Click the ***Cancel Request*** button for the role request that will be cancelled.

4. Click the ***Cancel Role Request*** button.

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Provider Statistical & Reimbursement (PS&R) System

Providers that file cost reports are required to register for the PS&R system through Individuals Authorized Access to the Centers for Medicare & Medicaid Services (CMS) Computer Services (IDM) to obtain the PS&R reports. The PS&R Redesign will be utilized for all cost reports with fiscal years ending January 31, 2009 and later. These cost reports will be both filed and settled using PS&R Redesign.

An approved PS&R User can order reports.

NOTE: For those clinics who plan on pulling their own PS&R reports, you will want to make sure that the Service Period is broken down into the following:

- **Period 1: 1/1/2021 – 3/31/2021 (RHC Capped Rate: $87.52)**
- **Period 2: 4/1/2021 – 12/31/2021 (RHC Capped Rate: $100.00)**

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RHC Cost Report Checklist

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2022 RHC Medicare Cost Report Workpaper Checklist

ITEM NUMBER	DESCRIPTION OF WHAT IS NEEDED	√ IF INCLUDED
1	We need at least one of the following items to determine the total expenses paid by clinic during the cost reporting period. The reports should be for the entire accounting period (which is typically 12 months). a. Trial Balance b. Financial Statement from Accountant or QuickBooks c. Federal Tax Return for the Practice	
2	We need at least one of the following to determine the total patient visits or encounters. a. CPT Frequency Report (by Provider) b. Written, Manual Visit Count using the Updated Included Cheat Sheet	
3	W-2's with the **employee's position listed** on the W-2 or what the employee did during their employment. **Please write the number of hours the employee worked during the year on the W-2, as well, and if the employee split time in laboratory or X-Ray.**	
4	We need all of the following information to claim Influenza and Pneumococcal reimbursement on the cost report. a. Medicare Logs with Patient Name, HIC Number, and Date of Service b. A Count, Listing, or Log for Non-Medicare Patients c. Invoices Supporting the Vaccine Purchases During the Year	
5	**PS&R Report.** RHCs are required to obtain their own PS&R from the EIDM portal from the IACS system. Please start this process immediately if you do have a log-in as it may take six to eight weeks. We need the summary 710 and 71S reports for the period of the cost report. (We have included a seven-page PDF with instructions.) **Add Dani Gilbert as your Authorized Cost Report Preparer for EIDM if you want HBS to file the cost report electronically.**	
6	**Medicare Bad Debt Listing.** If you have any Medicare bad debts, please prepare a separate Bad Debt listing for Medicare bad debt and Medicare/Medicaid crossover bad debt, using the Excel template we provide. If you do not have a copy of the Excel template for this, please email us and request one.	

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ITEM NUMBER	DESCRIPTION OF WHAT IS NEEDED	√ IF INCLUDED
7	**Related Party Transactions.** List any related party transactions (RPT), including any rental payments by the clinic to the physician/owner or the owner's relatives. Please copy 1099s for our file if your think you may have a RPT.	
8	**S-3 Clinic Information** Please see the workpaper which includes identifying information about the clinic and includes the clinic's hours of operation. Please also indicate any non-RHC hours that the clinic may have.	
9	**Laboratory.** Please complete the Laboratory Time Log if you do not have dedicated employee to lab or expenses directly expensed to lab in the trial balance.	
10	**FTE Calculation.** Please complete the Provider FTE Calculation Workpaper attached to this document.	
11	**Depreciation.** Please include a depreciation schedule so we can convert depreciation to straight-line depreciation.	
12	**Please enclose any Medicare correspondence including letters requesting a cost report, Notices of Program Reimbursement for prior years, or any adjustment reports from the Medicare Administrative Contractor (MAC). This will ensure your cost report is filed to the correct MAC.**	
13	Please provide **visit counts** in the following formats: a. Total Medical visits, total mental health visits, and visits by interns and residents b. Visits by payor mix for inclusion on Worksheet S-3 i. Title V- CHIP ii. Title XVIII – Medicare iii. Title XIX – Medicaid iv. Other – Commercial, self-pay, etc. Please see the Workpaper S-3 Total Visits by Payor Mix and complete.	

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RHC Cost Report Checklist

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ITEM NUMBER	DESCRIPTION OF WHAT IS NEEDED	√ IF INCLUDED
14	Please complete Worksheet S-1 regarding your **Malpractice costs:** a. Malpractice premiums, ______________ b. paid losses, and ______________ c. self-insurance costs ______________ **Is the malpractice insurance a claims-made or occurrence policy?**	__________
15.	**IMPORTANT: Please send any letter from the MAC with any type of settlement to for from the MAC. If we do not report these settlements on the cost report the clinic may have to pay back funds to Medicare when the report is final settled.**	
16	Please provide the information for the person who will sign the Cost Report First Name ______________________ Last Name ______________________ Title ______________________ Email ______________________	
17	Is the Clinic part of an entity that owns or leases multiple RHCs? If so, provide the following information: Name of Entity ______________________ Street ______________________ P.O. Box ______________________ City ______________________ State ______________________ Zip Code ______________________	

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6	Obtain & upload information to Client Portal as early as possible. (Let me know if you do not currently have access to your portal.)

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Client Portal (Canopy)

Files

Name	Date added
2022 TennCare Reports (SCFC)	10/18/2022
2021 RHC Cost Report	5/20/2022
2021 TennCare Reports (SCFC)	10/4/2021
2020 TennCare Reports (SCWIMC)	3/17/2021
2020 RHC Startup	3/17/2021
Summary of TennCare Reporting Reconciliations on 3 24 2022.xlsx	10/18/2022
Final PPS Rate Reconciliation from TennCare on 2 3 2022.pdf	10/18/2022
Final PPS Rate Letter from TennCare on 1 29 2022.pdf	3/1/2022

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7	HBS will prepare the RHC Cost Report and submit electronically, upon client approval.

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Questions?

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Contact Information

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RHC Consultant
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