# Face-to-Face Requirements for Initial Orders of Home Health Services and Certain Durable Medical Equipment (DME)

Presented by the Department of Social Services and DXC Technology



#### **Training Agenda**

1. Face-to-Face Requirements for Initial Orders of Home Health Services

2. Face-to-Face Requirements for Certain Durable Medical Equipment (DME)



# Face-to-Face Requirements for Initial Orders of Home Health Services



# Home Health Services Face-to-Face Requirements

As required at 42 C.F.R § 440.70, a face-to-face encounter with an enrolled physician, or non-physician practitioner (NPP) must occur for payment of Home Health Services

This face-to-face encounter must:

- be related to the primary reason the HUSKY Health member requires home health services;
- occur between the HUSKY Health or HUSKY Health Waiver member and a Connecticut Medical Assistance Program (CMAP) enrolled physician or NPP (advanced practice registered nurse (APRN), physician assistant (PA), or certified nurse mid-wife (CNM);
- take place within 90 days before or 30 days after the start of all <u>initial</u> orders for home health services;
- If performed by a NPP, the findings of the encounter must be communicated to and signed off on by the enrolled physician who has ordered the home health services.



# Home Health Services Face-to-Face Requirements <u>Cont'd</u>

A separate Face-to-Face Encounter for Home Health services is not required for the following:

- When home health orders for initial services originate from a hospital acute or post-acute discharge where a face-to-face encounter with an appropriate physician or NPP occurred in that setting and the documentation requirements for the face to face encounter have been met.
- If the source of payment for home health services changes from Medicare to Medicaid and the face-toface encounter requirements were fulfilled and documented as part of the Medicare authorized services.
  - If requested, a copy of the documentation used to fulfill the Medicare face-to-face requirement must be made available to the Department of Social Services (DSS) for review during a post-payment audit of home health services reimbursed under the Connecticut Medical Assistance Program (CMAP).



# Home Health Face-to-Face Documentation Requirements

#### Ordering physician:

- o must sign the order for home health services
- must maintain documentation regarding the face-to-face encounter in the HUSKY Health or waiver members' medical record at their own location
- if the face-to-face encounter was performed by a NPP, the findings of the face-to-face encounter must be communicated to the enrolled physician who must sign off on the findings
- must provide documentation to the Home Health Agency substantiating that the face-to-face requirements have been met.

#### • Home Health Agency:

- must ensure receipt of documentation for each HUSKY Health or HUSKY Health Waiver member for whom a faceto-face visit is required
- must also maintain the documentation in the HUSKY Health or HUSKY Health Waiver member's record on file at their own location.



### Home Health Face-to-Face Documentation Requirements <u>Cont'd</u>

Required Face-to-Face documentation must, at a minimum, include all of the following:

- If the face-to-face encounter was performed by a NPP, documentation must include:
  - o the clinical findings of the face-to-face encounter substantiating the need for home health services;
  - dated signature of the enrolled physician
- The primary reason for which the Home Health services are required;
- The date of the face-to-face encounter;
- The name (including either hard copy or digital signature) and credentials of the physician or NPP (physician assistant (PA), Advanced Practice Registered Nurse (APRN) or Certified Nurse Mid-wife (CNM) who conducted the face-to-face encounter



# Face-to-Face Requirements for Certain Durable Medical Equipment (DME)



#### Face-to-Face Requirements for Certain DME

As required at 42 C.F.R. §440.70, no Medicaid payment for certain DME shall be made unless a face-to-face encounter with an enrolled physician, physician assistant, or APRN occurs.

This face-to-face encounter must:

- be related to the primary reason the HUSKY Health member requires the DME;
- occur between the HUSKY Health member and a Connecticut Medical Assistance Program (CMAP), enrolled physician, physician assistant, or APRN;
- take place on or before the date of the prescription/order;
- not be older than 6 months prior to the date on the prescription/order; and
- be on or before the date of delivery.



#### Face-to-Face Requirements for Certain DME

The list of DME that requires the face-to-face encounter can be found by accessing the following Medicare Web site link:

<u>DME List of Specified Covered Items – Revised March 26, 2015</u>

#### **Downloads**

DME List of Specified Covered Items - Updated March 26, 2015 [PDF, 69KB]

MLN Matters: Detailed Written Orders and Face-to-Face Encounters [PDF, 108KB]

DME providers are responsible for verifying the list for code updates when a new version of the list is published by CMS

Since this list is maintained by Medicare, there may be DME procedure codes listed that are not currently included on the CMAP DME Fee Schedule.



#### Face-to-Face Requirements for Certain DME Cont'd

The physician, physician assistant, or APRN that conducts the face-to-face encounter does not have to be the same physician, physician assistant, or APRN that signs the prescription.

#### However:

- Both practitioners must be enrolled with the Connecticut Medical Assistance Program, and
- the prescriber must verify that a face-to-face encounter took place within 6 months prior to the date of the prescription and that the clinical findings support the need for the DME item ordered.



#### Face-to-Face Requirements for Certain DME Cont'd

A New DME Face-to-Face Encounter is required for the following:

 All initial orders for the purchase or rental of specified DME items and/or related supplies.

 When a member has not had a face-to-face encounter within 6 months of an initial order for the DME items affected.

• When there is a change in the DME provider.



# Face-to-Face Requirements for Certain DME and Prior Authorization (PA)

For the DME items that require PA, if the face-to-face encounter documentation does not include information supporting that the member was evaluated and/or treated for a condition that supports the item(s) of DME ordered, the PA request will be denied.



# Face-to-Face Documentation Requirements for Certain DME

The <u>ordering physician, physician assistant, or APRN</u> must maintain documentation in the HUSKY Health members' medical record and also provide documentation to the DME provider substantiating that the face-to-face requirements have been met.

The <u>DME provider</u> must also maintain the documentation in the HUSKY Health member's record or files at their own location.

This documentation must, at a minimum, include all of the following:

- •The clinical findings of the face-to-face encounter substantiating the need for the DME;
- •The primary reason that the DME is required;
- •The name (including either hard copy or digital signature) and credentials of the physician, physician assistant, or APRN who conducted the face-to-face encounter; and
- •The date of the face-to-face encounter.



#### Face-to-Face Requirements for Certain DME Cont'd

#### **Attention Pharmacies Dispensing DME Supplies:**

- Pharmacies dispensing DME supplies must also fulfill the Face-to-Face criteria and documentation requirements for supplies identified on the <u>DME List of Specified Covered</u> <u>Items</u>.
- Pharmacies are responsible for verifying the list for code updates when a new version of the list is published by CMS
- The following items from the current list are commonly supplied by pharmacies:

HCPCS Code	Description
E0607	Home blood glucose monitor
E0570	Nebulizer with compressor



### Thank you.

