

Eli's Rehab Report

Regulations: HHAs Hold Their Breath For The Final Rule

Don't get misled into thinking you've gained an extra therapy visit.

Delaying reassessment can cost you coverage is the message sent out by the **Centers for Medicare & Medicaid Services** in a recent clarification. Home health agencies, which had cheered the July PPS proposed rule, have something new to worry about.

In the 2013 home health prospective payment system proposed rule, the CMS notes that "currently, when a qualified therapist misses one of the required reassessment visits, once the therapist has completed the required reassessment, coverage resumes after this reassessment visit," according to the rule published in the July 13 Federal Register. "Some agencies and therapists believe they are being unfairly penalized by this policy and that the reassessment visit should be covered as therapy was also provided during that visit even though it was not timely," the rule points out.

CMS seems to agree in the rule, proposing that "if a qualified therapist missed a reassessment visit, therapy coverage would resume with the visit during which the qualified therapist completed the late reassessment, not the visit after the therapist completed late reassessment," the agency proposes.

HHAs at first cheered this proposal as restoring coverage of an extra visit. But then CMS reportedly gave the **National Association for Home Care & Hospice** its interpretation of how coverage would change under that provision -- instead of the 14th and 20th visits going uncovered, the 13th and 19th visits would lose coverage if the reassessment was delayed.

Under this interpretation, CMS merely "exchanges coverage of one visit for another," NAHC observes in its comment letter. "Rather it will simply be a cost increasing trade-off." Costs will increase because HHAs will have to provide "extensive education of therapists and billing personnel" and undertake "costly operational and software programming changes."

CMS should cover the 13th or 19th visit and the visit in which the therapist completes the reassessment, urges the **American Physical Therapy Association** in its comment letter. "In each of these visits, the qualified professional is providing skilled therapy services that are covered by the Medicare home health benefit," APTA reasons.

Other therapy changes addressed in comment letters include:

- **Missed reassessments in multi-discipline cases.** Commenters endorsed CMS's proposal to maintain coverage of disciplines that conduct their therapy reassessments on time, even when another therapy discipline in the episode does not. "Current rule provision may result in patients not getting the services they need when agencies are penalized for each therapy visit, regardless of discipline, until the late reassessment is completed," explains the **Michigan Home Health Association** in its comments. "A change in language to cease coverage for only the late reassessment discipline allows patients to receive the care that they need without risking a decline in status."
- **Payment reform.** "CMS should ultimately develop and implement a new therapy payment system for the HH PPS," APTA tells CMS. Many commenters recommend that CMS form a Technical Expert Panel (TEP) to tackle the issue.
- **Timing for 30-day reassessments.** The **Ohio Council for Home Care & Hospice** urges CMS to reset the 30-day reassessment clock when a new episode of care begins. "It has been a challenge to keep track of the 'at least every 30 days' requirement when it overlaps into the next episode and this adds additional administrative burdens," the trade group says.
- **Fraud & abuse.** If CMS finds therapy over-utilization and other fraudulent or abusive behaviors, APTA urges the

agency to focus enforcement efforts on bad actors rather than making across-the-board case mix cuts based on therapy reimbursement. >> >>

Note: Watch for upcoming audioconferences analyzing the 2013 PPS final rule. To browse and register for **Eli** home care and hospice audioconferences, go to www.audioeducator.com and select the "home health" or "hospice" tabs in the top blue bar. Or call 1-866-458-2965. Sessions are available via recording or transcript after taking place.