NCHA Financial Feature



November 2, 2018

CMS Finalizes Calendar Year 2019 Payments and 2020 Policy Changes for Home Health Agencies and Home Infusion Therapy Suppliers

The Centers for Medicare and Medicaid Services (CMS) has issued a final calendar year (CY) 2019 update to the home health prospective payment system (HH PPS).

The 682-page rule is currently on display at the *Federal Register*. A copy is at: https://s3.amazonaws.com/public-inspection.federalregister.gov/2018-24145.pdf. Publication is slated for November 13th.

The rule will update both the payment rates and case-mix weights for home health agencies (HHAs) for CY 2019.

For home health services beginning on or after Jan. 1, 2020, the rule finalizes a case-mix methodology refinement, which will eliminate the use of therapy thresholds for case-mix adjustment purposes; and will change the unit of payment from a 60-day episode of care to a 30-day period of care, as mandated by section 51001 of the *Bipartisan Budget Act of 2018* (BBA).

The rule also contains a new methodology used to determine rural add-on payments for CYs 2019 through 2022 as mandated by statute. Further, the rule will establish a transitional payment for home infusion therapy services for CYs 2019 and 2020, again as mandated by law.

Comment

CMS provides the following table regarding cost, transfers and benefits.

Provision Description	Costs and Cost Savings	Transfers	Benefits
CY 2019 HH PPS		The overall economic impact of the HH	To ensure home health
Payment Rate Update		PPS payment rate update is an	payments are consistent
		estimated \$420 million (2.2 percent) in	with statutory payment
		increased payments in CY 2019.	authority for CY 2019.
CY 2019 Temporary		The overall economic impact of the	To ensure temporary
Transitional Payments		temporary transitional payment for home	transitional payments for
for Home Infusion		infusion therapy services is an estimated	home infusion therapy are
Therapy Services		\$60 million in increased payments to	consistent with statutory
		home infusion therapy suppliers in CY	authority for CY 2019.
		2019 (\$48 million in Medicare payments	
		and \$12 million in beneficiary cost-	
		sharing).	

Provision Description	Costs and Cost	Transfers	Benefits
CY 2019 HHVBP Model	Savings	The overall economic impact of the HHVBP Model for CY 2018 through 2022 is an estimated \$378 million in total savings to Medicare from a reduction in unnecessary hospitalizations and SNF usage as a result of greater quality improvements in the HH industry (none of which is attributable to the changes in this final rule). As for payments to HHAs, there are no aggregate increases or decreases expected to be applied to the HHAs competing in the model.	
CY 2020 OASIS Changes	The overall economic impact of the HH QRP and the casemix adjustment methodology changes is annual savings to HHAs of an estimated \$60 million.	This is compound in the mode.	A reduction in burden to HHAs of approximately 73 hours annually for a savings of approximately \$5,150 annually per HHA.
CY 2020 Case-Mix Adjustment Methodology Changes, Including a Change in the Unit of Service from 60 to 30 days.		The overall economic impact of the case-mix adjustment methodology changes, including a change in the unit of service from 60 to 30 days, for CY 2020 results in no estimated dollar impact to HHAs, as section 51001(a) of the BBA requires such change to be implemented in a budget-neutral manner.	To ensure home health payments are consistent with statutory payment authority for CY 2020.
Accreditation for Home Infusion Therapy suppliers	The cost related to an Accrediting Organization obtaining CMS approval of a home infusion therapy accreditation program is estimated to be \$8,014.50 per each AO, for AOs that have previously submitted an accreditation application to CMS. The cost related to each home infusion therapy AO for obtaining CMS approval of a home infusion therapy accreditation program is estimated to be \$12,453 per each AO, for AOs that have not previously submitted an accreditation application to CMS.		Accreditation of HIT suppliers will be required in order for HIT suppliers to receive payment from Medicare, effective 01/01/2021. The CMSAO approval and oversight regulations are necessary so that CMS has a process in place for the approval and oversight of the AOs that will be CMS-approved home infusion therapy accrediting organizations available to accredit the home infusion therapy suppliers, so that they can continue to receive payment from Medicare when the permanent benefits go into effect on 01/01/2021.

The rule has a very limited table of contents. There are no page numbers. Page numbers cited below are based on Adobe Acrobat counting. There is no table/list of acronyms.

On a positive side, CMS has provided "final decision" sections.

1. CY 2019 HH PPS Case-Mix Weights

The final CY 2019 case-mix weights are shown in the table below. There are 153 weights comprising the home health resource groups (HHRGs).

CY 2019 Case-Mix Payment Weights

Pay Group	Description	Clinical and Functional Levels (1 = Low; 2 = Medium; 3= High)	CY 2019 Weights
10111	1st and 2nd Episodes, 0 to 5 Therapy Visits	C1F1S1	0.5468
10112	1st and 2nd Episodes, 6 Therapy Visits	C1F1S2	0.6791
10113	1st and 2nd Episodes, 7 to 9 Therapy Visits	C1F1S3	0.8115
10114	1st and 2nd Episodes, 10 Therapy Visits	C1F1S4	0.9438
10115	1st and 2nd Episodes, 11 to 13 Therapy Visits	C1F1S5	1.0761
21111	1st and 2nd Episodes, 14 to 15 Therapy Visits	C1F1S1	1.2085
21112	1st and 2nd Episodes, 16 to 17 Therapy Visits	C1F1S2	1.3526
21113	1st and 2nd Episodes, 18 to 19 Therapy Visits	C1F1S3	1.4968
10121	1st and 2nd Episodes, 0 to 5 Therapy Visits	C1F2S1	0.6473
10122	1st and 2nd Episodes, 6 Therapy Visits	C1F2S2	0.7651
10123	1st and 2nd Episodes, 7 to 9 Therapy Visits	C1F2S3	0.8829
10124	1st and 2nd Episodes, 10 Therapy Visits	C1F2S4	1.0007
10125	1st and 2nd Episodes, 11 to 13 Therapy Visits	C1F2S5	1.1185
21121	1st and 2nd Episodes, 14 to 15 Therapy Visits	C1F2S1	1.2363
21122	1st and 2nd Episodes, 16 to 17 Therapy Visits	C1F2S2	1.3858
21123	1st and 2nd Episodes, 18 to 19 Therapy Visits	C1F2S3	1.5352
10131	1st and 2nd Episodes, 0 to 5 Therapy Visits	C1F3S1	0.6885
10132	1st and 2nd Episodes, 6 Therapy Visits	C1F3S2	0.8013
10133	1st and 2nd Episodes, 7 to 9 Therapy Visits	C1F3S3	0.9140
10134	1st and 2nd Episodes, 10 Therapy Visits	C1F3S4	1.0268
10135	1st and 2nd Episodes, 11 to 13 Therapy Visits	C1F3S5	1.1396
21131	1st and 2nd Episodes, 14 to 15 Therapy Visits	C1F3S1	1.2523
21132	1st and 2nd Episodes, 16 to 17 Therapy Visits	C1F3S2	1.3992
21133	1st and 2nd Episodes, 18 to 19 Therapy Visits	C1F3S3	1.5460
10211	1st and 2nd Episodes, 0 to 5 Therapy Visits	C2F1S1	0.5769
10212	1st and 2nd Episodes, 6 Therapy Visits	C2F1S2	0.7176
10213	1st and 2nd Episodes, 7 to 9 Therapy Visits	C2F1S3	0.8584
10214	1st and 2nd Episodes, 10 Therapy Visits	C2F1S4	0.9991
10215	1st and 2nd Episodes, 11 to 13 Therapy Visits	C2F1S5	1.1398
21211	1st and 2nd Episodes, 14 to 15 Therapy Visits	C2F1S1	1.2806
21212	1st and 2nd Episodes, 16 to 17 Therapy Visits	C2F1S2	1.4321
21213	1st and 2nd Episodes, 18 to 19 Therapy Visits	C2F1S3	1.5836
10221	1st and 2nd Episodes, 0 to 5 Therapy Visits	C2F2S1	0.6773
10222	1st and 2nd Episodes, 6 Therapy Visits	C2F2S2	0.8035
10223	1st and 2nd Episodes, 7 to 9 Therapy Visits	C2F2S3	0.9298
10224	1st and 2nd Episodes, 10 Therapy Visits	C2F2S4	1.0560
10225	1st and 2nd Episodes, 11 to 13 Therapy Visits	C2F2S5	1.1822
21221	1st and 2nd Episodes, 14 to 15 Therapy Visits	C2F2S1	1.3084
21222	1st and 2nd Episodes, 16 to 17 Therapy Visits	C2F2S2	1.4653
21223	1st and 2nd Episodes, 18 to 19 Therapy Visits	C2F2S3	1.6221

