
Program Memorandum Intermediaries

Department of Health and
Human Services (DHHS)
HEALTH CARE FINANCING
ADMINISTRATION (HCFA)

Transmittal A-01-23

Date: FEBRUARY 9, 2001

CHANGE REQUEST 1539

SUBJECT: Modification to Home Health Prospective Payment System (HH PPS) Date Matching Edit in Medicare Standard Systems Software

In October 2000, when the Regional Home Health Intermediaries (RHHIs) were preparing to release claims that had been suspended under the HH PPS Phase-In plan, a significant number of HH PPS Requests for Anticipated Payment (RAPs) were identified that would be returned to the provider upon release. These RAPs would have failed an edit in the claims system which requires that if the statement "from" date and admission date on a HH PPS RAP or claim are the same, the date on the revenue code 0023 line must also match that date. These RAPs were submitted in error due to the lack of a clear written instruction on how the 0023 line item date should have been submitted for episodes in the HH PPS transition.

HCFA determined that there would be adverse effects if all the RAPs affected by this date matching edit were returned to the provider when the HH PPS phase-in suspense locations were released after October 30, 2000. RHHIs were instructed to temporarily alter this edit, setting it to accept (i.e., turning it off) while all backlogged HH PPS RAPS and claims were processed. RHHIs were instructed to await HCFA instructions before reinstating the edit.

Now that the HH PPS transition is complete, this date matching edit could be reinstated. However, it cannot be simply re-set by the RHHIs to return claims to the provider because this action would cause the edit to fire on any adjustments to claims that were processed during the period while the edit was set to accept. Therefore, Medicare's claims processing standard systems must be modified to make the edit date of service specific before the edit is reinstated.

The date matching edit must be revised to set only on claims with dates of service on or after July 1, 2001. This revision will be released with the regular quarterly Medicare claims systems release to be implemented July 1, 2001. All RHHIs must then re-set this date matching edit to return claims to the provider immediately upon the implementation of this release. RHHIs must notify home health agencies of the reinstatement of this edit in a monthly provider bulletin during June 2001, if not before.

The *effective date* for this Program Memorandum (PM) is July 1, 2001.

The *implementation date* for this PM is July 1, 2001.

These instructions should be implemented within your current operating budget.

This PM may be discarded after July 1, 2002.

If you have any questions, contact your regional office.