

OASIS Alert

Advance Beneficiary Notices: Tackle Home Health ABNs With These Practical Pointers

Be sure you know the three trigger points for issuing ABNs.

Add those ABN forms--and these tips--to your OASIS admission packet. You need to be using them by May 31, the **Centers for Medicare & Medicaid Services** warns.

Clinicians who complete OASIS assessments are likely to use the new home health advance beneficiary notice on many occasions, says consultant **Judy Adams** with Charlotte, NC-based **LarsonAllen Health Care Group**, so be sure they know the ABN ABCs.

Agencies need to issue the ABN notices at three trigger points: (1) when initiating non-covered care, (2) when reducing non-covered or covered care, and (3) when terminating non-covered care. It is important to understand what you need to do when these situations occur, says Burtonsville, MD health care attorney **Elizabeth Hogue**.

Delivery Requirements Have Changed

Besides explaining in plain language why they don't think Medicare will pay for the services, home health agencies must:

- **Know your agency's two form options.** Issue Option 2 when reducing or terminating care for the agency's own financial or other reasons, such as staffing problems. Issue Option 1 in all other cases, CMS says.
- **Know the patient's choices.** With an Option 2 ABN, the patient can try to get services from another agency. With an Option 1 ABN, the patient can reject the services Medicare won't pay for, pay for them privately or bill other insurers. If the patient opts to bill another party, the HHA can charge the patient up front, CMS says.
- **Know your delivery procedures.** Agencies don't have to deliver the forms in person, but they must have the patient sign and date the ABN. Then both agency and patient keep a copy. Getting the form signed is more likely when it is delivered in person, Adams notes.
- **Know when ABNs aren't required.** HHAs don't have to issue ABNs when care increases; the duration of care shortens; patients transfer to other covered care; service reductions are anticipated in the plan of care; patients' goals are met; physicians' orders are completed; the beneficiary chooses the care change; emergencies like natural disasters disrupt care; personnel change; visit times change; or product brands change, CMS directs in the ABN instructions.

Note: For up-to-the-minute ABN information order Eli's Home Care Week at www.elihealthcare.com or by calling [1-800-874-9180](tel:1-800-874-9180).