Pay Group	Description	Clinical and Functional Levels (1 = Low; 2 = Medium; 3= High)	CY 2019 Weights
10231	1st and 2nd Episodes, 0 to 5 Therapy Visits	C2F3S1	0.7186
10232	1st and 2nd Episodes, 6 Therapy Visits	C2F3S2	0.8397
10233	1st and 2nd Episodes, 7 to 9 Therapy Visits	C2F3S3	0.9609
10234	1st and 2nd Episodes, 10 Therapy Visits	C2F3S4	1.0821
10235	1st and 2nd Episodes, 11 to 13 Therapy Visits	C2F3S5	1.2033
21231	1st and 2nd Episodes, 14 to 15 Therapy Visits	C2F3S1	1.3244
21232	1st and 2nd Episodes, 16 to 17 Therapy Visits	C2F3S2	1.4787
21233	1st and 2nd Episodes, 18 to 19 Therapy Visits	C2F3S3	1.6329
10311	1st and 2nd Episodes, 0 to 5 Therapy Visits	C3F1S1	0.6294
10312	1st and 2nd Episodes, 6 Therapy Visits	C3F1S2	0.7799
10313	1st and 2nd Episodes, 7 to 9 Therapy Visits	C3F1S3	0.9304
10314	1st and 2nd Episodes, 10 Therapy Visits	C3F1S4	1.0809
10315	1st and 2nd Episodes, 11 to 13 Therapy Visits	C3F1S5	1.2314
21311	1st and 2nd Episodes, 14 to 15 Therapy Visits	C3F1S1	1.3819
21312	1st and 2nd Episodes, 16 to 17 Therapy Visits	C3F1S2	1.5782
21313	1st and 2nd Episodes, 18 to 19 Therapy Visits	C3F1S3	1.7746
10321 10322	1st and 2nd Episodes, 0 to 5 Therapy Visits	C3F2S1 C3F2S2	0.7298
10322	1st and 2nd Episodes, 6 Therapy Visits 1st and 2nd Episodes, 7 to 9 Therapy Visits	C3F2S2 C3F2S3	0.8658 1.0018
10323	1st and 2nd Episodes, 7 to 9 Therapy Visits 1st and 2nd Episodes, 10 Therapy Visits	C3F2S3	1.1378
10324	1st and 2nd Episodes, 10 Therapy Visits 1st and 2nd Episodes, 11 to 13 Therapy Visits	C3F2S5	1.2737
21321	1st and 2nd Episodes, 11 to 15 Therapy Visits	C3F2S1	1.4097
21322	1st and 2nd Episodes, 14 to 13 Therapy Visits	C3F2S2	1.6114
21323	1st and 2nd Episodes, 18 to 19 Therapy Visits	C3F2S3	1.8130
10331	1st and 2nd Episodes, 0 to 5 Therapy Visits	C3F3S1	0.7711
10332	1st and 2nd Episodes, 6 Therapy Visits	C3F3S2	0.9020
10333	1st and 2nd Episodes, 7 to 9 Therapy Visits	C3F3S3	1.0329
10334	1st and 2nd Episodes, 10 Therapy Visits	C3F3S4	1.1639
10335	1st and 2nd Episodes, 11 to 13 Therapy Visits	C3F3S5	1.2948
21331	1st and 2nd Episodes, 14 to 15 Therapy Visits	C3F3S1	1.4258
21332	1st and 2nd Episodes, 16 to 17 Therapy Visits	C3F3S2	1.6248
21333	1st and 2nd Episodes, 18 to 19 Therapy Visits	C3F3S3	1.8238
30111	3rd+ Episodes, 0 to 5 Therapy Visits	C1F1S1	0.4691
30112	3rd+ Episodes, 6 Therapy Visits	C1F1S2	0.6147
30113	3rd+ Episodes, 7 to 9 Therapy Visits	C1F1S3	0.7603
30114	3rd+ Episodes, 10 Therapy Visits	C1F1S4	0.9059
30115	3rd+ Episodes, 11 to 13 Therapy Visits	C1F1S5	1.0515
22111	3rd+ Episodes, 14 to 15 Therapy Visits	C1F1S1	1.1971
22112	3rd+ Episodes, 16 to 17 Therapy Visits	C1F1S2	1.3451
22113	3rd+ Episodes, 18 to 19 Therapy Visits	C1F1S3	1.4930
40111	All Episodes, 20+ Therapy Visits	C1F1S1	1.6409
30121	3rd+ Episodes, 0 to 5 Therapy Visits	C1F2S1	0.5514
30122	3rd+ Episodes, 6 Therapy Visits	C1F2S2	0.6936
30123	3rd+ Episodes, 7 to 9 Therapy Visits	C1F2S3	0.8358
30124	3rd+ Episodes, 10 Therapy Visits	C1F2S4	0.9780
30125	3rd+ Episodes, 11 to 13 Therapy Visits	C1F2S5	1.1202
22121	3rd+ Episodes, 14 to 15 Therapy Visits	C1F2S1	1.2624
22122	3rd+ Episodes, 16 to 17 Therapy Visits	C1F2S2	1.4031
22123	3rd+ Episodes, 18 to 19 Therapy Visits	C1F2S3	1.5439
40121	All Episodes, 20+ Therapy Visits	C1F2S1	1.6847
30131 30132	3rd+ Episodes, 0 to 5 Therapy Visits 3rd+ Episodes, 6 Therapy Visits	C1F3S1 C1F3S2	0.5884
30132	3rd+ Episodes, 6 Therapy Visits 3rd+ Episodes, 7 to 9 Therapy Visits	C1F3S2 C1F3S3	0.7232 0.8580
30133	Join = Episones, 7 to 9 Therapy visits	CIFSSS	0.0000

Pay Group	Description	Clinical and Functional Levels (1 = Low; 2 = Medium; 3= High)	CY 2019 Weights	
30134	3rd+ Episodes, 10 Therapy Visits	C1F3S4	0.9928	
30135	3rd+ Episodes, 11 to 13 Therapy Visits	C1F3S5	1.1276	
22131	3rd+ Episodes, 14 to 15 Therapy Visits	C1F3S1	1.2624	
22132	3rd+ Episodes, 16 to 17 Therapy Visits	C1F3S2	1.4058	
22133	3rd+ Episodes, 18 to 19 Therapy Visits	C1F3S3	1.5493	
40131	All Episodes, 20+ Therapy Visits	C1F3S1	1.6928	
30211	3rd+ Episodes, 0 to 5 Therapy Visits	C2F1S1	0.4930	
30212	3rd+ Episodes, 6 Therapy Visits	C2F1S2	0.6480	
30213	3rd+ Episodes, 7 to 9 Therapy Visits	C2F1S3	0.8030	
30214	3rd+ Episodes, 10 Therapy Visits	C2F1S4	0.9579	
30215	3rd+ Episodes, 11 to 13 Therapy Visits	C2F1S5	1.1129	
22211	3rd+ Episodes, 14 to 15 Therapy Visits	C2F1S1	1.2679	
22212	3rd+ Episodes, 16 to 17 Therapy Visits	C2F1S2	1.4236	
22213	3rd+ Episodes, 18 to 19 Therapy Visits	C2F1S3	1.5794	
40211	All Episodes, 20+ Therapy Visits	C2F1S1	1.7352	
30221	3rd+ Episodes, 0 to 5 Therapy Visits	C2F2S1	0.5753	
30222	3rd+ Episodes, 6 Therapy Visits	C2F2S2	0.7269	
30223	3rd+ Episodes, 7 to 9 Therapy Visits	C2F2S3	0.8784	
30224	3rd+ Episodes, 10 Therapy Visits	C2F2S4	1.0300	
30225	3rd+ Episodes, 11 to 13 Therapy Visits	C2F2S5	1.1815	
22221	3rd+ Episodes, 14 to 15 Therapy Visits	C2F2S1	1.3331	
22222	3rd+ Episodes, 16 to 17 Therapy Visits	C2F2S2	1.4817	
22223	3rd+ Episodes, 18 to 19 Therapy Visits	C2F2S3	1.6303	
40221	All Episodes, 20+ Therapy Visits	C2F2S1	1.7790	
30231	3rd+ Episodes, 0 to 5 Therapy Visits	C2F3S1	0.6123	
30232 30233	3rd+ Episodes, 6 Therapy Visits 3rd+ Episodes, 7 to 9 Therapy Visits	C2F3S2 C2F3S3	0.7565	
30233	3rd+ Episodes, 7 to 9 Therapy Visits 3rd+ Episodes, 10 Therapy Visits	C2F3S4	0.9006 1.0448	
30234	3rd+ Episodes, 10 Therapy Visits 3rd+ Episodes, 11 to 13 Therapy Visits	C2F3S5	1.1889	
22231	3rd+ Episodes, 14 to 15 Therapy Visits	C2F3S1	1.3331	
22232	3rd+ Episodes, 16 to 17 Therapy Visits	C2F3S2	1.4844	
22233	3rd+ Episodes, 18 to 19 Therapy Visits	C2F3S3	1.6357	
40231	All Episodes, 20+ Therapy Visits	C2F3S1	1.7871	
30311	3rd+ Episodes, 0 to 5 Therapy Visits	C3F1S1	0.5942	
30312	3rd+ Episodes, 6 Therapy Visits	C3F1S2	0.7644	
30313	3rd+ Episodes, 7 to 9 Therapy Visits	C3F1S3	0.9347	
30314	3rd+ Episodes, 10 Therapy Visits	C3F1S4	1.1049	
30315	3rd+ Episodes, 11 to 13 Therapy Visits	C3F1S5	1.2752	
22311	3rd+ Episodes, 14 to 15 Therapy Visits	C3F1S1	1.4454	
22312	3rd+ Episodes, 16 to 17 Therapy Visits	C3F1S2	1.6206	
22313	3rd+ Episodes, 18 to 19 Therapy Visits	C3F1S3	1.7957	
40311	All Episodes, 20+ Therapy Visits	C3F1S1	1.9709	
30321	3rd+ Episodes, 0 to 5 Therapy Visits	C3F2S1	0.6765	
30322	3rd+ Episodes, 6 Therapy Visits	C3F2S2	0.8433	
30323	3rd+ Episodes, 7 to 9 Therapy Visits	C3F2S3	1.0102	
30324	3rd+ Episodes, 10 Therapy Visits	C3F2S4	1.1770	
30325	3rd+ Episodes, 11 to 13 Therapy Visits	C3F2S5	1.3438	
22321	3rd+ Episodes, 14 to 15 Therapy Visits	C3F2S1	1.5106	
22322	3rd+ Episodes, 16 to 17 Therapy Visits	C3F2S2	1.6787	
22323	3rd+ Episodes, 18 to 19 Therapy Visits	C3F2S3	1.8467	
40321	All Episodes, 20+ Therapy Visits	C3F2S1	2.0147	
30331	3rd+ Episodes, 0 to 5 Therapy Visits	C3F3S1	0.7135	
30332	3rd+ Episodes, 6 Therapy Visits	C3F3S2	0.8729	

