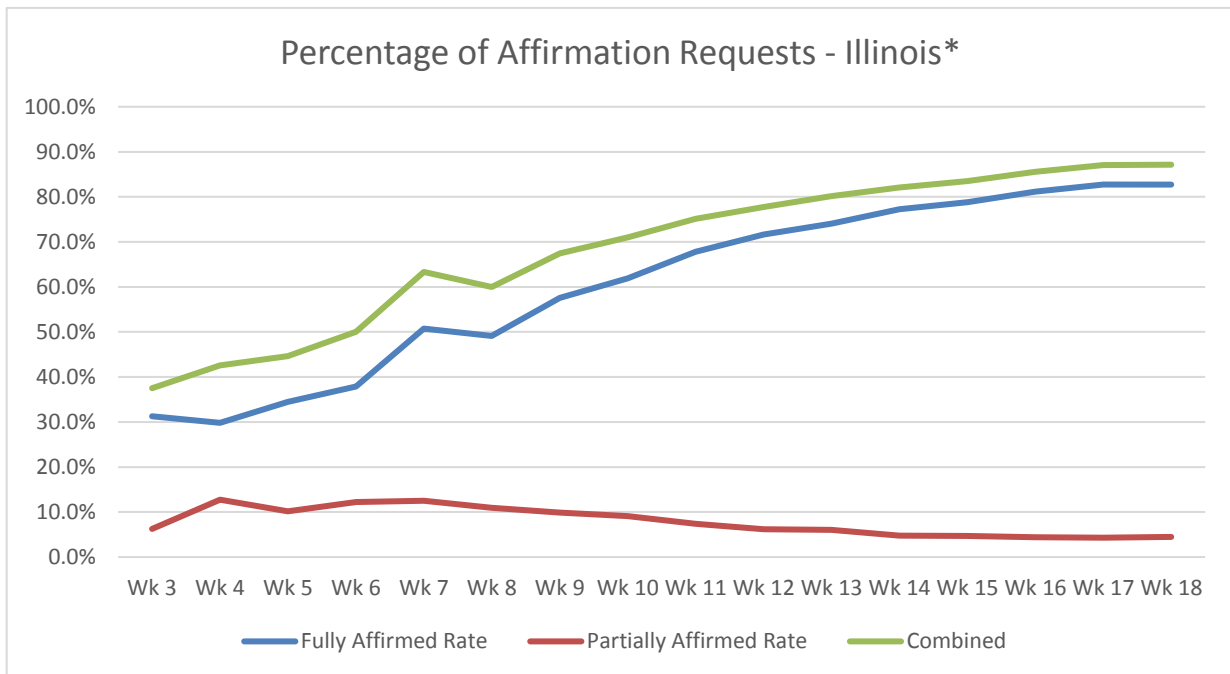


## Percentage of Affirmed/Partially Affirmed Pre-Claim Review Requests in Illinois (Week Eighteen Affirm Rate in Illinois)

Updated: December 9, 2016

Pre-claim review requests may include one or more home health service. A partially affirmed decision indicates at least one service was provisionally affirmed. The partially affirmed rate has been decreasing while the fully affirmed rate has been increasing. In week 18, which ended on December 3<sup>rd</sup>, the majority (82.7 percent) of pre-claim review requests received a fully affirmed decision. Overall in week 18, 87.1 percent of pre-claim review requests received a provisionally affirmed or partially affirmed decision.



*\*The weekly fully affirmed rates in the above graph differs from the ones previously reported. The rates differ due to factors such as a change in the weekly date range and decision reversals.*

If HHAs choose not to take advantage of the pre-claim review process, when the final claim is submitted, it will be subjected to pre-payment review. Unlike during pre-claim review, claims that are found to be incorrect or missing required documentation during the pre-payment review process cannot be corrected. Such claims would be denied, and the HHA would need to appeal the claim to seek further review. As of November 3, 2016, claims submitted for payment without a pre-claim review decision are subject to a 25 percent payment reduction if found to be payable.

<sup>1</sup> A RAP is a split percentage payment approach to ensure adequate cash flow to HHAs. The split percentage occurs through the RAP at the start of the episode and the final claim at the end of the episode. For initial episodes, there will be a 60/40 split percentage payment. See <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c07.pdf> for more information.