

OASIS Alert

OASIS News: HHAs Keep M0175 Money - For A Bit

Millions will still go back come spring.

Although the dreaded M0175 retroactive recoupments haven't disappeared, at least they're still under wraps.

Home health agencies expected M0175 recoupments from the first three years of the prospective payment system to start in January. The **HHS Office of Inspector General** estimates takebacks for fiscal year 2001 alone at \$23 million.

But now April appears to be the earliest agencies will see the bite, according to regional home health intermediary sources.

The new date isn't really a delay, given that the transmittal requiring the recoupments specifies implementation only "no earlier than January 2005," a **Centers for Medicare & Medicaid Services** official tells **Eli**.

The timeline: Regional home health intermediaries expect to receive the programming for the takebacks in mid-February and test it in the following weeks. If the file is OK, intermediaries will post the pending M0175 adjustments for FY 2001 in early March. Providers will then have a month to look over the coming adjustments.

If all goes as planned, the recoupments will start in early to mid-April, RHHI officials predict. CMS also has agreed to identify M0175 mistakes in agencies' favor for FYs 2001, 2002 and 2003 and to refund any underpayments.

Editor's Note: To find out more about how to answer and bill M0175 accurately and obtain your rightful reimbursement, sign up for a March 10 **Eli Research** and **Coding Institute** teleconference, "OASIS Accuracy (Part 1): An In-Depth Look at the Service Domain Items," by calling 1-800-508-2582.

1. **In December, members of the National Quality Forum voted** on its final recommendations for home health quality standards. Members considered comments 59 organizations submitted on the much-disputed proposed standards (see Eli's OASIS Alert, Vol. 5, No. 10). While a report may be issued in March if voters approved all the measures, it is likely to be pushed off further, a spokesperson predicts.
2. **Home care providers will have no new diagnosis codes to cope with** in April. Although the ICD-9 committee now has the ability to revise codes every six months, there were no requests for April updates, CMS says on its coding Web site. "All those requesting new or revised codes elected to have the new codes implemented on October 1, 2005," CMS notes.
3. **CMS issued a final rule in November 2004** regarding the notices that HHAs will have to issue to every single patient they discharge. But CMS took comments on the final rule until Jan. 25, and industry experts expect to see some substantial changes to the notice and appeal procedures as they were outlined in the Nov. 26 Federal Register. Industry trade associations are in talks with CMS to iron out some serious wrinkles with the process as finalized, experts say. (For the latest updates, see Eli's Home Care Week).