

1 **Policy:** **Alternate Practice Sites**

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3 **Date of Implementation:** **October 29, 2010**

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5 **Product:** **Specialty**

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8 Alternate practice sites as described in this policy must adhere to the same standards as
9 stand-alone office-based practices (see the *Office Facility Standards (QM 20 – S)* policy
10 and its affiliated specialty-specific addenda). Furthermore, additional standards apply to an
11 office located in a residential structure or in a facility other than a stand-alone office.

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13 Mobile Services are not to be provided in any type of vehicle. ASH does not consider a
14 vehicle to be an alternate practice site.

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16 All office locations must adhere to American Specialty Health – Specialty (ASH) standards
17 for site appearance, office policies, emergency procedures, access to treatment/services,
18 safety, privacy, confidentiality, medical record components and storage, and ability to meet
19 expectations for the delivery of quality treatment/services and care as defined in the *Office*
20 *Facility Standards (QM 20 – S)* policy and the affiliated specialty-specific policy addenda,
21 as well as the applicable standards below. Non-compliance with alternate site standards
22 can preclude an office location from being a part of the network.

23

24 **PRACTITIONER/PROVIDER OFFICE LOCATED IN A FACILITY OTHER**
25 **THAN A STAND-ALONE OFFICE**

26 A practitioner/provider’s office located in a facility other than a stand-alone
27 practitioner/provider office (e.g., health club, rehabilitation center, gym, natural foods
28 store, herbal apothecary, etc.) is held to the same standards as stand-alone office-based
29 practices.

30

31 In addition to the stand-alone office-based practice standards, an office located in a facility
32 other than a stand-alone office is also subject to the following standards:

- 33 • The facility location and the entrance to the facility is easy to locate, including
34 either a visible sign noting the practitioner/provider’s name, clinic name, and/or
35 specialty, or the address numbers on the building are clearly visible from the street
36 and the appropriate entrance is easily identified and accessible.
- 37 • Services are to be accessible to the general public, and there are no financial
38 implications to the member (i.e., member must pay health club dues or visitation
39 fees to access the practitioner/provider’s office).

- 1 • Although the practitioner/provider’s office and the facility may share a common
- 2 entrance, upon entering the facility, members should have unobstructed access to
- 3 the office without the need to walk through other areas of the facility (exercise area,
- 4 weights area, health food store, etc.).
- 5 • Members accessing the practitioner/provider’s office will not pass by or through
- 6 areas that may pose a safety hazard to the member.
- 7 • There should be a designated waiting area providing adequate space and privacy to
- 8 members.
- 9 • The practitioner/provider’s office, including the telephone, fax, medical records,
- 10 and electronic records, must be independently secured from the facility to maintain
- 11 patient confidentiality.
- 12 • The consultation, exam, and treatment areas are dedicated solely to clinical
- 13 services.
- 14 • The facility must provide for physical and audible privacy during consultation and
- 15 exam, including but not limited to a minimum of one room within the dedicated
- 16 office space that contains a solid door.
- 17 • The telephone and fax lines must be secured and accessible only to the
- 18 practitioners/providers and staff in order to maintain confidentiality.
- 19 • Medical records, including any electronic records, must be secured to maintain
- 20 confidentiality.
- 21 • The practitioner/provider must have after-hours access to the office portion of the
- 22 facility to access records and/or care for a member in an urgent situation.

23
24 **PRACTITIONER/PROVIDER OFFICE LOCATED IN A RESIDENTIAL**
25 **STRUCTURE**

26 In addition to the stand-alone office-based practice standards, an office located in or
27 adjacent to a home is also subject to the following standards.

28
29 **General Requirements**

- 30 • There must be adequate parking within a reasonable distance to the office (e.g.,
- 31 close to the office; handicap accessible; well lit; safe, flat surface; sufficient number
- 32 of parking spaces; etc.).
- 33 • The facility location and the entrance to the facility is easy to locate, including
- 34 either a visible sign noting the practitioner/provider’s name, clinic name, and/or
- 35 specialty, or the address numbers on the building are clearly visible from the street
- 36 and the appropriate entrance is easily located.
- 37 • If the entrance to the facility is not separate from the entrance to the
- 38 practitioner/provider’s home, members must have immediate access to the office
- 39 once inside the home, without having to pass through any portion of the living
- 40 quarters.

- 1 • The office must be separate from the living quarters.
- 2 • Members accessing the practitioner/provider’s office will not pass by or through
- 3 areas that may pose a safety hazard to the member.
- 4 • The facility must provide adequate space (i.e., width of a wheelchair, walker) in all
- 5 areas of the facility, including but not limited to doorways, hallways, reception area,
- 6 and consultation/treatment area.
- 7 • The consultation, exam, and treatment areas must be dedicated only to the services
- 8 being rendered (i.e., not shared with home activities).
- 9 • The reception/waiting area may not be shared with the home in which the office is
- 10 located; the reception/waiting area must be dedicated to the practitioner/provider’s
- 11 office.
- 12 • The facility must provide for physical and audible privacy during consultation and
- 13 exam, including but not limited to a minimum of one room within the dedicated
- 14 office space that contains a solid door.
- 15 • The telephone and fax lines must be secured and accessible only to the
- 16 practitioners/providers and staff in order to maintain confidentiality. The home
- 17 telephone number is different than the office telephone number.
- 18 • Medical records, including any electronic records, must be secured to maintain
- 19 confidentiality.
- 20 • The practitioner/provider is aware of state and local regulations regarding the
- 21 requirements for a business license or certificate of occupancy and is in compliance
- 22 with these regulations.
- 23

24 **Confidentiality and Privacy**

- 25 • There is a minimum of two (2) patient/client areas, including an area for
- 26 consultation/treatment and an area for reception/waiting.
- 27 • The facility must provide for physical and audible privacy during consultation and
- 28 exam, including but not limited to a minimum of one room within the dedicated
- 29 office space that contains a solid door.
- 30 • The telephone and fax lines must be secured and accessible only to the
- 31 practitioners/providers and staff in order to maintain confidentiality.
- 32 • Medical records, including any electronic records, must be secured to maintain
- 33 confidentiality.