

Comparative Table/Cross Walks Assignment

Surveys that are performed on a facility will determine if the facility meets the regulatory requirements. Regulatory agencies can include but are not limited to OSHA (Occupational Safety and health Administration), EPA (Environmental Protection Agency), FDA (Food and Drug Administration), and CDC (Centers for Disease Control and Prevention). There is also CMS (Centers for Medicare and Medicaid Services, and The Joint Commission).

Unlike the others, the last 2 agencies regulate the administration of care, - that is they both regulate the same aspect of healthcare. Most healthcare facilities must meet the federal requirements outlined by CMS called Conditions of Participation (CoP) if they want to receive Medicare or Medicaid reimbursement services. In addition, most hospitals and healthcare systems participate in a voluntary survey process through The Joint Commission (TJC).

Because the 2 overlap in some areas of the country, the state's department of health surveys hospitals for CoP compliance at the same time The Joint Commission conducts its accreditation survey. In other areas (such as Ohio), The Joint Commission completes its accreditation process and CMS then authorizes the state's department of health to conduct a validation survey, usually within 60 days of The Joint Commission survey. In addition, The Joint Commission and CMS can survey "for cause" based on a complaint, or they can randomly select organizations for unannounced surveys.

During the survey, the regulatory and accrediting agency want to see that the organization meets the necessary requirements for compliance. They do this primarily through document review, interviews with leaders and staff, observations.

To help the healthcare facility prepare for surveys, a cross-walks which compares CMS and The Joint Commission is completed. This is a tool to help the facility understand the requirements, see the similarities and differences in the requirements, and identify the documents or processes that are already in place.

CMS and The Joint Commission requirements are similar when it comes to compliance with federal, state, and local laws. Both want to see that the facility has a current license and meets the licensure standards for the state in which it resides.

Review the table below. Review The Joint Commission IM standards listed.

Go to the CMS Web site (www.cms.gov) – Regulations and Guidelines- Manuals- Internet only manuals- scroll down to 100-07 State Operations Manual, Appendices- table of contents, Appendix A (Hospitals) -and find the CMS Medical Records standards that relate to The Joint Commission (IM) standards and complete the table below. You will need to enter the CoP section number, e.g. sec. (A-0222, § 472.44, (a) (2)) along with the text description.

By doing this you will be able to analyze (side-by-side) the CMS Conditions of Participation and The Joint Commission standards.

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The Joint Commission	CMS
IM.6.10 All patients have a medical record. Only designated staff can enter information into the medical record	
IM.6.20 Patient records have specific clinical information documented	
IM.6.40 A problem/summary list is included in the medical record for outpatient services	
IM.2.10 Medical Record/data confidentiality is preserved	
IM.4.10 Decisions are made based on information in the medical record	
IM.6.60 Patient Information must be accessible when needed for patient care/treatment	
IM.6.50 Verbal orders are written appropriately and transcribed only by qualified staff as designated by the organization	
IM.3.10 The Organization has an information technology system in place that includes	

quality control systems	
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Grading Rubric – Comparative Table/Cross Walks

NAME: _____

	5 Points	3 Points	0 Point
Report received on time			
Report Completed			
Information Correct			
Total Points			
Total Points out of 15 possible			

Comparative Table w-o Answers-1 Redacted 3.17.15