A YEAR OF REGULATORY CHANGE

2017 BROUGHT MANY CHALLENGES to the home health and hospice industries, but perhaps none was greater than the changes to the Medicare Conditions of Participation (CoPs).

Both home health and hospice providers were required to be fully compliant with the Emergency Preparedness requirements as of November 15, 2017. Natural disasters over the past year have highlighted the need for providers to have a robust Emergency Preparedness Plan. From wildfires and hurricanes to ransomware attacks and civil unrest, the need to thoroughly educate and train staff as well as practice and evaluate your plans is more acute than ever.

Home Health agencies had the additional challenge of implementing new practices in order to be in compliance with the revised Home Health CoPs by January 13, 2018. This revision to the CoPs, is the largest overhaul that the home health industry has seen in over 20 years. While ACHC-accredited providers were well positioned to succeed with the revised CoPs, we acknowledge that much time, money, and resources are required to achieve and maintain compliance with these new regulations. (continued on page 2)
ACHC has worked with CMS to update the ACHC Home Health Accreditation Standards to incorporate the CoP and Emergency Preparedness revisions. We’ve also developed numerous resources to assist you with achieving and maintaining compliance with the new CoPs and Emergency Preparedness requirements.

Your Customer Central account at cc.achc.org gives you and your staff 24/7 access to:

- Updated ACHC Accreditation Standards
- Monthly Did You Know emails – with information you can share with your staff
- Compliance checklists
- CMS regulatory information
- Survey prep tools & resources

Additionally, AccreditationUniversity.com offers numerous educational resources including:

- Free on-demand CoP & Emergency Preparedness webinars
- Program-specific survey prep workshops
- The ACHC Accreditation Guide to Success workbook

Perhaps the most valuable resource available to you is your personal Account Advisor (AA), who is there to assist you with any questions you may have about the survey process, standards interpretation, CoP interpretation, and more. Your AA, along with ACHC’s dedicated clinical and regulatory support team, can help you untangle the regulatory requirements in order to allow you and your agency to maintain compliance with the ACHC Standards and CoPs.
I generally use this space to present news about ACHC’s recent advances and accomplishments, domestically or internationally, and to highlight how ACHC continues to fulfill our obligation to deliver a return on investment to our accreditation customers. But as I write this at the end of another year of strong growth for ACHC, my attention is focused on a couple of disturbing trends in the accreditation industry. So, I want to use this column to emphasize how ACHC will remain true to our core values and buck these two trends which show that some in our industry are focused on their own bottom line, rather than on the ROI for their customers.

We believe that every accreditation organization should deliver value to its customers by providing a thorough accreditation process that will enhance the quality of its customers’ services, and reinforce the internal processes that will help them manage their business risks. But over the past year, we’ve observed competitors adopting a couple of tactics that ACHC will never employ:

Slashing Costs by Cutting Corners on the Accreditation Survey

ACHC will continue to refuse to accept shortcuts in the accreditation process in order to compete on price. When an industry standard, or one of our own accreditation standards, calls for the on-site physical inspection of a customer’s operations, like the cleanrooms used by compounding pharmacies, we will continue to insist on conducting an inspection of each location. When a standard demands an on-site review of each service location, we will not limit our surveys to sampling just a few locations to cut our costs, because we believe that this kind of approach destroys the value and integrity of accreditation.

For some, cheaper prices and abbreviated surveys might sound like a good thing, but they really are not. As a provider, you make a significant investment in preparing for the accreditation process. When the results of your investment are tested against a robust accreditation process, you become a better organization with improved operational efficiencies, and you emerge better positioned to serve your patients and to protect yourself and your employees from potential liabilities. If you are simply looking to “check the box,” you lose the benefit of the meticulous feedback that a thorough survey can provide, and the patients and third-party payors lose the assurance that an accreditation demonstrates comprehensive adherence to appropriate industry standards.

Strong-Arm Customer Retention Tactics

ACHC will continue to respect our customers’ choices of their accreditation services. We are committed to earning and keeping your business through our performance, and by providing a thorough but user-friendly experience that enhances the performance of your organization – not by threatening early termination of your accreditation when you consider placing your business elsewhere. Our customers should be able to choose based on performance and the value we provide, and we are ready to compete against anyone on that basis. We believe loyalty is earned, not forced. (continued on page 4)
PCAB-accredited Pharmacy Specialties & Clinic (PS&C) achieved an additional recognition in September when it became the first to receive ACHC’s new Distinction in Hazardous Drug Handling.

