

# Health Information Compliance Alert

## Home Health Documentation: Get Ready for the HHCCN

**Don't think of the new form as just one more piece of paper to stock and organize.**

Notification requirements are much the same but you must begin using the new Home Health Change of Care Notice (HHCCN) instead of the Home Health Advance Beneficiary Notice (HHABN) in less than three months.

After announcing the HHCCN last winter, the Centers for Medicare & Medicaid Services (CMS) instructed home health agencies to continue using the HHABN  until now. Home health agencies must transition to using the new HHCCN by Dec. 9, CMS says in a new transmittal.

The new HHCCN will replace Option Boxes 2 and 3 on the HHABN, CMS explains in Sept. 6 CR 8403. For situations that required Option Box 1 on the HHABN, agencies may use the regular ABN (CMS-R-131) that other provider types use.

**In a nutshell:** HHAs will use the regular ABN when patients are accepting financial liability for services. They will use the HHCCN when the doctor has ordered reduced or terminated services, or if the agency will no longer furnish ordered services.

**In other words:** CCNs are "for decreases in services and frequency of home health services due to MD orders or agency business reasons," explains Judy Adams with Adams Home Care Consulting in Asheville, N.C.

You can start using the new forms right away, or wait until the Dec. 9 deadline, CMS says on its website. But "for items and services provided on or after December 9, 2013, the HHABN will no longer be valid, and HHAs must use the ABN and HHCCN," the agency warns.

### Paperwork Burden Stays Intact

Providers had been hoping that any ABN revamp would lighten the unnecessary paperwork load related to the requirement. But thanks to the Litwin court decision that prompted the HHABN in the first place, that hasn't occurred.

"I don't think these new requirements will ease HHAs' paperwork burden at all," says Washington D.C.-based healthcare attorney Elizabeth Hogue. "While I can certainly see that CMS is trying to achieve clarity for both providers and patients, the issues and the process are just too complex to attain this goal."

"The actual notification requirements do not appear to have changed, but the forms you use have," points out attorney Robert Markette Jr. with Hall Render in Indianapolis.

"I don't think changing the forms is going to make a significant difference in compliance," says clinical consultant Pam Warmack with Clinic Connections in Ruston, La. "I have yet to encounter a provider using the current HHABN correctly or consistently. The forms are confusing, as are the triggering events."

**Confusion:** "I don't think the new forms are difficult to understand," Warmack says. "It's just that understanding when to use them at all seems to be the problem." Agencies might avoid Option Box selection confusion now that there are separate forms for the traditional ABN and lawsuit-inspired CCN situations.

"It might make it a little easier, because you have two different forms for two different circumstances," Markette offers. On the other hand, the new form is one more piece of paper to stock and organize, Markette adds.

Take These Steps to Comply With Notice Requirements

Whether your agency has been acting in compliance with the HHABN since it was substantially revised in 2006 or not, initiation of the new HHCCN form is the perfect time to revisit your patient notice procedures in this area, experts agree.

Consider these steps to ensure your compliance with this regulatory requirement and the new forms:

- **Select a point person.** "Agencies' best regulatory staff should thoroughly digest available materials," Hogue advises. (See editor's note at the end of this story for links to CMS materials on the requirement.)
- **Set a transition timeline.** You have nearly three months to make this change, but you may want to go ahead and jump, Hogue suggests. "This is one of those things that you want to swallow real fast so it won't taste so bad," she says.
- Train staff. "Educate other staff members as quickly as possible," Hogue counsels.

"The forms are confusing, as are the triggering events," Warmack laments. "I think all you can do is train, train, train."

**Tip:** Give staffers real-world scenarios to help them get the requirement down, she suggests.

**Revise your P&Ps.** "Using these forms is going to primarily involve revising your work flow so that the option box decision points lead you to the correct form," Markette says.

You may want to color code the forms to help staffers keep them straight, Warmack suggests.

**Note:** The CCN CR is at [www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2781CP.pdf](http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2781CP.pdf) and a related MLN Matters article is at [www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8403.pdf](http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8403.pdf). You can download the form at [www.cms.gov/Medicare/Medicare-General-Information/BNI/HHABN.html](http://www.cms.gov/Medicare/Medicare-General-Information/BNI/HHABN.html)