

Regulatory Reference	G Tag	All HHA Tags
		Blue Shading = Level 1    Green Shading = Level 2
484.40	G350	<b>Condition: Release of patient identifiable OASIS info.</b>
484.45	G370	<b>Condition: Reporting OASIS information</b>
484.45(a)	G372	Standard: Encoding and transmitting OASIS
484.45(b)	G374	Standard: Accuracy of encoded OASIS data
484.45(c)	G376	Standard: Transmittal of OASIS data
484.45(c)(1)	G378	OASIS data transmission format
484.45(c)(2)	G380	Successfully transmit test data
484.45(c)(3)	G382	Transmit data using compliant software
484.45(c)(4)	G384	Transmit data that includes branch identifier
484.45(d)	G386	Standard: Data Format
484.50	G406	<b>Condition: Patient rights</b>
484.50(a)	G408	Standard: Notice of rights
484.50(a)(1)	G410	Information to patient
484.50(a)(1)(i)	G412	Written notice of patient's rights
484.50(a)(1)(ii)	G414	HHA administrator contact information
484.50(a)(1)(iii)	G416	OASIS privacy notice
484.50(a)(2)	G418	Patient's or legal representative's signature
484.50(a)(3)	G420	Verbal notice of rights and responsibilities
484.50(a)(4)	G422	Written notice within 4 business days
484.50(b)	G424	Standard: Exercise of rights
484.50(c)	G426	Standard: Rights of the patient
484.50(c)(1)	G428	Property and person treated with respect
484.50(c)(2)	G430	Be free from abuse
484.50(c)(3)	G432	Make complaints to the HHA
484.50(c)(4)	G434	Participate in care
484.50(c)(5)	G436	Receive all services in plan of care
484.50(c)(6)	G438	Have a confidential clinical record
484.50(c)(7)	G440	Payment from federally funded programs
484.50(c)(8)	G442	Written notice for non-covered care
484.50(c)(9)	G444	State toll free HH telephone hotline
484.50(c)(10)	G446	Contact info Federal/State-funded entities
484.50(c)(11)	G448	Freedom from discrimination or reprisal
484.50(c)(12)	G450	Access to auxiliary aids and language service
484.50(d)	G452	Standard: Transfer and discharge
484.50(d)(1)	G454	HHA can no longer meet the patient's needs
484.50(d)(2)	G456	Patient/payer will no longer pay for services
484.50(d)(3)	G458	Outcomes/goals have been achieved
484.50(d)(4)	G460	Patient refuses services
484.50(d)(5)	G462	Before discharge for cause HHA must:
484.50(d)(5)(i)	G464	Advise the patient of discharge for cause
484.50(d)(5)(ii)	G466	Make efforts to resolve the problem(s)
484.50(d)(5)(iii)	G468	Provide contact info other services
484.50(d)(5)(iv)	G470	Document efforts to resolve problems
484.50(d)(6)	G472	Death of patient

484.50(d)(7)	G474	HHA ceases to operate
484.50(e)(1)	G476	Standard: Investigation of complaints
484.50(e)(1)(i)	G478	Investigate complaints made by patient
484.50(e)(1)(i)(A)	G480	Treatment or care
484.50(e)(1)(i)(B)	G482	Mistreatment, neglect or abuse
484.50(e)(1)(ii)	G484	Document complaint and resolution
484.50(e)(1)(iii)	G486	Protect patient during investigation
484.50(e)(2)	G488	Immediate reporting of abuse by all staff
484.50(f)(1,2)	G490	Standard: Accessibility
<b>484.55</b>	<b>G510</b>	<b>Condition: Comprehensive Assessment of Patients</b>
484.55(a)	G512	Standard: Initial assessment visit.