The Distinction in HDH gives ACHC- and PCAB-accredited pharmacies a means to demonstrate compliance with criteria set forth in USP Chapter <800> Hazardous Drugs – Handling in Healthcare Settings. While not set to go into effect until 2019, many pharmacies are taking proactive steps to ensure preparedness with these guidelines aimed at protecting Pharmacist and patient safety.

Below, PS&C President Cheri Kraemer talks about her pharmacy’s experience preparing for and undergoing the HDH survey, and offers advice for those who may be considering it.

ACHC: Why did you decide to make your facility USP <800> compliant?

KRAEMER: I have always tried to protect my employees from chemicals they work with on a daily basis. I have had a powder room for making capsules and hormones since 2010, so I just decided to finish the entire process since the deadline was July 1, 2018*, and I wanted to be ready. I would rather be first to act than last when dealing with employee safety.

("The implementation date has since been changed to December 1, 2019.")

ACHC: What were some of your biggest challenges?

KRAEMER: I decided to move the cleanroom, which required a remodel. We had glass walls and ledges in our old cleanroom, so to make it more efficient for cleaning, we built out a new cleanroom with a hard top, epoxy painted walls, and concave floors.

ACHC: What surprises did you encounter?

KRAEMER: The expense; it is always hard to know what things will cost. So to prepare, I sold my retail pharmacy portion to a local retail chain in order to have money to remodel and do this all properly. We are compounding only now. We do less than 5% sterile but I feel ready to do more now that we have gone through all the inspections. I know many compounding pharmacies are dropping sterile because of the expense to make the changes needed. I want patients in South Dakota and our surrounding states to have access to all areas of compounding.

ACHC: What was easier than you thought?

KRAEMER: The hazardous area was quite easy for me because I had a room separated already for many years. I just needed to vent the hoods outside and designate the area hazardous; separate chemicals; change gowns; and rethink...
all the various workflow processes. An example is that you need more equipment. We needed a second ointment mill to put in the hazardous room for topiramate pediatric suspensions made from commercial tablets.

ACHC: How do you feel about ACHC’s approach to addressing USP <800>?

KRAEMER: I thought it was very thorough. Going into USP <800> certification, the Distinction in Hazardous Drug Handling, I had questions about the extra waste we will create using so many more chemo items. It was really nice to have Jon Pritchett with ACHC and Brenda Jensen with Compound Consultants to work with regarding some of these details.

ACHC: Do you feel that the Distinction in HDH standards adequately addressed the chapter?

KRAEMER: Yes, I was very ready for the inspection after working through the requirements set forth by ACHC/PCAB.

ACHC: What pearls of wisdom might you share with a pharmacy in the beginning stages of preparation for USP <800>?

KRAEMER: Consider the hoods you will purchase before the buildout. We did not make the ceiling in our sterile hazardous room high enough. It should have been 1 foot taller to accommodate the new BioView hood. I could not have known that because I did not realize the hood I was getting to put in there was so tall. The hood should be raised up for comfort.

ACHC: Where do you see the compounding industry going? Do you think that hazardous drug handling will continue to be a topic of conversation?

KRAEMER: I am ready for HD handling across the board, sterile and non-sterile. I feel that if I could do this, everyone can do this and should do it sooner rather than later. It is about safety to your employees, which should be the most important thing to consider when compounding with bulk chemicals and handling other NIOSH list medications. I feel the sooner this all gets in place, the better for everyone in our industry.

If you are interested in earning ACHC Distinction in Hazardous Drug Handling (HDH), contact your personal Account Advisor or ACHC’s Account Services Team.
ACHC PLAYS ACTIVE ROLE IN SPECIALTY PHARMACY ARENA

The specialty side of ACHC’s pharmacy accreditation program continues to evolve and grow. As more payors and PBMs are mandating specialty pharmacy accreditation, we strive to be highly engaged in this market through various endeavors.

One such endeavor is our involvement with the National Association of Specialty Pharmacy (NASP), a trade association representing industry stakeholders through education and advocacy.

ACHC actively participates in national pharmacy conferences, roundtables, and industry meetings in addition to having representation on NASP’s committees. Our goal is to help NASP achieve the board’s vision, and we are committed to the belief that the work NASP does is critical to maintaining the viability of the industry and is integral to and synonymous with great patient care. Barbara Sylvester, Director of Regulatory Affairs & Quality, is a member of the NASP Customer Experience Committee which provides administration, standardization and reporting oversight of the NASP Patient Satisfaction Survey to effectively unify specialty pharmacies in their measurement of the patient experience.

