

Questions and Answers Concerning the Certification of CORFs

1. **Q.** What services must a CORF provide as a minimum to be eligible for Medicare Certification?
 - A. Physicians' services, physical therapy services, and social or psychological services. Some CORFs may provide additional services. However, regardless of the scope of services a CORF provides, it must meet all of the conditions of participation in order to be certified.
2. **Q.** Are CORFs considered providers or suppliers?
 - A. CORFs are providers, will be required to have provider agreements and will be reimbursed by Intermediaries.
3. **Q.** What is the earliest effective date that a CORF can be certified to participate in the Medicare program?
 - A. A CORF's earliest effective date for Medicare certification is the date the facility is surveyed, meets the statutory requirements contained in the Social Security Act, and is found in compliance with the conditions of participation and all other program requirements.
4. **Q.** Do all facilities applying for certification as CORFs require onsite surveys?
 - A. We feel that an onsite survey should be performed for all facilities applying for participation as CORFs. While the CORF program does resemble the existing OPT/OSP program, sufficient differences exist between the two to necessitate surveying even those CORF applicants currently certified as OPT/OSPs.
5. **Q.** May the CORF render services off the CORF premises?
 - A. All the services provided to CORF patients must be rendered on the CORF premises with the exception of one visit to the patient's home for purposes of evaluating his/her home environment relative to CORF's treatment goals.
6. **Q.** May a CORF be located in a hospital or SNF?
 - A. Yes, but it must be certified as a separate entity under its own provider number and meet the conditions of participation for CORFs. For example, a CORF may lease space within a SNF. In such a case the CORF must be surveyed separately from the SNF, and it must independently meet the conditions of participation for CORFs.
7. **Q.** Can a Community Mental Health Center be eligible for certification as a CORF?
 - A. As long as all conditions of participation are met, a Community Mental health Center can be certified for participation in the CORF program.

8. **Q.** May a certified OPT/OSP participate in the Medicare program as a CORF?
- A. A certified OPT/OSP cannot concurrently have its total premises certified as both an OPT/OSP and a CORF. However, if an identifiable part (i.e., wing, floor, room) is set aside exclusively for the operation of the CORF and treatment of CORF patients, this area would be looked upon as the CORF and would be surveyed and certified as such. (It would also be issued its own provider number.) Records and other necessary documents would have to be contained within the defined area of the CORF. Also, there may be a situation in which a particular location serves part-time as a CORF and part-time as an OPT/OSP. For example, a facility functions Monday, Tuesday and Wednesday of each week as a CORF and Thursday, Friday and Saturday as an OPT/OSP. This type of situation would be acceptable for certifying both a CORF and an OPT/OSP on the same premises, assuming both the CORF and OPT/OSP meet the respective conditions of participation.
9. **Q.** How will OPT/OSP extension units be handled when the total OPT/OSP primary location wishes to be certified as a CORF?
- A. CORFs will not be allowed to have extension units. However, an OPT/OSP primary location will be allowed to convert to a CORF as long as it meets the CORF conditions of participation. Normally, the OPT/OSP will relinquish its OPT/OSP certification unless it shares space with the CORF under the terms described in question and answer No. 8.

The OPT/OSP, following the conversion of its primary site to a CORF, may select one of its extensions as the new primary site. If the extension unit surveyed pursuant to section 3096 of the SOM, then an OPT/OSP provider number may be transferred to the new OPT/OSP primary location under change of address procedures.

The new primary location must be surveyed within 6 months to determine whether it meets all of the conditions of participation governing the operation of an OPT/OSP provider. In the interim, the new primary location and its existing, associated, certified extension units will be reimbursed for OPT/OSP services. If the extension unit identified as the new primary location was never surveyed and certified under the old primary site OPT/OSP provider number, then the old OPT/OSP provider number will be retired. A new number will be issued following procedures for certifying OPT/OSP providers except that the existing, associated, certified extension units will not have to be resurveyed with the survey of the new OPT/OSP primary location. In this situation, the new primary location and associated extension units will not be reimbursed for OPT/OSP services until the new primary site is inspected and found to meet the conditions of participation.

An existing OPT/OSP extension unit may convert to a CORF if it meets the CORF conditions of participation. However, an OPT/OSP extension will not be allowed to function concurrently as an OPT/OSP and a CORF.

10. **Q.** Who will assign provider numbers to CORFs?
- A. Provider numbers will be assigned by the Regional Offices as is done for other Medicare providers and suppliers. MMACS has set aside the 00-4500-00-4999 series of numbers to be used specifically for CORFs.

11. **Q.** What steps should be taken when a facility wishes to participate in the CORF program?
- A. When a request is received, the State agency should follow the steps as outlined in 2110 of the SOM, including the forwarding of Model Letter A of a similar notice, to the potential CORF applicant.

When the completed Request for Certification is received ascertain if the facility provides the three required services (physician, physical therapy and psychological or social services). If the facility does not offer these three services, it is ineligible to participate in the CORF program and should be notified of this decision. (A letter similar to model letter B (attached) can be used.) If the applicant is found eligible to participate as a CORF, determine if it is currently certified as an OPT/OSP provider.

12. **Q.** What does the initial certification survey process involve?
- A. The specifics on initial certification survey process which includes the CORF policy manual review, patient caseload criteria, and inspections required will be clarified in the initial application letter from the Missouri Bureau of Home Care and Rehabilitative Standards (BHCRS). This letter is sent to the applicant after successful processing of the initial application with the Medicare Contractor.