Missouri Department of Health and Senior Services (DHSS)
Process of Initial Accreditation: Hospice

Step One — Provider Should:
- Obtain the Accreditation Commission for Health Care (ACHC) Accreditation Standards through Customer Central at cc.achc.org
- Review the ACHC Accreditation Standards and begin compiling your policies and procedures
- Obtain the Missouri regulations for Hospice by contacting Bureau of Home Care and Rehabilitative Standards (BHCRS)

Step Two — Provider Should:
Complete application for licensure for BHCRS, including all required forms:
- Health Benefit Agreement
- Assurance of Compliance
- Office of Civil Rights Packet
- State disclosure of Ownership and Control Interest Statement
- Letter of Intent for State Licensure and/or Medicare Certification
- Inform BHCRS at 573-751-6336 that ACHC will be provider’s accreditor of choice

Step Three — BHCRS Should:
- Forward notice to provider and ACHC that the provider application is complete

Step Four — Provider Should:
- Submit a completed ACHC application
- Submit a $1,500 deposit
- Review and sign the ACHC Agreement for Accreditation Services

Step Five — ACHC Should:
- Schedule and conduct a one-day announced accreditation survey
- Notify provider and BHCRS of its accreditation decision in writing
- Once an approval decision is received, the provider will be granted accreditation for one year

Step Six — BHCRS Should:
- Issue a temporary license
- Issue a letter of acknowledgement to ACHC and the provider granting permission to provider to start developing a patient caseload

Step Seven — Provider Should:
- Submit an 855A application to CMS
- Obtain written documentation that the 855A application has been approved and submit copy of approval letter to ACHC
- Acquire minimum patient caseload: 5 patients served, 3 patients active at time of Initial Medicare Certification survey
- Provide all core services
- Inform ACHC in writing when Step Seven is complete

Step Eight — ACHC Should:
- Create a second ACHC Agreement for Accreditation Services and submit to provider
- Schedule and conduct an unannounced Initial Medicare Certification survey
- Once an approval decision is received, the provider will be granted accreditation for three years
- Notify provider, BHCRS, and CMS of its accreditation decision in writing. (CMS will make the decision of granting deemed status after receiving a report from ACHC)

Step Nine — BHCRS Should
- Issue a permanent license

If any of the above steps are not completed, the second survey will not be conducted.