Tim Safley, ACHC Director of Pharmacy, DMEPOS & Sleep, has assumed a role on NASP’s Clinical Outcomes Committee, which is focused on developing and implementing measurable goals for the specialty industry that will lead to standardization of benchmarking data.

“We are actively trying to promote the industry,” Safley said. “ACHC not only remains highly engaged in the specialty pharmacy market, but we are now seen as a thought leader that is integral to the future of the industry.”

INTRODUCING ACHC DISTINCTION IN NUTRITION SUPPORT (NTS)

ACHC proudly unveiled its new Distinction in Nutrition Support (NTS) during the ASPEN 2018 Nutrition Science & Practice Conference in January. This latest offering in our series of Pharmacy Distinctions is designed to allow infusion providers to demonstrate expertise in the delivery of nutrition support.

The Distinction in NTS encompasses:

- The ability to clearly monitor and assist in the management of clients/patients on nutritional support (NS) therapies
- The delivery of nutrition formulas/products
- Collaboration with all members of the client’s/patient’s healthcare team to optimize plan of care
- Cost containment and reimbursement assistance
- Health outcomes

Our Nutrition Distinction requires oversight by a professional advisory committee that includes a clinician with certification in nutrition support along with a physician and a Registered Nurse with infusion experience.

Providers who wish to earn a Distinction in Nutrition Support must undergo a survey to demonstrate compliance with 18 nutrition-specific standards in addition to achieving ACHC Infusion Pharmacy Accreditation.

As with ACHC’s Pharmacy Distinctions in Oncology, Infectious Disease Specific to HIV, and Hazardous Drug Handling, the Distinction in Nutrition Support gives providers a competitive edge by allowing them to demonstrate a commitment to quality, create distinction among competition, and drive continuous improvement.

Please call us at (855) 937-2242 or email customerservice@achc.org to find out more about ACHC’s available programs and services.
CMS ANNOUNCES CHANGES FOR HOME HEALTH & HOSPICE AGENCIES FOR 2018

HOME HEALTH

Centers for Medicare & Medicaid Services (CMS) issued a final rule (CMS-1672-F) that updates the calendar year (CY) 2018 Medicare payment rates and the wage index for home health agencies (HHAs) serving Medicare beneficiaries.

The rule also finalizes proposals for the Home Health Value-Based Purchasing (HHVBP) Model and the Home Health Quality Reporting Program (HH QRP).

CMS is not finalizing the Home Health Groupings Model and will take additional time to further engage with stakeholders to move toward a system that shifts the focus from volume of services to a more patient-centered model. CMS will take the comments submitted on the proposed rule into further consideration regarding patients’ needs that strikes the right balance in putting patients first.

To learn more, visit: https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-11-01-2.html

HOSPICE

The Centers for Medicare & Medicaid Services (CMS) issued a proposed rule (CMS-1675-P) that would update the Medicare hospice wage index and cap the amount for fiscal year (FY) 2018.

As proposed, hospices would see an estimated 1.0 percent ($180 million) increase in Medicare payments for FY 2018. This rule also solicits comments regarding the source(s) of clinical information for certifying terminal illness and proposes changes to the Hospice Quality Reporting Program (Hospice QRP), including proposing new quality measures utilizing data collected in the Hospice CAHPS Survey.

Finally, the proposed rule discusses new quality measure concepts under consideration for future years, solicits feedback on an enhanced data collection instrument, and describes plans to publicly display quality measure data via the Hospice Compare website in 2017.

To learn more, visit: https://www.cms.gov/Center/Provider-Type/Hospice-Center.html

PRIVATE DUTY

ACHC has modified the Private Duty Accreditation Standards to allow a physician or other approved licensed independent practitioner, when permitted by state law and the organization, to sign orders.

For the sake of keeping the wording succinct, we will be leaving the language in the standard the same, but next to the word “physician” we will insert an asterisk. At the bottom of each affected standard, the following wording will be used:

*a physician or other approved healthcare clinician with prescriptive authority

This change will take place immediately but will not be seen in the standards until the next release, which is scheduled for February 2018.

If you have any questions about this change, please contact your Account Advisor.
PROGRAM UPDATES

SLEEP

In early September, The Centers for Medicare and Medicaid Services (CMS) announced that Palmetto GBA (Palmetto) was awarded a contract for the administration of Medicare Part A and Part B Fee-for-Service claims in Alabama, Georgia and Tennessee (A/B MAC Jurisdiction J). The effective date of the transition for Part B is February 26, 2018.

