

## Home Health CY 2012 Proposed PPS Changes

### CY 2012 Payment Rates - Case Mix Creep

The national standardized 60-day episode rates will be reduced by 3.79 percent for 2012 and 1.32 percent in 2013 to fully account for the growth in nominal case-mix from the inception of HH PPS through 2009.

### Hypertension codes 401.1 and 401.9

CMS will remove ICD-9-CM code 401.1, Benign Essential Hypertension and ICD-9-CM code 401.9, Unspecified Essential Hypertension, from the HH PPS case-mix model's hypertension group to more accurately align payment with resource use. The case-mix weight will be revised to redistribute HH PPS payments due to the removal of these hypertension codes.

### Redistribution of Payments from Therapy Episodes

The current case-mix weights are being revised to redistribute HH PPS payments by lowering the relative weights for episodes with high therapy and increasing the weights for episodes with little or no therapy.

### HHCAHPS Reconsideration and Appeals

CY 2012 regulations include a reconsideration and appeals process for HHAs that fail to meet the HHCAHPS data collection requirements. HHAs that fail to meet the HHCAHPS data collection requirements can have their payments reduced by 2 percent.

### Face-to-Face Encounter

For starts of care beginning January 1, 2012 and later, the nonphysician practitioner or the attending acute or post-acute physician performing the face-to-face encounter must communicate the clinical findings of the face-to-face encounter to the certifying physician so that the certifying physician could document the face-to-face encounter accordingly, as part of the signed certification.

### Confined to the Home

CMS is clarifying the definition of "confined to the home" by moving the requirement that the patient need supportive devices, transportation, etc., to the beginning of section 30.1.1 of the Chapter 7 Home Health Benefit Policy Manual as a necessary requirement to be considered "confined to the home."