Pay Group	Description	Clinical and Functional Levels (1 = Low; 2 = Medium; 3= High)	CY 2019 Weights
30333	3rd+ Episodes, 7 to 9 Therapy Visits	C3F3S3	1.0324
30334	3rd+ Episodes, 10 Therapy Visits	C3F3S4	1.1918
30335	3rd+ Episodes, 11 to 13 Therapy Visits	C3F3S5	1.3512
22331	3rd+ Episodes, 14 to 15 Therapy Visits	C3F3S1	1.5106
22332	3rd+ Episodes, 16 to 17 Therapy Visits	C3F3S2	1.6814
22333	3rd+ Episodes, 18 to 19 Therapy Visits	C3F3S3	1.8521
40331	All Episodes, 20+ Therapy Visits	C3F3S1	2.0228

(Note the pay groups above are not in order as has been done in prior years.)

2. CY 2019 Rate Update

a. Rebasing and Revising of the Home Health Market Basket - Labor Share

CMS is rebasing and revising the HH market basket. Effective for CY 2019. The labor-related share will be 76.1 percent and the non-labor-related share will be 23.9 percent. The current labor-related share is 78.5 percent and the non-labor-related share is 21.5 percent.

b. CY 2019 Market Basket Update for HHAs

The home health market basket for CY 2019 is 3.0 percent. CMS is reducing this percentage increase by the current estimate of the multi-factor productivity (MFP) adjustment of 0.8 percent resulting is net increase of 2.2 percent.

The home health update will be decreased by 2.0 percentage points for those HHAs that do not submit quality data. For HHAs that do not submit the required quality data for CY 2019, the home health payment update will be 0.2 percent (2.2 percent minus 2.0 percentage points).

c. CY 2019 Home Health Wage Index

The CY 2019 wage index is available on the CMS website at: https://go.cms.gov/20r9vHN.

The CY 2019 wage index budget neutrality factor is 0.9985

d. CY 2019 Annual Payment Update

The CY 2019 national, standardized 60-day episode payment rate is calculated as follows:

CY 2019 60-day National, Standardized 60-Day Episode Payment Amount

CY 2018 National, Standardized 60-Day Episode Payment	Wage Index Budget Neutrality Factor	Case-Mix Weights Budget Neutrality Factor	CY 2019 HH Payment Update	CY 2019 National, Standardized 60-Day Episode Payment
\$3,039.64	X 0.9985	X 1.0169	X 1.022	\$3,154.27

CY 2019 60-day National, Standardized 60-Day Episode Payment Amount for HHAs that DO NOT Submit the Quality Data

CY 2018 National, Standardized 60-Day Episode Payment	Wage Index Budget Neutrality Factor	Case-Mix Weights Budget Neutrality Factor	CY 2019 HH Payment Update Minus 2 Percentage Points	CY 2019 National, Standardized 60-Day Episode Payment
\$3,039.64	X 0.9985	X 1.0169	X 1.002	\$3,092.55

e. CY 2018 National Per-Visit Rates

The national per-visit rates are used to pay the Low-Utilization Payment Adjustment (LUPA) (episodes with four or fewer visits) and are also used to compute imputed costs in outlier calculations. The per-visit rates are paid by type of visit or HH discipline. The six HH disciplines are as follows:

- Home health aide (HH aide);
- Medical Social Services (MSS);
- Occupational therapy (OT);
- Physical therapy (PT);
- Skilled nursing (SN); and
- Speech-language pathology (SLP).

CY 2019 National Per-Visit Payment Amounts for HHAs That DO Submit the Required Quality Data

HH Discipline Type	CY 2018 Per- Visit Payment	Wage Index Budget Neutrality Factor	CY 2019 HH Payment Update	CY 2019 Per-Visit Payment
Home Health Aide	\$ 64.94	X 0.9996	X 1.022	\$ 66.34
Medical Social Services	\$229.86	X 0.9996	X 1.022	\$234.82
Occupational Therapy	\$157.83	X 0.9996	X 1.022	\$161.24
Physical Therapy	\$156.76	X 0.9996	X 1.022	\$160.14
Skilled Nursing	\$143.40	X 0.9996	X 1.022	\$146.50
Speech- Language Pathology	\$170.38	X 0.9996	X 1.022	\$174.06

CY 2019 National Per-Visit Payment Amounts for HHAs That DO NOT Submit the Required Quality Data

HH Discipline Type	CY 2018 Per- Visit Rates	Wage Index Budget Neutrality Factor	CY 2019 HH Payment Update Minus 2 Percentage Points	CY 2019 Per-Visit Rates
Home Health Aide	\$ 64.94	X 0.9996	X 1.002	\$ 65.04
Medical Social Services	\$229.86	X 0.9996	X 1.002	\$230.23
Occupational Therapy	\$157.83	X 0.9996	X 1.002	\$158.08
Physical Therapy	\$156.76	X 0.9996	X 1.002	\$157.01
Skilled Nursing	\$143.40	X 0.9996	X 1.002	\$143.63
Speech- Language Pathology	\$170.38	X 0.9996	X 1.002	\$170.65

f. CY 2019 Non-routine Medical Supply (NRS) Payment Rates

Payments for NRS are computed by multiplying the relative weight for a particular severity level by the NRS conversion factor.

CY 2019 NRS Conversion Factor for HHAs that DO Submit the Required Quality Data

CY 2018 NRS	CY 2019 HH Payment	CY 2019NRS Conversion
Conversion Factor	Update	Factor
\$53.03	X 1.022	\$54.20

CY 2019 NRS Payment Amounts for HHAs that DO Submit the Required Quality Data

Severity Level	Points (Scoring)	Relative Weight	CY 2019 NRS Payment Amounts
1	0	0.2698	\$ 14.62
2	1 to 14	0.9742	\$ 52.80
3	15 to 27	2.6712	\$ 144.78
4	28 to 48	3.9686	\$ 215.10
5	49 to 98	6.1198	\$ 331.69
6	99+	10.5254	\$ 570.48

For non-quality reporters see the rule's tables 22 and 23.

g. Rural Add-on Payments for CYs 2019 through 2022

The *BBA*, provides that rural counties (or equivalent areas) would be placed into one of three categories for purposes of the HH rural add-on payments: (1) rural counties and equivalent areas in the highest quartile of all counties and equivalent areas based on the number of Medicare home health episodes furnished per 100 individuals who are entitled to, or enrolled for, benefits under part A of Medicare or enrolled for benefits under part B of Medicare only, but not enrolled in a Medicare Advantage plan under part C of Medicare; (2) rural counties and equivalent areas with a population density of 6 individuals or fewer per square mile of land area; and (3) rural counties and equivalent areas not in the categories above; i.e., all others.

In the proposed rule, CMS said it would classify 510 rural counties or equivalent areas into the "High utilization" category. CMS stated that there are 334 rural counties or equivalent areas that have a

population density of six individuals or fewer per square mile of land area and that are not already classified into the "High utilization" category. CMS said that there are 1,162 remaining rural counties and equivalent areas that do not meet the criteria for inclusion in the "High utilization" or "Low population density" categories. CMS proposed to classify these 1,162 rural counties and equivalent areas into the "All other" category. Two thousand six (2006) counties are considered rural for purposes of determining HH rural add-on payments. CMS has not included any revised numbers in this final rule.

The rural add-ons will be, as proposed, as follows;

Category	CY 2019	CY 2020	CY 2021	CY 2022
High utilization	1.5%	0.5%		
Low population density	4.0%	3.0%	2.0%	1.0%
All other	3.0%	2.0%	1.0%	

CMS will require HHAs to enter the FIPS state and county code, rather than the SSA state and county code, on the claim.

The data used to categorize each county or equivalent area is available in the Downloads section associated with the publication of the proposed rule at: https://go.cms.gov/2KVwV8F. In addition, an Excel file containing the rural county or equivalent area names, their FIPS state and county codes, and their designation into one of the three rural add-on categories is available for download.

h. Payments for High-Cost Outliers under the HH PPS

The fixed dollar loss (FDL) ratio and the loss-sharing ratio is selected so that the estimated total outlier payments do not exceed a 2.5 percent aggregate level. The current FDL ratio is 0.55.

CMS will change the FDL to 0.51 with a loss-sharing ratio of 0.80.

Bottom line is CMS has paid less than 2.5 in outlier payments in 2018.

3. Implementation of the Patient-Driven Groupings Model (PDGM) for CY 2020

The **BBA 2018** requires the Secretary to apply a 30-day unit of service for purposes of implementing the HH PPS, effective Jan. 1, 2020. CMS says the change will require provider education and training, updating and revising relevant manuals, and changing claims processing systems.

The PDGM would not use the number of therapy visits in determining payment. CMS notes that "the change from the current case-mix adjustment methodology for the HH PPS, which relies heavily on therapy thresholds as a major determinant for payment and thus provides a higher payment for a higher volume of therapy provided, to the PDGM would remove the financial incentive to overprovide therapy in order to receive a higher payment."