484.55(a)(1)	G514	RN performs assessment
484.55(a)(2)	G516	Skilled professional performs assessment
484.55(b)	G518	Standard: Completion of the comprehensive assessment
484.55(b)(1)	G520	5 calendar days after start of care
484.55(b)(2)	G522	Eligibility for Medicare home health benefit
484.55(b)(3)	G524	Therapy services determine eligibility
484.55(c)	G526	Standard: Content of the comprehensive assessment
484.55(c)(1)	G528	Health, psychosocial, functional, cognition
484.55(c)(2)	G530	Strengths, goals, and care preferences
484.55(c)(3)	G532	Continuing need for home care
484.55(c)(4)	G534	Patient's needs
484.55(c)(5)	G536	A review of all current medications
484.55(c)(6)	G538	Primary caregiver(s), if any
484.55(c)(7)	G540	The patient's representative (if any);
484.55(c)(8)	G542	Incorporate OASIS items
484.55(d)	G544	Standard: Update of the comprehensive assessment
484.55(d)(1)	G546	Last 5 days of every 60 days unless:
484.55(d)(2)	G548	Within 48 hours of the patient's return
484.55(d)(3)	G550	At discharge
<b>484.60</b>	<b>G570</b>	<b>Condition: Care planning, coordination, quality of care</b>
484.60(a)(1)	G572	Standard: Plan of care
484.60(a)(2)	G574	Plan of care must include the following
484.60(a)(3)	G576	All orders recorded in plan of care
484.60(b)	G578	Standard: Conformance with physician orders
484.60(b)(1)	G580	Only as ordered by a physician
484.60(b)(2)	G582	Influenza and pneumococcal vaccines
484.60(b)(3)(4)	G584	Verbal orders
484.60(c)	G586	Standard: Review and revision of the plan of care
484.60(c)(1)	G588	Reviewed, revised by physician every 60 days
484.60(c)(1)	G590	Promptly alert relevant physician of changes
484.60(c)(2)	G592	Revised plan of care
484.60(c)(3)	G594	Plan of care revisions must be communicated
484.60(c)(3)(i)	G596	Revisions communicated to patient and MDs
484.60(c)(3)(ii)	G598	Discharge plans communication
484.60(d)	G600	Standard: Coordination of Care

484.60(d)(1)	G602	Communication with all physicians
484.60(d)(2)	G604	Integrate all orders
484.60(d)(3)	G606	Integrate all services
484.60(d)(4)	G608	Coordinate care delivery
484.60(d)(5)	G610	Patients receive education and training
484.60(e)	G612	Standard: Written instructions to patient include:
484.60(e)(1)	G614	Visit schedule
484.60(e)(2)	G616	Patient medication schedule/instructions
484.60(e)(3)	G618	Treatments and therapy services
484.60(e)(4)	G620	Other pertinent instructions
484.60(e)(5)	G622	Name/contact information of clinical manager
<b>484.65</b>	<b>G640</b>	<b>Condition: Quality assessment/performance improvement</b>
484.65(a)(1),(2)	G642	Standard: Program scope
484.65(b)(1),(2),(3)	G644	Standard: Program data
484.65(c)	G646	Standard: Program activities
484.65(c)(1)(i)	G648	High risk, high volume, or problem-prone area
484.65(c)(1)(ii)	G650	Incidence, prevalence, severity of problems
484.65(c)(1)(iii)	G652	Activities lead to an immediate correction
484.65(c)(2)	G654	Standard: Track adverse patient events
484.65(c)(3)	G656	Improvements are sustained
484.65(d)(1)(2)	G658	Standard: Performance improvement projects
484.65(e)(1)(2)(3)(4)	G660	Standard: Executive responsibilities for QAPI
<b>484.70</b>	<b>G680</b>	<b>Condition: Infection prevention and control</b>
484.70(a)	G682	Standard: Prevention
484.70(b)(1)(2)	G684	Standard: Infection control
484.70(c)	G686	Standard: Infection control education
<b>484.75</b>	<b>G700</b>	<b>Condition: Skilled professional services</b>
484.75(a)	G702	Standard: Services by skilled professionals
484.75(b)	G704	Standard: Responsibilities of skilled professionals
484.75(b)(1)	G706	Interdisciplinary assessment of the patient
484.75(b)(2)	G708	Development and evaluation of plan of care
484.75(b)(3)	G710	Provide services in the plan of care
484.75(b)(4)	G712	Patient, caregiver, and family counseling
484.75(b)(5)	G714	Patient and caregiver education
