

Part B Insider (Multispecialty) Coding Alert

Documentation: Physicians' Face to Face Documentation Continues To Challenge Home Health Agencies

Proposal would allow NPPs to perform inpatient face-to-face visits.

A small change to face-to-face (F2F) physician encounter requirements contained in CMS's 2013 PPS proposed rule isn't offering much relief to home health agencies (HHAs) overwhelmed with F2F difficulties.

Like in outpatient settings, CMS now wants to allow non-physician practitioners to perform the F2F visit in an inpatient facility. CMS proposes "to allow an NPP in an acute or post-acute facility to perform the face-to-face encounter in collaboration with or under the supervision of the physician who has privileges and cared for the patient in the acute or post-acute facility, and allow such physician to inform the certifying physician of the patient's homebound status and need for skilled services," according to the 2013 home health prospective payment system proposed rule published in the July 13 Federal Register.

Physician Compliance With F2F Bedevils Agencies

"Any concession is helpful," acknowledges clinical consultant **Pam Warmack** with Clinic Connections in Ruston, La. But this change is unlikely to significant alleviate any of the burdens facing home care providers regarding the F2F requirement, she adds.

Institutional physicians may find the change useful, but most agencies probably won't, agrees Chicago-based regulatory consultant **Rebecca Friedman Zuber**. "It hardly provides the kind of relief that agencies would like to see for this onerous and overly complex rule."

Even facility docs may not find the change that helpful, suggests **Judy Adams** with Adams Home Care Consulting in Chapel Hill, N.C. "One of big issues is that the certifying MDs do not want to sign the F2F when they have not seen the patient," Adams points out.

Plus: "The ongoing tinkering is just one more thing to have to mess with," Zuber observes.

The 2013 proposed rule fails to address the major hurdle HHAs are facing in F2F compliance -- getting physicians to complete appropriate F2F documentation. "This process continues to be very frustrating for many HHAs where the physicians remain resistant to F2F,"

Adams says. "There remains a high level of frustration with the time and effort it requires of HHAs to get this information from the physicians in a timely manner."

"Home care providers continue to struggle with retrieving F2F documentation that is complete and accurate and reflects the reason for the referral to home care," Warmack relates. "Providers are constantly disappointed by the lack of homebound documentation provided by physicians."

HHAs would love to see some solutions from CMS, but the proposed rule doesn't contain them. "CMS says we are to educate the physicians about how to complete the F2F and supposedly that will rectify all the problems. This is completely unrealistic and is not working," Warmack stresses.

Denials Abound When Documentation Isn't 'Clearly Titled'

CMS does make one documentation requirement clarification that may head off some F2F-based claims denials. CMS



"received notice that claims are being denied if the face-to-face documentation is not 'clearly titled' by the certifying physician," the proposed rule explains. "Our intent was that the face-to-face documentation be clearly titled, but not necessarily by the certifying physician." The agency is proposing a change to the regs to make clear that the entity titling the documentation does not have to be the physician.

This change will be a relief, says the National Association for Home Care & Hospice. The current interpretation of the titling rule "requires returning documentation to already overburdened physicians with a request to affix a title," NAHC notes.