Comment

This aspect of the rule is quite detailed in explaining the construct and measures used in developing the PDGM. Those involved in coding, etc. need to review the material in detail to fully comprehend the changes being made. Following are various "Final Decision" sections. The page numbers are based on the Adobe page counts in the display copy of the regulation.

Final Decisions

Page 118 Thirty (30) Day Payment Cycles

CMS is finalizing the change in the unit of payment from 60 days to 30 days, effective for 30-day periods of care that start on or after Jan. 1, 2020, as proposed, and in accordance with the provisions in the BBA of 2018.

Page 127 Cost-per-Minute

CMS is finalizing its proposal to adopt a Cost-per-Minute plus Non-Routine Supplies (CPM + NRS) approach in estimating resource use, which uses information from HHA Medicare cost reports.

Page 161 Behavioral Assumptions

CMS is finalizing three behavioral assumptions – Clinical Group Coding; Comorbidity Coding; and LUPA threshold -- in calculating a 30-day budget-neutral payment amount. CMS will update the CY 2020 30-day budget-neutral payment amount in the CY 2020 proposed rule using the most recent data available.

Page 167 **Split Billing Percentage**

CMS is finalizing its split-percentage proposal. This means that newly-enrolled HHAs, that is HHAs certified for participation in Medicare effective on or after Jan. 1, 2019, would not receive Request for Anticipated Payment (RAP) payments beginning in CY 2020. HHAs that are certified for participation in Medicare effective on or after Jan. 1, 2019, would still be required to submit a "no pay" RAP at the beginning of care in order to establish the home health period of care, as well as every 30-days thereafter.

Existing HHAs, meaning those HHAs that are certified for participation in Medicare effective prior to Jan. 1, 2019, will continue to receive RAP payments upon implementation of the PDGM in CY 2020. For split-percentage payments to be made, existing HHAs would have to submit a RAP at the beginning of each 30-day period of care and a final claim would be submitted at the end of each 30-day period of care. For the first 30-day period of care, the split percentage payment would be 60/40 and all subsequent 30-day periods of care would be a split percentage payment of 50/50.

Page 177 Early or Late Classifications

CMS will classify 30-day periods of care under the PDGM as "early" or "late" depending on when they occur within a sequence of 30-day periods. The first 30-day period would be classified as early and all subsequent 30-day periods in the sequence (second or later) would be classified as late and 30-day periods of care cannot be considered early unless there is a gap of more than 60 days between the end of one period and the start of another.

Page 196 Institutional or Community Admissions

CMS will establish two admission source categories for grouping 30-day periods of care under the PDGM— institutional and community—as determined by the healthcare setting utilized in the 14 days prior to home health admission. Thirty-day periods for beneficiaries with any inpatient acute care hospitalizations, inpatient psychiatric facility (IPF) stays, skilled nursing facility (SNF) stays, inpatient rehabilitation facility (IRF) stays, or long term care hospital (LTCH) stays within the 14 days prior to a home health admission will be designated as institutional admissions.

All other 30-day periods will be designated as community admissions. For the purposes of a RAP, CMS would only adjust the final home health claim submitted for source of admission. For example, if a RAP

for a community admission was submitted and paid, and then an acute or PAC Medicare claim was submitted for that patient before the final home health claim was submitted, CMS would not adjust the RAP and would only adjust the final home health claim so that it reflected an institutional admission. Additionally, HHAs would only indicate admission source occurrence codes on the final claim and not on any RAPs submitted.

Page 215 Clinical Care Groups

CMS is finalizing, with modification, its approach to grouping 30-day periods of care into clinical groups that represent the primary reason for home health care. CMS is finalizing twelve clinical groups, as shown below, which capture the most common primary reasons for home health care. The additional groups are a result of dividing the MMTA clinical group into 7 sub-groups. CMS notes that although it is categorizing patients into twelve groups according to the principal diagnosis, these groups do not reflect all the care being provided to the home health patient during a 30-day period of care. Home health care remains a multidisciplinary benefit.

Final Clinical Groups Used in the PDGM

Clinical Groups	The Primary Reason for the Home Health Encounter is to Provide:
Musculoskeletal Rehabilitation	Therapy (physical, occupational or speech) for a musculoskeletal condition
Neuro/Stroke Rehabilitation	Therapy (physical, occupational or speech) for a neurological condition or stroke
Wounds – Post-Op Wound Aftercare and Skin/Non-Surgical Wound Care	Assessment, treatment & evaluation of a surgical wound(s); assessment, treatment & evaluation of non-surgical wounds, ulcers, burns, and other lesions
Behavioral Health Care	Assessment, treatment & evaluation of psychiatric conditions
Complex Nursing Interventions	Assessment, treatment & evaluation of complex medical & surgical conditions including IV, TPN, enteral nutrition, ventilator, and ostomies
Medication Management, Teaching and Assessment (MMTA)	
MMTA –Surgical Aftercare	Assessment, evaluation, teaching, and medication management for surgical aftercare
MMTA – Cardiac/Circulatory	Assessment, evaluation, teaching, and medication management for cardiac or other circulatory related conditions
MMTA – Endocrine	Assessment, evaluation, teaching, and medication management for endocrine related conditions
MMTA – GI/GU	Assessment, evaluation, teaching, and medication management for gastrointestinal or genitourinary related conditions
MMTA – Infectious Disease/Neoplasms/Blood-forming Diseases	Assessment, evaluation, teaching, and medication management for conditions related to infectious diseases, neoplasms, and blood-forming diseases
MMTA –Respiratory	Assessment, evaluation, teaching, and medication management for respiratory related conditions
MMTA – Other	Assessment, evaluation, teaching, and medication management for a variety of medical and surgical conditions not classified in one of the previously listed groups

Page 244 Functional Impairment Levels and Corresponding OASIS Items

CMS says that after review of public comments, it is finalizing the use of OASIS items: M1800, M1810, M1820, M1830, M1840, M1850, M1860 and M1033 for the functional impairment level case-mix adjustment under the PDGM.

Page 258 Comorbidity Adjustment

CMS is finalizing the comorbidity adjustment as part of the overall case mix in the PDGM. To summarize, this includes the home health specific list of comorbidity subgroups and comorbidity subgroup interactions. One of the three mutually exclusive categories of comorbidity adjustment will be applied to

each period: No Comorbidity Adjustment, Low Comorbidity Adjustment, and High Comorbidity adjustment.

Page 263 Change in the Low-Utilization Payment Adjustment (LUPA) Threshold

CMS is finalizing its proposal to vary the LUPA threshold for each 30-day period of care depending on the PDGM payment group to which it is assigned.

The LUPA thresholds for the PDGM payment groups with the corresponding HIPPS codes based on CY 2017 home health data are listed in the rule's Table 32 (beginning on page 264 of the rule's display copy).

Page 288 HH PPS Case-Mix Weights under the PDGM

CMS is finalizing the PDGM, with the modifications, effective for 30-day periods of care that start on or after Jan. 1, 2020.

This new methodology results in 432 unique case-mix groups. These 432 unique case-mix payment groups are called Home Health Resource Groups (HHRGs).

Case-Mix Weights for Each HHRG Payment Group

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	CY 2019 Weight
1AA11	MMTA - Other - Low	Early - Community	0	0.9939
1AA21	MMTA - Other - Low	Early - Community	1	1.0536
1AA31	MMTA - Other - Low	Early - Community	2	1.1786
1AB11	MMTA - Other - Medium	Early - Community	0	1.1339
1AB21	MMTA - Other - Medium	Early - Community	1	1.1936
1AB31	MMTA - Other - Medium	Early - Community	2	1.3186
1AC11	MMTA - Other - High	Early - Community	0	1.2595
1AC21	MMTA - Other - High	Early - Community	1	1.3191
1AC31	MMTA - Other - High	Early - Community	2	1.4442
1BA11	Neuro - Low	Early - Community	0	1.1862
1BA21	Neuro - Low	Early - Community	1	1.2458
1BA31	Neuro - Low	Early - Community	2	1.3708
1BB11	Neuro - Medium	Early - Community	0	1.3571
1BB21	Neuro - Medium	Early - Community	1	1.4167
1BB31	Neuro - Medium	Early - Community	2	1.5418
1BC11	Neuro - High	Early - Community	0	1.4562
1BC21	Neuro - High	Early - Community	1	1.5158
1BC31	Neuro - High	Early - Community	2	1.6408
1CA11	Wound - Low	Early - Community	0	1.2199
1CA21	Wound - Low	Early - Community	1	1.2795
1CA31	Wound - Low	Early - Community	2	1.4046
1CB11	Wound - Medium	Early - Community	0	1.3724
1CB21	Wound - Medium	Early - Community	1	1.4321
1CB31	Wound - Medium	Early - Community	2	1.5571
1CC11	Wound - High	Early - Community	0	1.4919
1CC21	Wound - High	Early - Community	1	1.5516
1CC31	Wound - High	Early - Community	2	1.6766
1DA11	Complex - Low	Early - Community	0	0.9520
1DA21	Complex - Low	Early - Community	1	1.0117
1DA31	Complex - Low	Early - Community	2	1.1367
1DB11	Complex - Medium	Early - Community	0	1.1588
1DB21	Complex - Medium	Early - Community	1	1.2185

