

Adding Services

Dear Provider:

To add services submit the following information and/or documentation:

A letter on your agency's letterhead to include the following:

- The agency's license number. The number is located on agency's license.
- The service to be added
- The date the service is intended to be offered- the effective date
- Documentation which shows the home health agency is qualified to provide the additional service:
 - Personnel orientation to the job (checklist). The checklist should be signed (initialed by employer and employee).
 - Copy of job description-submit a standard job description
 - Personnel qualifications (resume)
 - Copy of current license, degree, or applicable certification
 - A current Expanded or National criminal history report (within last 3 months).
 - Procedures for the supervision of personnel.
 - Record of physical exam showing that personnel are free of communicable disease, to include evaluation for tuberculosis in accordance with 410 IAC 17-12-1 Sec. 1(i).
- Contracts (if applicable) between the home health agency and any person offering the new service. If submitting a contract please ensure the contract specifies:
 - ✓ Patients are accepted for care only by the primary home health agency.
 - ✓ Services to be furnished.

- ✓ Necessity to conform to all applicable home health agency policies including personnel qualifications.
- ✓ Responsibility for participating in developing plans of care.
- ✓ Manner in which services will be controlled, coordinated, and evaluated by the primary home health agency.
- ✓ Procedures for submitting clinical notes, scheduling of visits, and conducting periodic patient evaluations.
- ✓ Procedures for payment for services furnished under the contract.
- Signature of administrator on the letter (the name must be on record with the Department).

For Medicare providers only:

- All the above, plus:
 - Include a copy of CMS-1572 –Survey & Deficiencies form. Complete items 1-19 only.

Once the above mentioned documents are submitted and approved, the Department will update our database to reflect the changes and send a confirmation letter to the agency. A home health agency may not offer additional services until it has received approval from the department and/or CMS to do so.

Submit change request to:

Kelly Hemmelgarn
Program Director, Acute Care
Indiana State Department of Health
Acute Care Division
2 N Meridian St., Section 4A 07
Indianapolis, IN 46204