Cleveland Clinic

Physician Guide to Home Health Care Certification for Medicare Enrollees

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Background

Helping patients succeed at home with home health care is a rewarding aspect of medical practice that promotes independence, keeps families in-tact, and provides value

The Affordable Care Act has changed the physician home health initial certification requirements for Medicare beneficiaries effective 4/1/2011 to include a face-to-face encounter

Contents

Physician Must Certify:

1. Patient under their care & “confined to home”

2. Skilled home health services are necessary

3. Patient has face-to-face encounter in 90-days prior or 30-days after start of home health care with physician, advanced practice nurse, or physician assistant related to the condition(s) that necessitate home health care

(face-to-face encounter mandate only applies to initial certification for initial 60-day episode of care, not to subsequent re-certification episodes)

What Does "Confined to the Home" or "Homebound" Mean?

Absences from home require considerable and taxing effort, some examples:

- Needs help of another person to leave home
- Needs assistive devices to leave home
- Needs special transport
- Leaving home exacerbates symptoms (eg shortness of breath, pain, anxiety, confusion, fatigue)

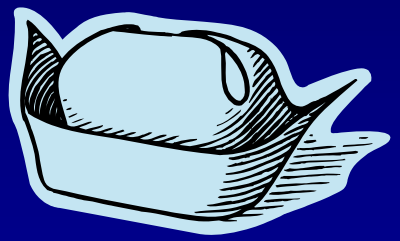
Patient that leaves home infrequently for short durations or for health care MAY STILL be considered homebound, some examples:

- Adult day programs
- Outpatient medical care
- Religious services
- Dialysis
- Barber

What are Medically Necessary Home Health Nursing Services?

Intermittent Skilled Nursing (<7d/wk, <8hrs/day)

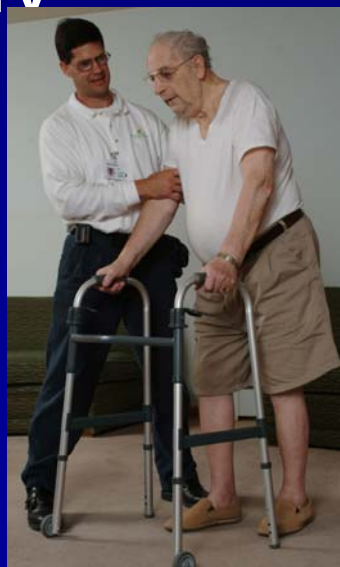
- Teaching and Training
- Observation and Assessment
- Complex Care Plan Management and Evaluation
- Administration of Certain Medications
- Tube Feedings
- Wound Care, Catheters & Ostomy Care
- Medical Gas Initiation
- Nasopharyngeal and Tracheostomy Aspiration / Care
- Psychiatric Nurse Evaluation & Therapy
- Rehabilitation Nursing



What are Medically Necessary Home Health Therapy Services?

Physical Therapy, Speech-Language Pathology, or Occupational Therapy

- Assessments & Training
- Complexity Must Necessitate Skilled Therapist
- Reasonable and Necessary for Maintenance or Restoration of Function Due to Illness or Injury
- Safe and Effective
- Ultrasound, Shortwave, and Microwave Diathermy Treatments
- Hot Packs, Infra-Red Treatments, Paraffin Baths and Whirlpool Baths



What are the Face to Face Encounter Requirements?

- Must be seen in 90-days prior or within 30-days after initial home health start of care, reason for encounter includes reason for home care. Encounter by physician, advanced practice nurse, physician assistant

- Encounter by same physician signing the certification (or an associated APN/PA), in case of post-hospital or post-facility home care the encounter could be by the inpatient physician and the plan of care signed / certified by a community physician

- Documentation supports homebound status, medically necessity of skilled services

Can Hospitalist or Physician Only Seeing Patient in Hospital Certify Home Health?