This will affect sleep providers who currently submit claims to Cahaba. As of February 26, 2018, claims will need to be submitted to Palmetto GBA. Providers may also be affected by Palmetto’s Local Coverage Determination (LCD) L35693. Palmetto GBA requires sleep labs to be accredited and has listed Accreditation Commission for Health Care (ACHC) as an accepted accreditor.

CMS local coverage determinations are requiring accreditation for sleep labs in a growing number of states. In choosing ACHC, sleep providers can expect:

- Relevant and realistic standards
- Friendly and consultative Surveyors
- An array of educational support
- A customer-focused approach to accreditation
- Standards for both Sleep Labs/Centers and stand-alone Home Sleep Testing
- Accelerated option available

Join the 500 sleep providers who have discovered the ACHC difference. Call us today at (855) 937-2242 or visit achc.org to learn more.

PCAB UPDATE

USP <800> Implementation: To wait or not to wait?

For a number of years the healthcare community has been awaiting the release and implementation of USP General Chapter <800> Hazardous Drugs – Handling in Healthcare Settings. Many providers were gearing up for compliance on the official date of July 1, 2018; however, on September 29, 2017, USP announced a delay in implementation, now expected on December 1, 2019. The driver for this delay is the anticipation of the timing for release of revised USP General Chapter <797> Pharmaceutical Compounding – Sterile Preparations so that the two chapters can be harmonized.

There has been much discussion across the industry as to how to react to not only USP <800>, but this news of an additional delay. Practitioners are wondering how regulatory bodies such as state boards of pharmacy, the FDA, and OSHA will implement and enforce USP <800>, and what their timelines will be.

ACHC stands poised to assist pharmacies at all levels:

- Accreditations such as PCAB Sterile Compounding and Infusion Pharmacy Services allow for review and recognition of sterile compounding practices according to USP <797>
- ACHC’s new offering – Distinction in Hazardous Drug Handling (HDH) – allows practitioners accredited under any ACHC Pharmacy service to demonstrate compliance with USP <800>

Flexibility is what makes HDH unique; it allows the pharmacy to understand the requirements, implement them, and become accredited through a peer-review process at a pace that is appropriate to them and their environment.
HOMELINK

HOMELINK is a DMEPOS supplier that coordinates services on behalf of insurance beneficiaries. The company has been ACHC accredited since 2008.

“Our experience with ACHC has been tremendous. We have had two Account Advisors over the years and have been extremely satisfied with both of them. We embrace the opportunity to make our business better through the accreditation process.

THE SURVEYORS THAT WE HAVE HAD HAVE BEEN EXTREMELY PROFESSIONAL AND CARING. THE ACCREDITATION PROCESS HAS BEEN SEAMLESS, EVEN WITH A LARGE CHANGE IN OUR PROCESSES FROM OUR PREVIOUS ACCREDITATION CYCLE TO THE CURRENT ONE.

I look forward to a continued relationship with ACHC.”

-RICK HIBBEN, CRT/RCP
MANAGER, REGULATORY COMPLIANCE

ACHC ATTAINS ISO 9001:2015 CERTIFICATION FOR ITS QUALITY MANAGEMENT SYSTEM

ACHC proudly celebrates that its quality management system attained certification to the newly updated ISO 9001:2015 standards. ACHC understands the importance of meeting customer needs, providing consistent quality, continuously improving value, and optimizing operations. The ACHC quality management system first received certification in 2004. Reaching this newest certification designation solidifies ACHC’s continuous commitment to excellence.

Through its members, International Organization for Standardization (ISO) brings together experts to share knowledge and develop voluntary, consensus-based, market-relevant International Standards that support innovation and provide solutions to global challenges. All ISO standards are reviewed every five years to ensure standards are current and relevant; changes are made as necessary to respond to the latest trends and far-reaching impact on business practice.

“At the heart of all we do at ACHC is our desire to provide the best possible experience for our customers,” stated Barbara Sylvester, Director of Regulatory Affairs & Quality. “Customers demand and deserve accreditation services from an organization committed to delivering a first-class experience, creating standards that reflect best practices, providing surveyors that are subject-matter experts, and applying standards consistently among organizations. The ACHC quality management system provides the framework that facilitates achieving these goals.”

Please call Barb Sylvester at (855) 937-2242 for more information on ACHC’s Quality Management System.

Source:
1 https://www.iso.org/about-us.html
Thank you to all of our partners. We look forward to another great year!

