



# NOSORH

# How to become an RHC

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Health Services Associates, Inc

National Organization of **State Offices of Rural Health**

# Estimated Timelines



National Organization of  
**State Offices of Rural Health**

# Independent RHC Certification Timeline/Process

## Month 1-3

- Gather information from client, complete Medicare and State applications.
- Submit 855A/588, Rough draft policy & procedure manual for review.
- Submit forms to State.
- Receive initial approval letter for 855A.
- Conduct Mock Survey.
- Conduct Advisory Council Meeting.
- Submit Survey Request Letter.

## Month 3-6

- Policy & procedure manual finalized.
- State/Deeming survey conducted, Plan of Correction is completed if necessary. Note, RHC effective date is day survey is passed, retro RHC rates to that day.**
- Tie In Notice is received from CMS (typically w/in 45-60 days from survey approval)
- RHC Billing 101 Training.
- Set Medicare and Medicaid Rates.
- Receive Medicare EFT approval letter.

## Month 6-9

- Apply as RHC with Medicaid.
- Receive Medicare Rate Letter.
- Clinic Applies for EDI and ERA with Medicare.
- Receive Medicaid approval letter, Clinic applies for EDI/ERA.
- Clinic submits RHC claims and contracts HMO Advantage Plans.

## Annual Requirements After Becoming RHC

- Quarterly credit balance reports faxed to MAC.
- Annual Medicare cost report (due 5 months from fiscal year end).
- Annual Medicaid cost report (varies by State).
- Final PPS rate setting with Medicaid (process varies by State).
- Annual Advisory Committee Meeting.
- Annual Policy and Procedure Manual Review.

# Provider Based RHC Certification Timeline/Process

## Month 1-3

Gather information from client, complete Medicare and State applications.

Submit 855A/588, Rough draft policy & procedure manual for review.

Submit forms and civil rights policies to State.

Receive initial approval letter for 855A.

Conduct Mock Survey.

Conduct Advisory Council Meeting.

Submit Survey Request Letter.

## Month 3-6

Policy & procedure manual finalized.

**State/Deeming survey conducted, Plan of Correction is completed if necessary. Note, RHC effective date is day survey is passed, retro RHC rates to that day.**

Tie In Notice is received from CMS (30-45 days from survey approval).

RHC Billing 101 Training.

Set Medicare and Medicaid Rates.

Receive Medicare EFT approval letter.

Provider Based Attestation Completed.

## Month 6-9

Apply as RHC with Medicaid.

Receive Medicare Rate Letter.

Clinic Applies for EDI and ERA with Medicare.

Receive Medicaid approval letter, Clinic applies for EDI/ERA.

Clinic submits RHC claims and contracts HMO Advantage Plans.

## Annual Requirements After Becoming RHC

Quarterly credit balance reports faxed to MAC.

Annual Medicare cost report (due 5 months from fiscal year end).

Annual Medicaid cost report (varies by State).

Final PPS rate setting with Medicaid (process varies by State).

Annual Advisory Committee Meeting.

Annual Policy and Procedure Manual Review.

# TIMELINE STEPS

- Step 1: Gather your information.
- Step 2: Complete and submit 855A/588.
- Step 3: Complete and submit forms to the State (Civil Rights, etc).
- Step 4: Receive initial approval letter for 855A.
- Step 5: Make sure all compliance is met for survey readiness.
- Step 6: Submit survey request letter or complete application for deeming entity.

# TIMELINE STEPS

- Step 7: Survey will be conducted by State or selected deeming entity. NOTE: the date in which you are fully approved becomes your effective date.
- Step 8: Tie in notice (final approval letter) is received from CMS (45-60 days).
- Step 9: Apply as RHC with Medicaid.
- Step 10: Set Medicare and Medicaid rates.
- Step 11: Receive Medicare EFT approval letter (not all MACs send an approval letter so you may have to call for a verbal approval).
- Step 12: Attestation to be completed (Provider Based only).

# TIMELINE STEPS

- Step 13: Receive Medicare Rate letter from MAC.
- Step 14: Apply for EDI and ERA with Medicare.
- Step 15: Receive Medicaid approval, apply for EDI/ERA with Medicaid.
- Step 16: Submit RHC claims and review/setup HMO Advantage plans.



# Questions

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