484.75(b)(6)	G716	Preparing clinical notes
484.75(b)(7)	G718	Communication with physicians
484.75(b)(8)	G720	Participate in the HHA's QAPI program;
484.75(b)(9)	G722	Participate in HHA-sponsored in-service
484.75(c)	G724	Standard: Supervise skilled professional assistants
484.75(c)(1)	G726	Nursing services supervised by RN
484.75(c)(2)	G728	Rehab services supervised by PT, OT
484.75(c)(3)	G730	Medical social services supervised by MSW
<b>484.80</b>	<b>G750</b>	<b>Condition: Home health aide services</b>
484.80(a)	G752	Standard: Home health aide qualifications
484.80(a)(1)	G754	A qualified HH aide successfully completed:
484.80(a)(2)	G756	24 consecutive months paid service

484.80(b)	G758	Standard: Content and duration of training
484.80(b)(1)	G760	Classroom and supervised practical training
484.80(b)(2)	G762	Minimum hours of training
484.80(b)(3)	G764	HH aide training program topics
484.80(b)(4)	G766	HHA maintains documentation of training
484.80(c)(1)(2)(3)	G768	Standard: Competency evaluation
484.80(c)(4)	G770	Unsatisfactory competency evaluation
484.80(c)(5)	G772	Documentation of competency evaluation
484.80(d)	G774	Standard: 12 hours inservice every 12 months
484.80(d)(1)	G776	Inservice training supervised by RN
484.80(d)(2)	G778	Documentation of inservice training
484.80(e)	G780	Standard: Instructor qualifications
484.80(f)	G782	Standard: Eligible training/competency evaluation orgs.
484.80(f)(1)	G784	Noncompliance with training requirements
484.80(f)(2)	G786	Unqualified HH aide providing services
484.80(f)(3)	G788	Org. had partial/extended survey
484.80(f)(4)	G790	Assessed a civil monetary penalty = \$5,000
484.80(f)(5)	G792	Deficiencies that endangered health/safety
484.80(f)(6)	G794	Medicare payments suspended
484.80(f)(7)	G796	Violations of federal or state law:
484.80(g)(1)	G798	Standard: Home health aide assignments and duties
484.80(g)(2)	G800	Services provided by HH aide
484.80(g)(3)	G802	Duties of a HH aide
484.80(g)(4)	G804	Aides are members of interdisciplinary team
484.80(h)	G806	Standard: Supervision of home health aides
484.80(h)(1)(i)	G808	Onsite supervisory visit every 14 days
484.80(h)(1)(ii)	G810	If concern identified, direct observation
484.80(h)(1)(iii)	G812	Direct observation every 12 months
484.80(h)(2)	G814	Non-skilled direct observation every 60 days
484.80(h)(3)	G816	Competency eval. if deficiency identified
484.80(h)(4)	G818	HH aide supervision elements
484.80(h)(5)	G820	HH aide services under arrangement
484.80(h)(5)(i)	G822	Ensuring the overall quality of care provided
484.80(h)(5)(ii)	G824	Supervising HH aide services
484.80(h)(5)(iii)	G826	Ensure training/competency requirements
484.80(i)	G828	Standard: Medicaid personal care aide-only services
<b>484.100</b>	<b>G848</b>	<b>Condition: Compliance with Federal, State, Local Law</b>
484.100(a)	G850	Standard: Disclosure of ownership and management info.
484.100(a)	G852	Standard: Information to the state survey agency
484.100(a)(1)	G854	All persons with ownership interest
484.100(a)(2)	G856	Officer, a director, agent, managing employee
484.100(a)(3)	G858	Responsible for the management of the HHA
484.100(b)	G860	Standard: Licensing
484.100(c)(1)	G862	Standard: Laboratory services/CLIA waivers
484.100(c)(2)	G864	Referral laboratory must be certified
<b>484.102</b>	<b>E-0001</b>	<b>Condition: Emergency preparedness</b>

<b>Refer to Emergency Preparedness E-Tags and Appendix Z</b>		
484.102(a)	E-0004	Standard: Emergency plan
484.102(a)(1)(2)	E-0006	Risk assessment
484.102(a)(3)	E-0007	Address patient population
484.102(a)(4)	E-0009	Process for cooperation and collaboration
484.102(b)	E-0013	Standard: Policies and procedures
484.102(b)(1)	E-0017	Plans for HHA's patients in plan of care
484.102(b)(2)	E-0019	Procedures to inform State/Local officials
484.102(b)(3)	E-0021	Procedures to follow up with staff/pts.