Do you want to expand the benefits, discounts, and education you currently offer your members? We know that strategic partnerships are vital to the success of any industry, which is why we created the ACHC Partnership Program. Partnering with organizations in the healthcare industry is mutually beneficial in the achievement of business objectives and goals.

Our partners run the gamut from state and national organizations to consulting firms to provider network organizations. We work with them to provide their members and customers with discounts on accreditation as well as educational tools and services. Additionally, we offer exclusive webinars and co-hosted training events to set customers up for a successful accreditation experience.

ACHC is always looking to establish new and exciting partnerships. We have collaborated with many esteemed groups, and look forward to adding more valued partnerships in the future.

Please call Lindsey Holder at (855) 937-2242 or email lholder@achc.org to find out more about ACHC’s partner opportunities.

THANK YOU TO ALL OF OUR VALUED PARTNERS

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Atlantic Coast Medical Equipment Services Association
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Community Oncology Pharmacy Association
Connecticut Association for Healthcare at Home
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ElevatingHOME
Florida Alliance for Health Care Services
Florida Association of Medical Equipment Services
Grove Medical, Inc.
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Home Care Association of Florida
Home Care Alliance of Massachusetts
IMCO Home Care
International Academy of Compounding Pharmacists
Indiana Association for Home & Hospice Care, Inc.
Innovatix
Kansas Home Care Association
Managed Health Care Associates, Inc.
The MED Group
Michigan Association for Home Care
New Mexico Association for Home & Hospice Care
Ohio Council for Home Care & Hospice
Pennsylvania Homecare Association
Professional Compounding Centers of America
PersonalMed
Rhode Island Partnership for Home Care
SomniTech
South Carolina Medical Equipment Services Association
Virginia Association for Home Care and Hospice
Texas Association for Home Care & Hospice
The Corridor Group
Vital Care, Inc.
BIG YEAR FOR RENEWALS!

2018 is a peak renewal year for DMEPOS. Is your organization prepared? You should be cognizant of your accreditation expiration date to ensure a smooth renewal process and avoid any lapse in accreditation. ACHC encourages providers to start preparing for reaccreditation one year in advance. Submitting your application and deposit early helps to ensure ample time for:

- Initiating the renewal process too close to your expiration may impact your ability to submit blackout dates and could result in extra expenses and a lapse in accreditation. Customers who submit their application fewer than 90 days before their expiration date will incur a $1,000 fee.

ARE YOU READY FOR YOUR RENEWAL SURVEY?

Have you utilized the Compliance Checklists on Customer Central (cc.achc.org)? These are designed for use at various intervals throughout your accreditation cycle to help you stay on track. You will find other useful survey preparedness items as well, including:

Finally, don’t forget about the many resources available at AccreditationUniversity.com.

Our goal is for our customers to enjoy a seamless renewal process. Start today by submitting your application through Customer Central. Don’t forget to reach out to your personal Account Advisor with any questions!
ACHC International saw phenomenal success in the United Arab Emirates in 2017 – success that we intend to build on in 2018 and beyond. In 2016, Health Authority Abu Dhabi (HAAD) mandated that all of the region’s home care agencies become accredited, with ACHC International named as an approved accreditor.

Since we began surveying in February 2017, we’ve accredited more than 60 agencies in Abu Dhabi. The accompanying chart represents the nearly 150 home care organizations registered with Daman, the largest insurance provider in the UAE. ACHC International has clearly captured the home care market.

We have seen tremendous improvements in home care agencies that have undergone the accreditation process, including:

- Physician-signed multidisciplinary plans of care with specific and clear patient interventions
- Staff are functioning under medical supervision (as opposed to independent practitioners)
- Physicians are documenting their visits to patient homes to show medical supervision of care was provided
- Completion of comprehensive assessments

We believe that ACHC International’s success is due in large part to our business philosophy. Our customers can expect positive interactions with our local representative, Surveyors, and staff – from first contact to every point thereafter.

As we continue to explore new markets and opportunities overseas, we remain committed to providing the best possible experience to each and every one of our valued customers.

To learn more about ACHC International, please contact Matt Hughes, Director of Business Development, at (855) 937-2242 or mhughes@achc.org.
Our desire to connect with the providers we serve today and those we hope to serve in the future made the decision to collaborate with RXinsider an easy one! RXinsider is a publishing and technology company offering fresh and relevant multimedia publications to the pharmacy and healthcare markets.

