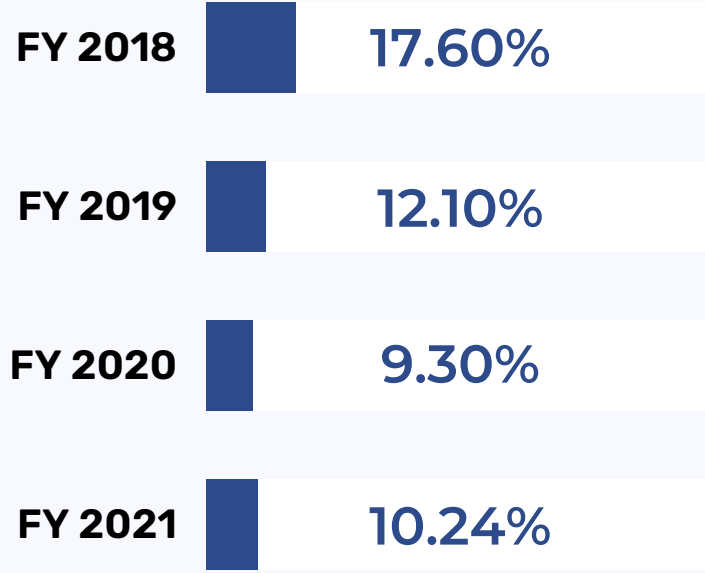


Avoid Improper *Home Health Payments* By Taking Appropriate Corrective Actions

The Department of Health & Human Services (HHS) releases a financial report every year that provides fiscal and high-level performance results that allow for the assessment of HHS’ performance over the previous fiscal year. HHS uses the Comprehensive Error Rate Testing (CERT) program to estimate Medicare fee-for-service (FFS) improper payments. The CERT program reviews a stratified random sample of Medicare FFS claims to determine if HHS properly paid claims based on Medicare’s policies on coverage, coding and billing.^{1, 2}

HOME HEALTH IMPROPER PAYMENT ESTIMATE RATES



COMMON CAUSES FOR HOME HEALTH IMPROPER PAYMENT

Insufficient Documentation

Medical Necessity

Incorrect Coding

No Documentation

Others

STRATEGIES TO MANAGE HOME HEALTH IMPROPER PAYMENT

CMS recommends some practices to correct most of the errors found.³

1 QUALITY CONTROL ON SERVICES

- Check to make sure the staff person providing the service is authorized to provide the service;
- Check to make sure that the services provided are authorized in the written person-centered plan;
- Check that documentation includes the date, time, type, and service provider; and
- Check for signatures to validate services provided.

QUALITY CONTROL ON BENEFICIARY RECORDS

2

- Check for required forms in the record (person-centered plan);
- Check for physician orders; and
- Check for a beneficiary identifier on each document.

3 QUALITY CONTROL FOR CLAIMS PROCESSING

- Check the calculation of the number of units for the procedure code or service code;
- Check the procedure code;
- Check the unit pricing of supplies;
- Check to make sure the dates of service entered match the dates of service on the documentation; and
- Check the person-centered plan for the number of units authorized for the procedure or service code

3GEN’S HOME HEALTH REVENUE CYCLE SOLUTIONS



Home Health
Coding



OASIS Review &
Recommendation



Home Health
Billing



Accounts Receivable &
Denial Management



Clinical Documentation
Improvements

1. National Association for Home Care & Hospice, "Improper Payment Rates for Home Health and Hospice Providers Decreased in 2019," 2 January 2020.
2. HomeCare News, "HHS Financial Report for 2021 Identifies Increases in Home Health, Hospice Payment Error Rates," Cahaba Media Group, Inc., 7 December 2021.
3. Centers for Medicare & Medicaid Services (CMS), "Common Errors That Lead to Improper Payments for Home Health Services and Agency-Provided Supplies, Equipment, and Appliances," October 2015.