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	CY 2019 Weight
1DB31	Complex - Medium	Early - Community	2	1.3435
1DC11	Complex - High	Early - Community	0	1.1966
1DC21	Complex - High	Early - Community	1	1.2563
1DC31	Complex - High	Early - Community	2	1.3813
1EA11	MS Rehab - Low	Early - Community	0	1.0751
1EA21	MS Rehab - Low	Early - Community	1	1.1348
1EA31	MS Rehab - Low	Early - Community	2	1.2598
1EB11	MS Rehab - Medium	Early - Community	0	1.2025
1EB21	MS Rehab - Medium	Early - Community	1	1.2622
1EB31	MS Rehab - Medium	Early - Community	2	1.3872
1EC11	MS Rehab - High	Early - Community	0	1.3456
1EC21	MS Rehab - High	Early - Community	1	1.4053
1EC31	MS Rehab - High	Early - Community	2	1.5303
1FA11	Behavioral Health - Low	Early - Community	0	0.9056 0.9652
1FA21 1FA31	Behavioral Health - Low Behavioral Health - Low	Early - Community	1 2	
1FB11	Behavioral Health - Medium	Early - Community Early - Community	0	1.0902 1.0832
1FB21	Behavioral Health - Medium	Early - Community	1	1.1428
1FB31	Behavioral Health - Medium	Early - Community	2	1.2678
1FC11	Behavioral Health - High	Early - Community	0	1.1715
1FC21	Behavioral Health - High	Early - Community	1	1.2311
1FC31	Behavioral Health - High	Early - Community	2	1.3562
1GA11	MMTA - Surgical Aftercare - Low	Early - Community	0	0.8826
1GA21	MMTA - Surgical Aftercare - Low	Early - Community	1	0.9422
1GA31	MMTA - Surgical Aftercare - Low	Early - Community	2	1.0672
1GB11	MMTA - Surgical Aftercare - Medium	Early - Community	0	1.0470
1GB21	MMTA - Surgical Aftercare - Medium	Early - Community	1	1.1066
1GB31	MMTA - Surgical Aftercare - Medium	Early - Community	2	1.2316
1GC11	MMTA - Surgical Aftercare - High	Early - Community	0	1.2029
1GC21	MMTA - Surgical Aftercare - High	Early - Community	1	1.2625
1GC31	MMTA - Surgical Aftercare - High	Early - Community	2	1.3875
1HA11	MMTA - Cardiac - Low	Early - Community	0	0.9722
1HA21	MMTA - Cardiac - Low	Early - Community	1	1.0319
1HA31	MMTA - Cardiac - Low	Early - Community	2	1.1569
1HB11	MMTA - Cardiac - Medium	Early - Community	0	1.1256
1HB21	MMTA - Cardiac - Medium	Early - Community	1	1.1853
1HB31	MMTA - Cardiac - Medium	Early - Community	2	1.3103
1HC11	MMTA - Cardiac - High	Early - Community	0	1.2403
1HC21	MMTA - Cardiac - High	Early - Community	1	1.2999
1HC31	MMTA - Cardiac - High	Early - Community	2	1.4249
1IA11	MMTA - Endocrine - Low	Early - Community	0	1.0913
1IA21	MMTA - Endocrine - Low	Early - Community	1	1.1509
1IA31	MMTA - Endocrine - Low	Early - Community	2	1.2759
1IB11	MMTA - Endocrine - Low MMTA - Endocrine - Medium	Early - Community	0	1.2561
1IB21	MMTA - Endocrine - Medium	Early - Community	1	1.3158
1IB31	MMTA - Endocrine - Medium	Early - Community	2	1.4408
1IC11	MMTA - Endocrine - Niedidini MMTA - Endocrine - High	Early - Community		1.3783
1IC11		,	0	
	MMTA - Endocrine - High	Early - Community	1	1.4379
1IC31	MMTA - Endocrine - High	Early - Community	2	1.5630
1JA11	MMTA - GI/GU - Low	Early - Community	0	0.9318
1JA21	MMTA - GI/GU - Low	Early - Community	1	0.9914
1JA31	MMTA - GI/GU - Low	Early - Community	2	1.1165
1JB11	MMTA - GI/GU - Medium	Early - Community	0	1.0954

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity,	CY 2019 Weight
4 1004	MATA OUGH M II	5 1 0 "	2 = interaction)	4.4550
1JB21	MMTA - GI/GU - Medium MMTA - GI/GU - Medium	Early - Community	1 2	1.1550
1JB31 1JC11	MMTA - GI/GU - Medium	Early - Community	0	1.2800 1.1891
1JC21	MMTA - GI/GU - High	Early - Community Early - Community	1	1.2487
1JC21 1JC31	MMTA - GI/GU - High	Early - Community	2	1.3738
1KA11	MMTA - Infectious - Low	Early - Community	0	0.9642
1KA21	MMTA - Infectious - Low	Early - Community	1	1.0239
1KA31	MMTA - Infectious - Low	Early - Community	2	1.1489
1KB11	MMTA - Infectious - Medium	Early - Community	0	1.0994
1KB21	MMTA - Infectious – Medium	Early - Community	1	1.1590
1KB31	MMTA - Infectious - Medium	Early - Community	2	1.2841
1KC11	MMTA - Infectious - High	Early - Community	0	1.2107
1KC21	MMTA - Infectious - High	Early - Community	1	1.2703
1KC31	MMTA - Infectious - High	Early - Community	2	1.3954
1LA11	MMTA - Respiratory - Low	Early - Community	0	0.9491
1LA21	MMTA - Respiratory - Low	Early - Community	1	1.0087
1LA31	MMTA - Respiratory - Low	Early - Community	2	1.1338
1LB11	MMTA - Respiratory - Medium	Early - Community	0	1.0930
1LB21	MMTA - Respiratory - Medium	Early - Community	1	1.1526
1LB31	MMTA - Respiratory - Medium	Early - Community	2	1.2777
1LC11	MMTA - Respiratory - High	Early - Community	0	1.2021
1LC21	MMTA - Respiratory - High	Early - Community	1	1.2617
1LC31	MMTA - Respiratory - High	Early - Community	2	1.3867
2AA11	MMTA - Other - Low	Early - Institutional	0	1.1759
2AA21	MMTA - Other - Low	Early - Institutional	1	1.2355
2AA31	MMTA - Other - Low	Early - Institutional	2	1.3606
2AB11	MMTA - Other - Medium	Early - Institutional	0	1.3159
2AB21	MMTA - Other - Medium	Early - Institutional	1	1.3755
2AB31	MMTA - Other - Medium	Early - Institutional	2	1.5006
2AC11	MMTA - Other - High	Early - Institutional	0	1.4415
2AC21	MMTA - Other - High	Early - Institutional	1	1.5011
2AC31	MMTA - Other - High	Early - Institutional	2	1.6261
2BA11	Neuro - Low	Early - Institutional	0	1.3681
2BA21	Neuro - Low	Early - Institutional	1	1.4278
2BA31	Neuro - Low	Early - Institutional	2	1.5528
2BB11 2BB21	Neuro - Medium Neuro - Medium	Early - Institutional Early - Institutional	0 1	1.5391 1.5987
2BB21 2BB31	Neuro - Medium	Early - Institutional	2	1.7237
2BC11	Neuro - High	Early - Institutional	0	1.6381
2BC11	Neuro - High	Early - Institutional	1	1.6978
2BC21	Neuro - High	Early - Institutional	2	1.8228
2CA11	Wound - Low	Early - Institutional	0	1.4019
2CA21	Wound - Low	Early - Institutional	1	1.4615
2CA31	Wound - Low	Early - Institutional	2	1.5865
2CB11	Wound - Medium	Early - Institutional	0	1.5544
2CB21	Wound - Medium	Early - Institutional	1	1.6140
2CB31	Wound - Medium	Early - Institutional	2	1.7391
2CC11	Wound - High	Early - Institutional	0	1.6739
2CC21	Wound - High	Early - Institutional	1	1.7335
2CC31	Wound - High	Early - Institutional	2	1.8586
2DA11	Complex - Low	Early - Institutional	0	1.1340
2DA21	Complex - Low	Early - Institutional	1	1.1936
2DA31	Complex - Low	Early - Institutional	2	1.3187
2DB11	Complex - Medium	Early - Institutional	0	1.3408