- The hospital based physician should document / certify the need for home health care based on the face to face encounter in the hospital and then “hand off” the patient to community physician to review and sign plan of care.

- Depending on the clinical situation, if the hospital physician intends to “follow” the initial post-acute care there may be instances where they review and sign the plan of care and then hand-off patient at appropriate time

How Does Physician Get Reimbursed for Certification and Related Services?

- **Code G0180 Initial Certification of Home Health Care**
  ($56 / 0.67 CMS Work RVU), Document:
  - **Review and Signature of Care Plan (CMS-485)**
  - **Review of other Documentation from Home Health Agency**
  - **Changes or Communication About Care Plan with Agency**

- **Code G0179 Re-Certification of Home Health Care**
  ($39 / 0.45 CMS Work RVU)

- **Code G0181 Care Plan Oversight of Home Health Care**
  > 30 min in month ($112 / 1.73 CMS Work RVU)
  - **Can be billed by APNs and physician assistants, above certification codes for physicians only**
  - **For non-encounter activities (eg phone calls with HHA, review documentation.**
  - **Cannot be used for time spent on certification (use above codes)**

Example

Mr. Jones is an 83 yo man hospitalized with HF exacerbation (has co-morbid arthritis and low vision) going home and needs home nursing due to medication changes and high potential for relapse. Needs home physical therapy due to deconditioning during exacerbation and falls risk reduction

Referral Process / Options

- Contact Hospital Case Manager Responsible for Discharge Planning
- May Call Home Health Directly if no Case Manager (216-444-HOME for Cleveland Clinic at Home)
- If Charting in Outpatient EPIC Chart Can Refer to Cleveland Clinic at Home Without Having to Call in Orders (“Consult Home”)
- Offer / Respect Patient Choice of Agency

Example of Documentation by Physician, APN, or PA

"Mr. Jones has had a face to face encounter with me today, December 13, 2010

For the following condition(s) Encounter Diagnosis

1. Heart Failure 2. Gait Abnormality

Based on this encounter I certify this patient needs home health care. Specific home health services needed are Skilled Nursing and Physical Therapy. The patient is appropriate for home care (homebound) because leaving home is difficult and taxing and patient leaves home infrequently .

Specific issues are teaching new medication regimen, and assessment for side-effects (hypotension) from increased diuretics and observation for relapse of pulmonary edema. Needs teaching about sodium restriction and checking weights. Gait has become unsteady and needs PT assessment, home safety assessment, and likely gait training and program to improve strength, balance, and endurance"

Example of Documentation for Certification Billing by Physician

“Patient's home health 485 form / care plan reviewed and signed. Relevant medical records were reviewed. No changes were indicated”

Use G0180 for Initial 60-Day episode and G0179 for Re-certification (subsequent episodes)

Dr. Landers EPIC Smart Tools

- Smart Text Documentation During Face to Face Encounter
  "HOMEHEALTH_FACE_TO_FACE"

- Documentation for Billing for Home Care Certification and Re-Certification
  "HOMEHEALTH_CERTIFICATION"

EPIC tools are for reference and most common scenarios, all documentation should be appropriately individualized to patient situation

Getting Help

- **Call 216-444-HOME to Speak With a Cleveland Clinic at Home Clinical Manager or Administrator**
- **Medical Care at Home (Physician and NP Home Visits for Homebound Patients 444-8742)**
- **Page Dr. Landers Any Time (83685)**

References

42 CFR Parts 409, 418, 424 et al. Requirements for Home Health Agencies and Hospices; Final Rule
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Medicare General Information, Eligibility, and Entitlement Chapter 4 - Physician Certification and Recertification of Services
https://www.cms.gov/manuals/downloads/ge101c04.pdf

Medicare Benefit Policy Manual Chapter 7 - Home Health Services
https://www.cms.gov/manuals/Downloads/bp102c07.pdf

Nicoletti, B. How to Document and Bill Care Plan Oversight. Fam Pract Manag. 2005 May;12(5):23-25.
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