PROVIDER BASED RULES AUDIT PROTOCOL

Operating Under the Same License

1.

This simple audit is useful for hospital-based entities, departments and remote locations. The provider-based rules are not applicable to ASCs, HHAs, CORFs, SNFs, labs and ESRD facilities.

Do the entities operate under the same license (unless other	-	•
	Yes	NO
2. <u>Financial Integration</u> **		
Is there shared income and expenses between the entities?	Yes	No
Are the costs of the provider-based entity reported in a cost	t center of the n	nain provider?
The the costs of the provider sused charty reported in a cost	Yes	-
Is the provider-based entity easily identifiable in the main [provider's trial	balance?
	Yes	No
3. <u>Clinical Integration</u> **		
Do the entities have an integrated medical staff?	Yes	No
Do the entities have integrated medical records?	Yes	No
Is quality monitoring the same?	Yes	No
Do patients at the provider-based facility have access to the	e main provider Yes	
4. <u>Public Awareness</u> **		
Is the main provider name included on:		
Outside signage	Yes	No
Advertising	Yes	No
Patient Bills	Yes	No
Registration Forms	Yes	No
Medical Records	Yes	No

^{**}Not meeting a few of the examples cited by CMS wouldn't necessary mean that the entity is not provider-based. However, going forward, it would be prudent to consider why examples and not met and then meet as many as possible so payment to the main provider will not be questioned.

<u>Additional Rules For Off-Campus Providers (located 250 yards from main buildings)</u>

1.	<u>Ownership</u>		
	e provider-based entity 100% owned by the main campus of the provider that bills for its services)	•	
	r r		
2.	Control**		
Do th	ne entities have the same governing body?	Yes	No
Do th	ne entities have common bylaws?	Yes	No
Does	the main provider's governing body have final a	pproval over ad	ministrative
		Yes	
2.	Administration and Supervision**		
	provider-based entity is under the same monitoring the main provider?		ht as any other No
	the provider-based director maintain a reporting countability to the governing body just like any		-
		-	No
	ne entities share, contract out together or have the der-based entities:	main provider	manage the
	Billing services	Yes	No
	Records	Yes	No
	Human resources	Yes	
	Payroll	Yes	
	Employee salary structure	Yes	No
	Employee benefit package	Yes	
	Purchasing services	Yes	No

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 a. Does the main provider have a disproportionate share adjustment of greater than 11.75%, and is it owned or operated by: (a) a unit of state/local government; (2) a public or non-profit corporation granted governmental power; or (3) a private entity with a state/local contract that includes operating the off-campus clinic? Yes No
b. Is the main provider a children's hospital that: (1) has intensive care units that accept newborn infants; (2) is in a rural area at least 35 miles from other neonatal intensive care units; and (3) is located within a 100-miles of the hospital-based clinic? Yes No
c. Is the provider-based clinic a rural health clinic and does the main hospital have fewer than 50 beds and is it located in a rural area? Yes No
IF NONE OF THE ABOVE:
During a 12-month period are 75% of the provider-based entities patients from the same zip code as 75% of the main provider's patients? Yes No
During a 12-month period did 75% of the provider-based entities patients that needed inpatient care receive it from the main provider? Yes No
If the provider-based entity was not in operation for 12 months, is it in the same zip code area as at least 75% of the patients served by the main provider?

Yes____ No____

3.

Location

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