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	CY 2019 Weight
2DB21	Complex - Medium	Early - Institutional	1	1.4004
2DB31	Complex - Medium	Early - Institutional	2	1.5255
2DC11	Complex - High	Early - Institutional	0	1.3786
2DC21	Complex - High	Early - Institutional	1	1.4382
2DC31	Complex - High	Early - Institutional	2	1.5633
2EA11	MS Rehab - Low	Early - Institutional	0	1.2571
2EA21	MS Rehab - Low	Early - Institutional	1	1.3167
2EA31	MS Rehab - Low	Early - Institutional	2	1.4418
2EB11	MS Rehab - Medium	Early - Institutional	0	1.3845
2EB21	MS Rehab - Medium	Early - Institutional	1	1.4441
2EB31	MS Rehab - Medium	Early - Institutional	2	1.5692
2EC11	MS Rehab - High	Early - Institutional	0	1.5276
2EC21	MS Rehab - High	Early - Institutional	1	1.5872
2EC31	MS Rehab - High	Early - Institutional	2	1.7123
2FA11	Behavioral Health - Low	Early - Institutional	0	1.0875
2FA21	Behavioral Health - Low	Early - Institutional	1	1.1472
2FA31	Behavioral Health - Low	Early - Institutional	2	1.2722
2FB11	Behavioral Health - Medium	Early - Institutional	0	1.2651
2FB21	Behavioral Health - Medium	Early - Institutional	1	1.3247
2FB31	Behavioral Health - Medium	Early - Institutional	2	1.4498
2FC11	Behavioral Health - High	Early - Institutional	0	1.3535
2FC21	Behavioral Health - High	Early - Institutional	1	1.4131
2FC31	Behavioral Health - High	Early - Institutional	2	1.5381
2GA11	MMTA - Surgical Aftercare - Low	Early - Institutional	0	1.0645
2GA21	MMTA - Surgical Aftercare - Low	Early - Institutional	1	1.1241
2GA31	MMTA - Surgical Aftercare - Low	Early - Institutional	2	1.2492
2GB11	MMTA - Surgical Aftercare -	Early - Institutional	0	1.2289
2GB21	Medium MMTA - Surgical Aftercare - Medium	Early - Institutional	1	1.2886
2GB31	MMTA - Surgical Aftercare - Medium	Early - Institutional	2	1.4136
2GC11	MMTA - Surgical Aftercare - High	Early - Institutional	0	1.3848
2GC21	MMTA - Surgical Aftercare - High	Early - Institutional	1	1.4444
2GC31	MMTA - Surgical Aftercare - High	Early - Institutional	2	1.5695
2HA11	MMTA - Cardiac - Low	Early - Institutional	0	1.1542
2HA21	MMTA - Cardiac - Low	Early - Institutional	1	1.2138
2HA31	MMTA - Cardiac - Low	Early - Institutional	2	1.3389
2HB11	MMTA - Cardiac - Medium	Early - Institutional	0	1.3076
2HB21	MMTA - Cardiac - Medium	Early - Institutional	1	1.3672
2HB31	MMTA - Cardiac - Medium	Early - Institutional	2	1.4923
2HC11	MMTA - Cardiac - High	Early - Institutional	0	1.4222
2HC21	MMTA - Cardiac - High	Early - Institutional	1	1.4818
2HC31	MMTA - Cardiac - High	Early - Institutional	2	1.6069
2IA11	MMTA - Endocrine - Low	Early - Institutional	0	1.2732
2IA21	MMTA - Endocrine - Low	Early - Institutional	1	1.3329
2IA31	MMTA - Endocrine - Low	Early - Institutional	2	1.4579
2IB11	MMTA - Endocrine - Medium	Early - Institutional	0	1.4381
2IB21	MMTA - Endocrine - Medium	Early - Institutional	1	1.4977
2IB31	MMTA - Endocrine - Medium	Early - Institutional	2	1.6228
2IC11	MMTA - Endocrine - High	Early - Institutional	0	1.5603
2IC21	MMTA - Endocrine - High	Early - Institutional	1	1.6199
2IC31	MMTA - Endocrine - High	Early - Institutional	2	1.7449
2JA11	MMTA - GI/GU - Low	Early - Institutional	0	1.1138

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	CY 2019 Weight
2JA21	MMTA - GI/GU - Low	Early - Institutional	1	1.1734
2JA31	MMTA - GI/GU - Low	Early - Institutional	2	1.2985
2JB11	MMTA - GI/GU - Medium	Early - Institutional	0	1.2773
2JB21	MMTA - GI/GU - Medium	Early - Institutional	1	1.3370
2JB31	MMTA - GI/GU - Medium	Early - Institutional	2	1.4620
2JC11	MMTA - GI/GU - High	Early - Institutional	0	1.3711
2JC21	MMTA - GI/GU - High	Early - Institutional	1	1.4307
2JC31	MMTA - GI/GU - High	Early - Institutional	2	1.5558
2KA11	MMTA - Infectious - Low	Early - Institutional	0	1.1462
2KA21	MMTA - Infectious - Low	Early - Institutional	1	1.2058
2KA31	MMTA - Infectious - Low	Early - Institutional	2	1.3309
2KB11	MMTA - Infectious - Medium	Early - Institutional	0	1.2814
2KB21	MMTA - Infectious - Medium	Early - Institutional	1	1.3410
2KB31	MMTA - Infectious - Medium	Early - Institutional	2	1.4660
2KC11	MMTA - Infectious - High	Early - Institutional	0	1.3927
2KC21	MMTA - Infectious - High	Early - Institutional	1	1.4523
2KC31	MMTA - Infectious - High	Early - Institutional	2	1.5773
2LA11	MMTA - Respiratory - Low	Early - Institutional	0	1.1311
2LA21	MMTA - Respiratory - Low	Early - Institutional	1	1.1907
2LA31	MMTA - Respiratory - Low	Early - Institutional	2	1.3157
2LB11	MMTA - Respiratory - Medium	Early - Institutional	0	1.2750
2LB21	MMTA - Respiratory - Medium	Early - Institutional	1	1.3346
2LB31	MMTA - Respiratory - Medium	Early - Institutional	2	1.4596
2LC11	MMTA - Respiratory - High	Early - Institutional	0	1.3840
2LC21	MMTA - Respiratory - High	Early - Institutional	1	1.4436
2LC31	MMTA - Respiratory - High	Early - Institutional	2	1.5687
3AA11	MMTA - Other - Low	Late - Community	0	0.5898
3AA21	MMTA - Other - Low	Late - Community	1	0.6495
3AA31	MMTA - Other - Low	Late - Community	2	0.7745
3AB11	MMTA - Other - Medium	Late - Community	0	0.7298
3AB21 3AB31	MMTA - Other - Medium	Late - Community	1	0.7894
	MMTA Other High	Late - Community	2	0.9145
3AC11	MMTA Other High	Late - Community	0	0.8554
3AC21 3AC31	MMTA - Other - High MMTA - Other - High	Late - Community Late - Community	1 2	0.9150 1.0401
3BA11	~	Late - Community	0	0.7821
3BA11	Neuro - Low Neuro - Low	Late - Community	1	0.7621
3BA21	Neuro - Low	Late - Community	2	0.9667
3BB11	Neuro - Medium	Late - Community	0	0.9530
3BB11	Neuro - Medium	Late - Community	1	1.0126
3BB31	Neuro - Medium	Late - Community	2	1.1377
3BC11	Neuro - High	Late - Community	0	1.0520
3BC21	Neuro - High	Late - Community	1	1.1117
3BC31	Neuro - High	Late - Community	2	1.2367
3CA11	Wound - Low	Late - Community	0	0.8158
3CA21	Wound - Low	Late - Community	1	0.8754
3CA31	Wound - Low	Late - Community	2	1.0005
3CB11	Wound - Medium	Late - Community	0	0.9683
3CB21	Wound - Medium	Late - Community	1	1.0279
3CB31	Wound - Medium	Late - Community	2	1.1530
3CC11	Wound - High	Late - Community	0	1.0878
3CC21	Wound - High	Late - Community	1	1.1475
3CC31	Wound - High	Late - Community	2	1.2725
3DA11	Complex - Low	Late - Community	0	0.5479
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HIPPS	Clinical Group and	Timing and Admission	Comorbidity Adjustment	
	Functional Level	Source	(0 = none, 1 = single comorbidity,	Weight
20/24	Complex Low	Lata Cammunity	2 = interaction)	0.6076
3DA21 3DA31	Complex - Low	Late - Community	1 2	0.6076 0.7326
	Complex - Low	Late - Community		
3DB11	Complex - Medium	Late - Community	0	0.7547
3DB21	Complex - Medium	Late - Community	1	0.8143
3DB31	Complex - Medium	Late - Community	2	0.9394
3DC11	Complex - High	Late - Community	0	0.7925
3DC21	Complex - High	Late - Community	1	0.8522
3DC31	Complex - High	Late - Community	2	0.9772
3EA11	MS Rehab - Low	Late - Community	0	0.6710
3EA21	MS Rehab - Low	Late - Community	1	0.7307
3EA31	MS Rehab - Low	Late - Community	2	0.8557
3EB11	MS Rehab - Medium	Late - Community	0	0.7984
3EB21	MS Rehab - Medium	Late - Community	1	0.8581
3EB31	MS Rehab - Medium	Late - Community	2	0.9831
3EC11	MS Rehab - High	Late - Community	0	0.9415
3EC21	MS Rehab - High	Late - Community	1	1.0012
3EC31	MS Rehab - High	Late - Community	2	1.1262
3FA11	Behavioral Health - Low	Late - Community	0	0.5015
3FA21	Behavioral Health - Low	Late - Community	1	0.5611
3FA31	Behavioral Health - Low	Late - Community	2	0.6861
3FB11	Behavioral Health - Medium	Late - Community	0	0.6790
3FB21	Behavioral Health - Medium	Late - Community	1	0.7387
3FB31	Behavioral Health - Medium	Late - Community	2	0.8637
3FC11	Behavioral Health - High	Late - Community	0	0.7674
3FC21	Behavioral Health - High	Late - Community	1	0.8270
3FC31	Behavioral Health - High	Late - Community	2	0.9521
3GA11	MMTA - Surgical Aftercare - Low	Late - Community	0	0.4784
3GA21	MMTA - Surgical Aftercare - Low	Late - Community	1	0.5381
3GA31	MMTA - Surgical Aftercare - Low	Late - Community	2	0.6631
3GB11	MMTA - Surgical Aftercare -	Late - Community	0	0.6429
3GB21	Medium MMTA - Surgical Aftercare -	Late - Community	1	0.7025
3GDZ1	Medium	Late - Community	I	0.7025
3GB31	MMTA - Surgical Aftercare -	Late - Community	2	0.8275
	Medium	•		
3GC11	MMTA - Surgical Aftercare - High	Late - Community	0	0.7987
3GC21	MMTA - Surgical Aftercare - High	Late - Community	1	0.8584
3GC31	MMTA - Surgical Aftercare - High	Late - Community	2	0.9834
3HA11	MMTA - Cardiac - Low	Late - Community	0	0.5681
3HA21	MMTA - Cardiac - Low	Late - Community	1	0.6277
3HA31	MMTA - Cardiac - Low	Late - Community	2	0.7528
3HB11	MMTA - Cardiac - Medium	Late - Community	0	0.7215
3HB21	MMTA - Cardiac - Medium	Late - Community	1	0.7812
3HB31	MMTA - Cardiac - Medium	Late - Community	2	0.9062
3HC11	MMTA - Cardiac - High	Late - Community	0	0.8361
3HC21	MMTA - Cardiac - High	Late - Community	1	0.8958
3HC31	MMTA - Cardiac - High	Late - Community	2	1.0208
3IA11	MMTA - Endocrine - Low	Late - Community	0	0.6871
3IA21	MMTA - Endocrine - Low	Late - Community	1	0.7468
3IA31	MMTA - Endocrine - Low	Late - Community	2	0.8718
3IB11	MMTA - Endocrine - Medium	Late - Community	0	0.8520
3IB21	MMTA - Endocrine - Medium	Late - Community	1	0.9116
3IB31	MMTA - Endocrine - Medium	Late - Community	2	1.0367
3IC11	MMTA - Endocrine - High	Late - Community	0	0.9742
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HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	CY 2019 Weight
3IC21	MMTA - Endocrine - High	Late - Community	1	1.0338
3IC31	MMTA - Endocrine - High	Late - Community	2	1.1588
3JA11	MMTA - GI/GU - Low	Late - Community	0	0.5277
3JA21	MMTA - GI/GU - Low	Late - Community	1	0.5873
3JA31	MMTA - GI/GU - Low	Late - Community	2	0.7124
3JB11	MMTA - GI/GU - Medium	Late - Community	0	0.6913
3JB21	MMTA - GI/GU - Medium	Late - Community	1	0.7509
3JB31	MMTA - GI/GU - Medium	Late - Community	2	0.8759
3JC11	MMTA - GI/GU - High	Late - Community	0	0.7850
3JC21	MMTA - GI/GU - High	Late - Community	1	0.8446
3JC31	MMTA - GI/GU - High	Late - Community	2	0.9697
3KA11	MMTA - Infectious - Low	Late - Community	0	0.5601
3KA21	MMTA - Infectious - Low	Late - Community	1	0.6198
3KA31	MMTA - Infectious - Low	Late - Community	2	0.7448
3KB11	MMTA - Infectious - Medium	Late - Community	0	0.6953
3KB21	MMTA - Infectious - Medium	Late - Community	1	0.7549
3KB31	MMTA - Infectious - Medium	Late - Community	2	0.8799
3KC11	MMTA - Infectious - High	Late - Community	0	0.8066
3KC21	MMTA - Infectious - High	Late - Community	1	0.8662
3KC31	MMTA - Infectious - High	Late - Community	2	0.9913
3LA11	MMTA - Respiratory - Low	Late - Community	0	0.5450
3LA21	MMTA - Respiratory - Low	Late - Community	1	0.6046
3LA31	MMTA - Respiratory - Low	Late - Community	2	0.7297
3LB11	MMTA - Respiratory - Medium	Late - Community	0	0.6889
3LB21	MMTA - Respiratory - Medium	Late - Community	1	0.7485
3LB31	MMTA - Respiratory - Medium	Late - Community	2	0.8735
3LC11	MMTA - Respiratory - High	Late - Community	0	0.7979
3LC21	MMTA - Respiratory - High	Late - Community	1	0.8576
3LC31	MMTA - Respiratory - High	Late - Community	2	0.9826
4AA11	MMTA - Other - Low	Late - Institutional	0	1.0367
4AA21	MMTA - Other - Low	Late - Institutional	1	1.0964
4AA31	MMTA - Other - Low	Late - Institutional	2	1.2214
4AB11	MMTA - Other - Medium	Late - Institutional	0	1.1767
4AB21	MMTA - Other - Medium	Late - Institutional	1	1.2364
4AB31	MMTA - Other - Medium	Late - Institutional	2	1.3614
4AC11	MMTA - Other - High	Late - Institutional	0	1.3023
4AC21	MMTA - Other - High	Late - Institutional	1	1.3619
4AC31	MMTA - Other - High	Late - Institutional	2	1.4870
4BA11	Neuro - Low	Late - Institutional	0	1.2290
4BA21	Neuro - Low	Late - Institutional	1	1.2886
4BA31	Neuro - Low	Late - Institutional	2	1.4136
4BB11	Neuro - Medium	Late - Institutional	0	1.3999
4BB21	Neuro - Medium	Late - Institutional	1	1.4595
4BB31	Neuro - Medium	Late - Institutional	2	1.5846
4BC11	Neuro High	Late - Institutional	0	1.4990
4BC21	Neuro High	Late - Institutional	1	1.5586
4BC31	Neuro - High	Late - Institutional	2 0	1.6836
4CA11	Wound Low	Late - Institutional		1.2627
4CA21	Wound Low	Late - Institutional	1	1.3223
4CA31	Wound - Low	Late - Institutional	2	1.4474
4CB11	Wound Medium	Late - Institutional	0	1.4152
4CB21	Wound Medium	Late - Institutional	1	1.4749
4CB31	Wound High	Late - Institutional	2	1.5999
4CC11	Wound - High	Late - Institutional	0	1.5347

