# COVID-19 UPDATE

AdvocateAuroraHealth

## 4/30/20: CMS Updates Face to Face Home Health Requirement

### Situation

Effective April 30, 2020, CMS is requiring that the practitioner who certifies home health for a patient is required to perform the Face to Face encounter, unless the patient is being admitted directly to home health from an acute or post-acute facility and has had a F2F encounter with an allowed practitioner in the facility. Advocate Aurora Health at Home will continue to follow its relaxed F2F requirements for COVID-19 Surge Levels 3, 4 and 5.

### Background

If the physician or an NPP had been F2F with the patient within 90 days prior to the Home Health Start of Care (SOC) for a reason related to the need for home care, that visit meets the CMS F2F requirement. A F2F visit may also be completed up to 30 days after the Home Health SOC.

Historically, Home Health agencies have been unwilling to admit a patient without the F2F on record because patients often do not see their physician within the 30 days and the agency is then not paid for the initial or subsequent episodes of care.

### **Assessment/Recommendation**

Accept new CMS guidelines effective immediately

1. Effective April 30, the CARES Act permanently allow nurse practitioners and physician assistants to certify eligibility for the Medicare home health benefit, establish and review the plan of care and supervise the provision of items and services for home health beneficiaries. The certifying practitioner is required to make the F2F encounter, unless the patient is being admitted directly to home health from an acute or post-acute facility and has had a F2F encounter with an allowed practitioner in the facility.

For more information regarding certification and requirements for documenting the face to face encounter; please refer to: Section 40.1.2.2, Chapter 7 of the "Medicare Benefit Policy Manual" at <a href="http://www.cms.gov/Regulationsand-Guidance/Guidance/Manuals/downloads/bp102c07.pdf">http://www.cms.gov/Regulationsand-Guidance/Guidance/Manuals/downloads/bp102c07.pdf</a>.

- 2. Advocate Aurora Health at Home will continue to follow CMS guidelines for a F2F telehealth visit. An acceptable F2F Telehealth visit may be completed using telehealth, which may include computer or a phone with audio and video capability and include the use of the following nonpublic-facing platforms:
  - a. Skype
  - b. Zoom
- **3.** When individual AAH hospitals reach Surge Levels 3 thru 5, Advocate Aurora's home health agency will accept F2F documentation at time of referral and up to 30 days after Home Health SOC. **(more)**

# **5 Levels of Escalation for Home Health F2F Requirements**

Individual Hospital	We are it all December in the	Advocate Aurora Health at Home:
Surge Level	Hospital Description	Home Health Face to Face
Level	Temporary/Pop Up Acute sites	F2F required either 90 days prior or 30
5	created in non-health care	days after Home Health Start of Care for
	locations	both Illinois and Wisconsin. Follow new CMS guidelines for Telehealth F2F visit.
Level	Targeted ambulatory sites	F2F required either 90 days prior or 30
4	repurposed for non-COVID 19	days after Home Health Start of Care for
	care	both Illinois and Wisconsin. Follow new
		CMS guidelines for Telehealth F2F visit.
Level	ICUs expanded into other units	Business as usual. F2F documentation
3	such as PACU	required at time of referral in Illinois;
		within 30 days in Wisconsin. Follow new
		CMS guidelines for Telehealth F2F visit.
Level	COVID-19 units established at	Business as usual. F2F documentation
2	all acute sites	required at time of referral in Illinois;
		within 30 days in Wisconsin. Follow new
		CMS guidelines for Telehealth F2F visit.
Level	COVID-19 protocols in place	Business as usual. F2F documentation
1		required at time of referral in Illinois;
		within 30 days in Wisconsin. Follow new
		CMS guidelines for Telehealth F2F visit.