With video projected to claim more than 80% of all web traffic by 2019*, ACHC and PCAB decided to leverage RXinsider’s Thought Leader Video Series as an engaging platform to deliver the reasons why ACHC is best positioned to be the total accreditation solution for pharmacies.

The video series is segmented into clips that address 12 questions we believe are on the minds of pharmacies in need of accreditation, boards of pharmacy, payors/PBMs, and manufacturers.

President & CEO José Domingos and PCAB’s Jon Pritchett, provide their thoughts on important questions like:

- Why do managed care organizations prefer ACHC?
- How is PCAB promoting safe practices in compounding?
- How do Distinctions set your pharmacy apart from the competition?

Since 59% of company decision makers would rather watch a video than read an article or blog post*, these short clips will allow us to educate pharmacies and industry stakeholders about ACHC and our programs in a dynamic and more personal format.

The videos will be continuously promoted throughout RXinsider’s B2B digital ecosystem and serve as welcome and versatile additions to our marketing and communications toolbox.

WANT TO TAKE A LOOK? Visit https://vimeo.com/232693440/54fac84081 to watch!

Source: https://www.forbes.com/sites/forbesagencycouncil/2017/02/03/video-marketing-the-future-of-content-marketing/#7e403c576b53

Proudly partnering with ACHC to further their mission of providing the best possible accreditation experience for their customers.

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ACHC Accreditation is a phenomenal achievement, one that can take an incredible amount of a provider’s time and resources. Many companies rely on their staff to ensure they are in compliance, which can take away from daily business responsibilities and result in reduced job performance. Oftentimes staff have never been through the accreditation process, and the learning curve can seem overwhelming.

Accreditation University creates unique and customizable consulting packages to help businesses of all sizes navigate the accreditation process with minimal stress. Your package may include a mock survey that involves a complete gap analysis performed by an actual ACHC Surveyor. Our consultants’ expertise means customers can feel more comfortable about their survey, and their staff receive guidance from among the best in the business.

Hiring a consultant versus relying on your staff will not only save you money, it will allow your employees to focus on what is important: taking care of patients.

In addition to consulting, Accreditation University offers extensive opportunities including:

- Educational workshops
- ACHC Accreditation Guide to Success Workbooks
- Policy and procedure manuals
- Performance Improvement (PI) tools
- Webinars

"WE UTILIZED ACCREDITATION UNIVERSITY FOR CONSULTING, WORKSHOPS, THE ACHC ACCREDITATION GUIDE TO SUCCESS WORKBOOK, AND THE SPECIALTY POLICY AND PROCEDURE MANUAL TO HELP US ESTABLISH BEST PRACTICES AND PREPARE FOR THE SURVEY. THE RESOURCES WERE INVALUABLE.

AS IMPORTANT AS THOSE RESOURCES WERE TO OUR SUCCESS, IT WAS THE SUPPORT AND INSIGHT PROVIDED BY THE ACCREDITATION UNIVERSITY STAFF THAT MADE THE REAL DIFFERENCE. EVERYONE AT ACCREDITATION UNIVERSITY HAS BEEN EXCEPTIONAL TO WORK WITH, PROVIDING THE INSIGHT AND GUIDANCE NEEDED TO HELP US ACHIEVE ACCREDITATION."

- AllyScripts, LLC
Accreditation University workshops are specifically designed to prepare healthcare organizations for the initial or renewal accreditation process. Upon completion, all attendees will receive a free digital copy of the ACHC Accreditation Guide to Success workbook, a Certificate of Completion, and $250 off the cost of accreditation.

**UPCOMING WORKSHOPS**

Visit AccreditationUniversity.com to register

**DMEOPOS**
- March 15
- March 27 (Las Vegas, NV)
- May 15

**SPECIALTY PHARMACY**
- March 13
- June 19

**INFUSION PHARMACY**
- March 14
- June 20

**COMPounding PHARMACY**
- February 7-8 (Salt Lake City, UT)
- May 16-17

**USP <800> COMPLIANCE**
- February 8 (Salt Lake City, UT)
- May 17

**PRIVATE DUTY**
- July 19

**HOME HEALTH & COP INTENSIVE (2-DAY)**
- March 6
- April 12 (Anaheim, CA)

**COP INTENSIVE ONLY (1-DAY)**
- March 7

**HOSPICE**
- February 1 (Phoenix, AZ)
- March 5
- April 13 (Anaheim, CA)

Unless otherwise noted, workshops are held at ACHC’s Corporate Headquarters in Cary, NC.