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	Weight
4CC21	Wound - High	Late - Institutional	1	1.5944
4CC31	Wound - High	Late - Institutional	2	1.7194
4DA11	Complex - Low	Late - Institutional	0	0.9948
4DA21	Complex - Low	Late - Institutional	1	1.0545
4DA31	Complex - Low	Late - Institutional	2	1.1795
4DB11	Complex - Medium	Late - Institutional	0	1.2016
4DB21	Complex - Medium	Late - Institutional	1	1.2613
4DB31	Complex - Medium	Late - Institutional	2	1.3863
4DC11	Complex - High	Late - Institutional	0	1.2395
4DC21	Complex - High	Late - Institutional	1	1.2991
4DC31	Complex - High	Late - Institutional	2	1.4241
4EA11	MS Rehab - Low	Late - Institutional	0	1.1179
4EA21	MS Rehab - Low	Late - Institutional	1	1.1776
4EA31	MS Rehab - Low	Late - Institutional	2	1.3026
4EB11	MS Rehab - Medium	Late - Institutional	0	1.2453
4EB21	MS Rehab - Medium	Late - Institutional	1	1.3050
4EB31	MS Rehab - Medium	Late - Institutional	2	1.4300
4EC11	MS Rehab - High	Late - Institutional	0	1.3884
4EC21	MS Rehab - High	Late - Institutional	1	1.4481
4EC31	MS Rehab - High	Late - Institutional	2	1.5731
4FA11	Behavioral Health - Low	Late - Institutional	0	0.9484
4FA21	Behavioral Health - Low	Late - Institutional	1	1.0080
4FA31	Behavioral Health - Low	Late - Institutional	2	1.1330
4FB11	Behavioral Health - Medium	Late - Institutional	0	1.1260
4FB21	Behavioral Health - Medium	Late - Institutional	1	1.1856
4FB31	Behavioral Health - Medium	Late - Institutional	2	1.3106
4FC11	Behavioral Health - High	Late - Institutional	0	1.2143
4FC21	Behavioral Health - High	Late - Institutional	1	1.2739
4FC31	Behavioral Health - High	Late - Institutional	2	1.3990
4GA11	MMTA - Surgical Aftercare - Low	Late - Institutional	0	0.9254
4GA21	MMTA - Surgical Aftercare - Low	Late - Institutional	1	0.9850
4GA31	MMTA - Surgical Aftercare - Low	Late - Institutional	2	1.1100
4GB11	MMTA - Surgical Aftercare - Medium	Late - Institutional	0	1.0898
4GB21	MMTA - Surgical Aftercare - Medium	Late - Institutional	1	1.1494
4GB31	MMTA - Surgical Aftercare - Medium	Late - Institutional	2	1.2744
4GC11	MMTA - Surgical Aftercare - High	Late - Institutional	0	1.2457
4GC21	MMTA - Surgical Aftercare - High	Late - Institutional	1	1.3053
4GC31	MMTA - Surgical Aftercare - High	Late - Institutional	2	1.4303
4HA11	MMTA - Cardiac - Low	Late - Institutional	0	1.0150
4HA21	MMTA - Cardiac - Low	Late - Institutional	1	1.0747
4HA31	MMTA - Cardiac - Low	Late - Institutional	2	1.1997
4HB11	MMTA - Cardiac - Medium	Late - Institutional	0	1.1684
4HB21	MMTA - Cardiac - Medium	Late - Institutional	1	1.2281
4HB31	MMTA - Cardiac - Medium	Late - Institutional	2	1.3531
4HC11	MMTA - Cardiac - High	Late - Institutional	0	1.2831
4HC21	MMTA - Cardiac - High	Late - Institutional	1	1.3427
4HC31	MMTA - Cardiac - High	Late - Institutional	2	1.4677
4IA11	MMTA - Endocrine - Low	Late - Institutional	0	1.1341
4IA21	MMTA - Endocrine - Low	Late - Institutional	1	1.1937
4IA31	MMTA - Endocrine - Low	Late - Institutional	2	1.3187
4IB11	MMTA - Endocrine - Medium	Late - Institutional	0	1.2989

