

1 What is the difference between CMSAccess and ECM Plus™?

CMSAccess

For hospitals to participate in and receive payment from the Medicare and Medicaid programs, regardless of accredited or non-accredited status, they must meet the eligibility requirements for program participation and obtain a certification of compliance with the Conditions of Participation (CoPs) set forth in federal regulations. JCR's new CMSAccess will be offered September 28, 2012 for hospitals, both accredited and non-accredited, with a web based online one-step resource which provides for useful actionable information about the Medicare certification and its requirements.

CMSAccess provides:

- Active links to CMS State Operations Manual, Interpretive Guidelines, Transmittals, Survey and Certification Letters, CMS forms, and other pre-selected library of outside websites
- Key word search functionality both standard and advanced
- Interactive forms that allow the reader to fill out and save survey related checklists, forms, and other tools
- Ability to print, save, and email various documents and forms
- Email Alerts of "What's New" from CMS, Office of Inspector General and Federal Registrar
- Education Training Modules (Medical Staff, Governing Body, CMS 101, Detailed Training on Completing the 2567)
- Additional Publications regarding CMS
- Ability to access ECM Plus and CMSAccess with a drop down menu and no separate login required.

ECM Plus

E-dition Compliance Monitor Plus™ (ECM Plus) is an online web-based pre-selected library of health care industry regulations that are organized and linked to the Joint Commission chapters for the Hospital program. ECM Plus utilizes Smart Chart™ technology as the foundation to map the Joint Commission Hospital Program Standards and Elements of Performance to related health care industry regulations together on one screen to help hospital leaders and staff stay on top of accreditation and regulatory requirements. It's designed to help navigate the federal and state laws, regulations, NFPA, and daily actions made by various government and regulatory agencies to the Joint Commission Hospital program.

ECM Plus contains over 90,000 lines of data mapping from Joint Commission standards and EPs and more than 500,000 links to the related federal CoPs, SOM sections, and state regulations.

With ECM Plus you can:

- Access the latest Joint Commission standards, including the latest 2013 version launching in July of 2012.
- Ability to Crosswalk one or multiple Joint Commission standards and EPs to the related CoP, SOM and state regulations Access full text of standards, EPs, CoPs, SOM, and state regulations
- Access codes and standards from the NFPA
- Utilize the new Smart Chart technology to make your searches quick and accurate
- Save your chart and top keywords for repeat searches
- Email your results to share your findings

In summary, **CMSAccess** is totally focused on the CMS survey methodology and Medicare program participation. This product provides you the tools and access to the hospital CoPs, the various types of CMS surveys, potential outcomes of CMS surveys, and examples of completed 2567's and tips on how to complete, as well as daily email alerts from CMS, Office of Inspector General, Federal Registrar and other pertinent federal organizations. ECM Plus links the Joint Commission standards and EPs to the appropriate CMS CoP, A-tags and state regulation and is based totally on the Joint Commission survey process.

2 What content is included in CMSAccess?

CMSAccess provides a background on CMS certification and deemed status; walks through the survey process, describing outcomes and interventions, and assist in finding information to maintain ongoing compliance with Medicare CoPs. It describes different types of CMS surveys and walks the reader through the CMS survey protocol. In addition, this convenient online tool provides content regarding:

- Understanding Licensure, Certification, Accreditation, and Deemed Status
- The different types of CMS surveys
- Key points to remember for CMS surveys
- How to use the State Operations Manual
- CMS survey processes
- Immediate steps following the survey and exit conference
- How to prepare and respond to the Statement of Deficiencies (CMS Form 2567)
- Potential survey results and various types of termination tracks
- Components of Immediate Jeopardy
- Potential consequences with the loss of Medicare certification
- Useful tools and checklists for maintaining ongoing compliance with Medicare CoPs such as:
 - + Survey Readiness Checklist
 - + Document Review Checklist
 - + FAQ Section
 - + Talking Tips for Staff
 - + New CMS tools for State Agency Surveyors (D/C Planning, Infection Control, and QAPI worksheets)
 - + Recently Revised Requirements
 - + Flow charts with timelines for the survey process and various termination tracks.
 - + Immediate Jeopardy Decision Tree
 - + Sample CMS Forms, including CMS-855 application and CMS-2567 Statement of Deficiencies and Plan of Correction

3 How does CMSAccess benefit a hospital who participates in the Medicare program?

For hospitals to participate in and receive payment from the Medicare and Medicaid programs, regardless of accredited or non-accredited status, they must meet the eligibility requirements for program participation and obtain a certification of compliance with the Conditions of Participation (CoPs) set forth in federal regulations. Certification builds upon State and national accreditation programs. Certification requirements, State licensure codes for health facilities, programs for professional licensure and accreditation, and

medical assistance standards are all related; therefore, certification activities must be coordinated with other programs.

Hospitals today need useful, actionable information about the Medicare certification process and its requirements, especially in the midst of a crisis situation like an Immediate Jeopardy finding. Joint Commission Resources developed **CMSAccess** to prepare hospitals for that unannounced visit by state agency surveyors sent on behalf of CMS.

4 Do I need to buy CMSAccess if I already have ECM Plus?

CMSAccess is totally focused on the CMS survey methodology and survey process to maintain certification and participate in the Medicare program. ECM Plus is totally focused on the Joint Commission standards and survey process and provides the ability to create a cross-walk to the Joint Commission standards/EPs to CoPs and state regulations. Although, **CMSAccess** is totally focused on the CMS survey methodology and survey process (not Joint Commission) the two tools complement each other very nicely in order to meet both organizations survey requirements. However, both products can be purchased separately.

5 Is CMSAccess beneficial to non-accredited hospitals?

Yes. For hospitals to participate in and receive payment from the Medicare and Medicaid programs, regardless of accredited or non-accredited status, they must meet the eligibility requirements for program participation and obtain a certification of compliance with the Conditions of Participation (CoPs) set forth in federal regulations 42 C.F.R Part 482. Since CMS makes the determination that a hospital has met all Federal requirements, CMS “certifies” the hospital for Medicare participation. CMS certification to participate in Medicare means the hospital is now eligible to receive payment for eligible services to Medicare patients.

CMSAccess focuses totally on the Medicare certification process and provides access to the information and regulations required to maintain certification. This tool provides links to specific chapters of the State Operations Manual, Interpretative Guidelines and the Code of Federal Regulations, as well as providing useful tools and checklists all geared specifically towards maintaining ongoing compliance with the Medicare program. All content is organized and linked accordingly to eliminate hours of work and research that the end user would have to do if they did not have access to **CMSAccess**.

6 Is CMSAccess only for hospitals? When will CMSAccess be available for other health care settings?

CMSAccess will launch September 28, 2012. The launch of **CMSAccess** for this September encompasses only the hospital program, but it is envisioned that this tool will extend to other programs (ambulatory, home care, long term care, etc.) in the near future based on customer demand.

7 What is the price of CMSAccess?

- \$5,400 for Joint Commission Accredited Organizations for a 12-month rolling year. Unlimited user access
- \$4,590 for Joint Commission Resources CSR members for a 12-month rolling year. Unlimited user access
- \$6,480 for Non-Joint Commission Accredited Organizations for a 12-month rolling year. Limited to 6 users