

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



MSI Registration – Going, going, gone!

Have you registered for the MSI? If not, your time is running out. The MSI registration will close on Monday, September 30th. [Why should I register?](#)

- The MSI will provide the best opportunity for you to rate your satisfaction with your MAC
- Your input will help your MAC to improve the services that they offer you
- Your opinion counts!

If you are a Medicare FFS provider or you represent a Medicare FFS provider and are interested in participating, take a moment to register your contact information by completing the application at <https://adobeformscentral.com/?f=eMRKPqaWpqMxNOmTQpSKDA> on the Internet. It will take about 1 minute to complete.

For more information visit <http://www.cms.gov/Medicare/Medicare-Contracting/MSI> on the CMS MSI website.

MLN Matters® Number: MM8441 **Revised**

Related Change Request (CR) #: CR 8441

Related CR Release Date: December 6, 2013

Effective Date: July 1, 2014

Related CR Transmittal #: R2833CP

Implementation Date: July 7, 2014

Home Health Agency Reporting Requirements for the Certifying Physician and the Physician Who Signs the Plan of Care

Note: This article was revised on December 6, 2013, to reflect the revised CR8441 issued on that date. The article is revised to reflect that CR8441 applies to claims with episodes that begin on or after July 1, 2014. The requirements for reporting the physician who signs the plan of care are also revised. The CR release date, transmittal number, and the Web address for accessing CR8441 are also revised.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2012 American Medical Association.

Provider Types Affected

This MLN Matters® Article is intended for Home Health Agencies (HHAs) submitting claims to Home Health & Hospice Medicare Administrative Contractors (HH&Hs) and Part A Medicare Administrative Contractors (MACs) for services to Medicare beneficiaries.

Provider Action Needed

CR 8441, from which this article is taken, provides that home health agencies (HHAs) will begin reporting (on claims with episodes that begin on or after July 1, 2014) the National Provider Identifier (NPI) and the name of both the physician who certifies the patient's eligibility for home health services and the physician who signs the home health plan of care (POC). You should make sure that your billing staffs are aware of this change.

Background

Medicare allows a physician (such as a hospitalist) who attends to hospitalized patients, but does not follow them into the community to: 1) Certify the need for home health care based on their face to face contact with patients in the hospital; 2) Initiate the orders and a plan of care for home health services, and 3) "hand off" the patients to their community-based physicians to review and sign the plan of care.

CR 8441, from which this article is taken, requires that, for claims with episodes that begin on or after July 1, 2014, home health agencies (HHA) must:

- Report the National Provider Identifier (NPI) and name of the physician who certifies/re-certifies the patient's eligibility for home health services, if this physician is different than the physician who signs the patient's plan of care ("attending physician"); and
- Continue to report the NPI and name of the physician who signs the patient's plan of care.

In most instances, the Centers for Medicare & Medicaid Services (CMS) expects the certifying/re-certifying physician to be the same physician who signs the plan of care, in which case the HHA need only report the NPI and the name of the physician in the claim's fields that correspond to that of the physician who signs the plan of care ("Attending physician").

Additional Information

The official instruction, CR 8441, issued to your Medicare contractor regarding this change may be viewed at <http://cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2833CP.pdf> on the CMS website.

If you have any questions, please contact your Medicare contractor at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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