HIPPS	Clinical Group and Functional Level	Timing and Admission Source	Comorbidity Adjustment (0 = none, 1 = single comorbidity, 2 = interaction)	CY 2019 Weight
4IB21	MMTA - Endocrine - Medium	Late - Institutional	1	1.3586
4IB31	MMTA - Endocrine - Medium	Late - Institutional	2	1.4836
4IC11	MMTA - Endocrine - High	Late - Institutional	0	1.4211
4IC21	MMTA - Endocrine - High	Late - Institutional	1	1.4807
4IC31	MMTA - Endocrine - High	Late - Institutional	2	1.6058
4JA11	MMTA - GI/GU - Low	Late - Institutional	0	0.9746
4JA21	MMTA - GI/GU - Low	Late - Institutional	1	1.0342
4JA31	MMTA - GI/GU - Low	Late - Institutional	2	1.1593
4JB11	MMTA - GI/GU - Medium	Late - Institutional	0	1.1382
4JB21	MMTA - GI/GU - Medium	Late - Institutional	1	1.1978
4JB31	MMTA - GI/GU - Medium	Late - Institutional	2	1.3228
4JC11	MMTA - GI/GU - High	Late - Institutional	0	1.2319
4JC21	MMTA - GI/GU - High	Late - Institutional	1	1.2916
4JC31	MMTA - GI/GU - High	Late - Institutional	2	1.4166
4KA11	MMTA - Infectious - Low	Late - Institutional	0	1.0070
4KA21	MMTA - Infectious - Low	Late - Institutional	1	1.0667
4KA31	MMTA - Infectious - Low	Late - Institutional	2	1.1917
4KB11	MMTA - Infectious - Medium	Late - Institutional	0	1.1422
4KB21	MMTA - Infectious - Medium	Late - Institutional	1	1.2018
4KB31	MMTA - Infectious - Medium	Late - Institutional	2	1.3269
4KC11	MMTA - Infectious - High	Late - Institutional	0	1.2535
4KC21	MMTA - Infectious - High	Late - Institutional	1	1.3131
4KC31	MMTA - Infectious - High	Late - Institutional	2	1.4382
4LA11	MMTA - Respiratory - Low	Late - Institutional	0	0.9919
4LA21	MMTA - Respiratory - Low	Late - Institutional	1	1.0515
4LA31	MMTA - Respiratory - Low	Late - Institutional	2	1.1766
4LB11	MMTA - Respiratory - Medium	Late - Institutional	0	1.1358
4LB21	MMTA - Respiratory - Medium	Late - Institutional	1	1.1954
4LB31	MMTA - Respiratory - Medium	Late - Institutional	2	1.3205
4LC11	MMTA - Respiratory - High	Late - Institutional	0	1.2449
4LC21	MMTA - Respiratory - High	Late - Institutional	1	1.3045
4LC31	MMTA - Respiratory - High	Late - Institutional	2	1.4295

Page 291 Low-Utilization Payment Adjustment (LUPA) Add-On Payments and Partial Payment Adjustments under PDGM

CMS is finalizing its proposal to continue to multiply the per-visit payment amount for the first skilled nursing, physical therapy, or speech-language pathology visit in LUPA periods that occur as the only period of care or the initial 30-day period of care in a sequence of adjacent 30-day periods of care by the appropriate add-on factor (1.8451 for SNF, 1.6700 for PT, and 1.6266 for SLP) to determine the LUPA add-on payment amount for 30-day periods of care under the PDGM.

Comment

As previously noted, the PDGM is a complex change. The material in the rule spans nearly 200 pages.

To support an assessment of the effects of the PDGM, CMS says it will provide, upon request, a Home Health Claims-OASIS Limited Data Set (LDS) file to accompany the CY 2019 HH PPS proposed and final rules. The Home Health Claims-OASIS LDS file can be requested by following the instructions on the following CMS website: https://go.cms.gov/2KGuyY0, and a file layout will be available.

Additionally, CMS will make available agency-level impacts and a report to congressional committees regarding a technical expert panel's insights on the proposed PDGM, as well as an interactive Grouper Tool that will allow HHAs to determine case-mix weights for their patient populations. These materials are at: https://www.cms.gov/Center/Provider-Type/Home-Health-Agency-HHA-Center.html.

Page 321 Change Regarding Remote Patient Monitoring under the Medicare Home Health Benefit

CMS will define remote patient monitoring under the Medicare home health benefit as "the collection of physiologic data (for example, ECG, blood pressure, glucose monitoring) digitally stored and/or transmitted by the patient or caregiver or both to the home health agency."

Additionally, CMS is finalizing its proposal to amend the regulations at 42 CFR 409.46 to include the costs of remote patient monitoring as an allowable administrative cost (that is, operating expense), if remote patient monitoring is used by the HHA to augment the care planning process.

4. Provisions of the Home Health Value-Based Purchasing (HHVBP) Model

Using a randomized selection methodology finalized in the CY 2016 HH PPS final rule, nine states were selected for inclusion in the HHVBP Model, representing each geographic area across the nation. All Medicare-certified HHAs providing services in Arizona, Florida, Iowa, Maryland, Massachusetts, Nebraska, North Carolina, Tennessee, and Washington (competing HHAs) are required to compete in the Model.

Beginning in CY 2018 based on performance on applicable measures, CMS will impose payment adjustments. Payment adjustments will be increased incrementally over the course of the HHVBP Model in the following manner: (1) A maximum payment adjustment of 3 percent (upward or downward) in CY 2018; (2) a maximum payment adjustment of 5 percent (upward or downward) in CY 2019; (3) a maximum payment adjustment of 6 percent (upward or downward) in CY 2020; (4) a maximum payment adjustment of 7 percent (upward or downward) in CY 2021; and (5) a maximum payment adjustment of 8 percent (upward or downward) in CY 2022. Payment adjustments will be based on each HHA's Total Performance Score (TPS) in a given performance year (PY) on (1) a set of measures already reported via OASIS and HHCAHPS for all patients serviced by the HHA and select claims data elements, and (2) three New Measures where points are achieved for reporting data.

For CY 2019, CMS proposed to remove five measures and add two new composite measures to the applicable measure set for the HHVBP model, revise its weighting methodology for the measures, and rescore the maximum number of improvement points.

CMS is finalizing, as proposed, the removal of the Influenza Immunization Received for Current Flu Season and Pneumococcal Polysaccharide Vaccine Ever Received measures from the set of applicable measures beginning with PY4 and subsequent years of the model.

CMS is finalizing its proposal to replace three OASIS-based measures, Improvement in Ambulation-Locomotion, Improvement in Bed Transferring, and Improvement in Bathing, with two composite measures, Total Normalized Composite Change in Self-Care and Total Normalized Composite Change in Mobility, for PY4 and subsequent performance years.

The rule's Table 38 (page 341) reflects CMS's finalized polices to remove the Influenza Immunization Received for Current Flu Season and Pneumococcal Polysaccharide Vaccine Ever Received measures and to replace the Improvement in Ambulation-Locomotion, Improvement in Bed Transferring, and Improvement in Bathing measures with the new Total Normalized Composite Change in Self-Care and Total Normalized Composite Change in Mobility measures.

5. Updates to the Home Health Quality Reporting Program (HH QRP)

This rule says that the HH QRP currently has 30 measures for the CY 2020 program year. Refer to the rule's table 41 for a list of the measures. (Display copy page 386)

CMS will remove seven measures beginning with the CY 2021 HH QRP.

- 1. Removal of the Depression Assessment Conducted Measure
- 2. Removal of the Diabetic Foot Care and Patient/Caregiver Education Implemented during All Episodes of Care Measure
- 3. Removal of the Multifactor Fall Risk Assessment Conducted for All Patients Who Can Ambulate (NQF #0537) Measure
- 4. Removal of the Pneumococcal Polysaccharide Vaccine Ever Received Measure
- 5. Removal of the Improvement in the Status of Surgical Wounds Measure
- 6. Removal of the Emergency Department Use without Hospital Readmission during the First 30 Days of HH (NQF #2505) Measure
- 7. Removal of the Re-hospitalization during the First 30 Days of HH (NQF #2380)
- 8. Measure

6. Medicare Coverage of Home Infusion Therapy Services

For CYs 2019 and 2020, and as required by section 50401 of the *Bipartisan Budget Act of 2018*, CMS is implementing a temporary transitional payment for home infusion therapy services that pays eligible home infusion therapy suppliers for associated professional services for administering certain drugs and biologicals infused through a durable medical equipment pump, training and education, and remote monitoring and monitoring services.

Section 5012 of the **21**st **Century Cures Act** created a new permanent Medicare benefit for home infusion therapy services beginning Jan. 1, 2021. This rule finalizes elements of the permanent home infusion benefit including the health and safety standards for home infusion therapy, an accreditation process for qualified home infusion therapy suppliers and an approval and oversight process for the organizations that accredit qualified home infusion therapy suppliers. Additionally, CMS says it recognizes the concerns from stakeholders and members of Congress on the agency's interpretation of "infusion drug administration calendar day", including with respect to professional services that may be provided outside of the home and, as applicable, payment amounts for such services. CMS notes it intends to ensure access to home infusion therapy services in accordance with section 50401 of the BBA of 2018.

Our Washington liaison, Larry Goldberg of Larry Goldberg Consulting, has provided us with this summary. Please contact Jeff Weegar, NCHA, at 919-677-4231, jweegar@ncha.org or Ronnie Cook, NCHA, at 919-4225, rcook@ncha.org if you have questions.