484.102(b)(4)	E-0023	Secures and maintains availability of records
484.102(b)(5)	E-0024	Use of volunteers in an emergency
484.102(c)	E-0029	Standard: Communication plan
484.102(c)(1)	E-0030	Names and contact information
484.102(c)(2)	E-0031	Contact info for emergency officials
484.102(c)(3)	E-0032	Primary and alternate communication info
484.102(c)(4)(5)	E-0033	Continuity of care
484.102(c)(6)	E-0034	Providing information about HHA
484.102(d)	E-0036	Standard: Training and testing
484.102(d)(1)	E-0037	Standard: EP Training Program
484.102(d)(2)	E-0039	EP Testing Program
484.102(e)	E-0042	Standard: Integrated healthcare systems
<b>484.105</b>	<b>G940</b>	<b>Condition: Organization and administration of services</b>
484.105(a)	G942	Standard: Governing body
484.105(b)(1)	G944	Standard: Administrator must:
484.105(b)(1)(i)	G946	Administrator appointed by governing body
484.105(b)(1)(ii)	G948	Responsible for all day-to-day operations
484.105(b)(1)(iii)	G950	Ensure clinical manager is available
484.105(b)(1)(iv)	G952	Ensure that HHA employs qualified personnel
484.105(b)(2)	G954	Ensures qualified pre-designated person
484.105(b)(3)	G956	Available during all operating hours
484.105(c)	G958	Standard: Clinical manager
484.105(c)(1)	G960	Make patient and personnel assignments,
484.105(c)(2)	G962	Coordinate patient care
484.105(c)(3)	G964	Coordinate referrals;
484.105(c)(4)	G966	Assure patient needs are continually assessed
484.105(c)(5)	G968	Assure implementation of plan of care
484.105(d)	G970	Standard: Parent-branch relationship
484.105(d)(1)	G972	Report all branch locations to SA
484.105(d)(2)	G974	Direct support and administrative control
484.105(e)(1)	G976	Standard: Services under arrangement
484.105(e)(2)	G978	Must have a written agreement
484.105(e)(3)	G980	Primary HHA is responsible for patient care
484.105(f)	G982	Standard: Skilled services furnished
484.105(f)(2)	G984	In accordance with current clinical practice
484.105(g)	G986	Standard: Outpatient therapy services
484.105(h)	G988	Standard: Institutional planning

<b>484.110</b>	<b>G1008</b>	<b>Condition: Clinical records</b>
484.110(a)	G1010	Standard: Contents of clinical record
484.110(a)(1)	G1012	Required items in clinical record
484.110(a)(2)	G1014	Interventions and patient response
484.110(a)(3)	G1016	Goals in the patient's plans of care
484.110(a)(4)	G1018	Contact information for the patient
484.110(a)(5)	G1020	Contact info for primary care practitioner
484.110(a)(6)	G1022	Discharge and transfer summaries
484.110(b)	G1024	Standard: Authentication
484.110(c)(1)(2)	G1026	Standard: Retention of records
484.110(d)	G1028	Standard: Protection of records
484.110(e)	G1030	Standard: Retrieval of records
<b>484.115</b>	<b>G1050</b>	<b>Condition: Personnel qualifications</b>
484.115(a)	G1052	Standard: Administrator
484.115(b)	G1054	Standard: Audiologist
484.115(c)	G1056	Clinical Manager
484.115(d)	G1058	Standard: Home Health Aide
484.115(e)	G1060	Standard: Licensed Practical (Vocational) Nurse
484.115(f)	G1062	Standard: Occupational Therapist
484.115(g)	G1064	Standard: Occupational Therapy Assistant
484.115(h)	G1066	Standard: Physical Therapist
484.115(i)	G1068	Standard: Physical Therapist Assistant
484.115(j)	G1070	Standard: Physician
484.115(k)	G1072	Standard: Registered Nurse
484.115(l)	G1074	Standard: Social Work Assistant
484.115(m)	G1076	Standard: Social Worker
484.115(n)	G1078	Standard: Speech-Language Pathologist