

Eli's Hospice Insider

Compliance: Remove FFE From Your MA Patients' Schedules

New CMS FAQs shed light on thorny face to face encounter issues.

Your **Medicare Advantage** patients may be an administrative pain in many ways, but they do have one redeeming feature from a regulatory standpoint -- no face to face encounter requirement.

The FFE is not required for patients in Medicare Advantage plans, the **Centers for Medicare & Medicaid Services** says in a set of frequently asked questions on its website. "The face-to-face provision applies only to Medicare fee for service," CMS says in FAQ 10300.

"I think that the Medicare Advantage plans are exempt from this requirement because they are not required to pay by the episode," notes Chicago-based regulatory consultant **Rebecca Friedman Zuber**. "Many of them authorize visits in small numbers, so the financial impact is not as great."

And one of the aims of the FFE requirement is to control skyrocketing home care utilization. Managed care organizations are assumed to be controlling utilization already, Zuber points out. "Remember, it is supposed to be managed care."

Coming soon: MA patients may be exempt, but don't expect Medicaid patients to stay exempt from FFE requirements for long. Watch for a Medicaid FFE requirement to come down the pike, says consultant **Aaron Little** with BKD in Springfield, Mo. Other clarifications CMS issued in the FAQs include:

- FFEs are required for certifications only, not recerts (FAQ 10301).
- Law requires that the physician doing the FFE must document it, so CMS can't grant exceptions (FAQ 10296).
- CMS runs through why it is allowing different physicians to certify the patient for home health and complete the FFE and documentation, versus sign the plan of care (FAQs 10295 and 10296).

Note: A link to CMS's FFE FAQs is on CMS's HHA page at www.cms.gov/center/hha.asp -- scroll down under "Spotlights" to the Dec. 22 post.