

Needle in a Haystack: How to Find Resources on the Medicare Website

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In response to members' inquiries and requests for information on how to "find" resources on the Medicare website, the Government Affairs Committee was tasked to develop resources to help members navigate the Medicare online manual system.

This document outlines two key resources for all home health therapists:

1. The Medicare Manuals
2. The Guidance documents to the OASIS set:
Within the Medicare Manual system, there are four equally important manuals where information is housed:
 - a. The Benefit Policy Manual where you find information outlining what "is" included in the Home Health benefit.
 - b. The Claims Processing Manual that contains information on how HH claims should be billed and what is required for billing.
 - c. The State Operations Manual that includes the requirements and guidelines for HH surveyors.
 - d. The Program Integrity Manual where information on HH auditing and the claims review

process is found.

We hope you find this resource helps you to more easily find the information you need to better understand the home health benefit and work more collaboratively with your agencies.

I. MEDICARE INTERNET ONLY MANUALS:

Found at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs.html>

- The "source" for all things related to Medicare regulations
- **100-02: Benefit Policy Manual**
 - o Contains the chapter outlining the Home Health benefit
- **100-04: Claims Processing Manual**
 - o Contains information on billing HH claims
- **100-07: State Operations Manual**
 - o Contains requirements for HH surveys and surveyor guidelines
- **100-08: Program Integrity Manual**
 - o Contains information about HH audits and claims review process

Home Health Document Library

The Home Health Section recognizes that some articles appearing in The Quarterly Report are worth referring to again and again. This article, "Needle in a Haystack: How to Find Resources on the Medicare Website", is archived in the Home Health Document Library for your quick access. You'll find it under the Regulations documents after selecting "Document Library" from the Tools & Resources drop-down menu on the Home Health Section website. Be sure to login to reveal all of the resources available to members.

www.homehealthsection.org

Internet-Only Manuals (IOMs)

The Internet-only Manuals (IOMs) are a replica of the Agency's official record copy. They are CMS* program issuances, day-to-day operating instructions, policies, and procedures that are based on statutes, regulations, guidelines, models, and directives. The CMS program components, providers, contractors, Medicare Advantage organizations and state survey agencies use the IOMs to administer CMS programs. They are also a good source of Medicare and Medicaid information for the general public.

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100	Introduction
100-01	Medicare General Information, Eligibility and Entitlement Manual
100-02	Medicare Benefit Policy Manual
100-03	Medicare National Coverage Determinations (NCD) Manual
100-04	Medicare Claims Processing Manual
100-05	Medicare Secondary Payer Manual
100-06	Medicare Financial Management Manual
100-07	State Operations Manual
100-08	Medicare Program Integrity Manual

1. 100-02: Benefit Policy Manual; Chapter 7

- Contains the chapter outlining the Home Health benefit including:
 - Prospective Payment System
 - Reasonable and Necessary Services
 - Use of “Rules of Thumbs”
 - Definition of Homebound Services
 - Completion of a Plan of Care
 - Orders and use of Oral/Verbal Orders
 - Physician Certification, Recertification and Face-to-Face
 - What Qualifies as Skilled Nursing Services
 - What Qualifies as Skilled Therapy Services
 - Other services such as HHAs, MSS, and Medical Supplies
 - Provision of Outpatient Services under HHA benefit
 - Exclusions from Coverage as HH services
 - Use of Telehealth in HH services

Details for title: 100-02

Publication #	100-02
Title	Medicare Benefit Policy Manual
Downloads	

[Chapter 7 - Home Health Services \(PDF 455K\)](#)

2. 100-04: Claims Processing Manual; Chapter 10

- Contains requirements for HH surveys and surveyor guidelines including:
 - Definition of the HH Unit of Payment – the Episode
 - Number, Duration, and Claims Submission
 - Split Payments of Episodes
 - Basis of Medicare Prospective Payment System and the Case-Mix
 - Composition of the HIPPS Codes for HH PPS
 - Claim Submission and Processing
 - Request for Anticipated Payments (RAP)
 - Effect on Payment for Various Situations
 - Consolidated Billing
 - How to Complete the CMS-1450 for Billing
 - HH Pricer Billing
 - Medical and other Health Services submitted using a Type of Bill 034X

Details for title: 100-04

Publication #	100-04
Title	Medicare Claims Processing Manual
Downloads	

[Chapter 10 - Home Health Agency Billig \(PDF, 1MB\)](#)

3. 100-04: State Operations Manual; Chapter 10 AND Appendix B

- Chapter 10 contains requirements for HH surveys and surveyor guidelines including:
 - Citations and Description of HHAs
 - Emphasis, Components of a Survey
 - Survey Team and Qualifications
 - Survey Protocol
 - Informal Dispute Resolution
 - Effect of Sanctions on HHAs
 - Lower Range Penalties not directly related to Patient Care
 - Plans of Correction

Details for title: 100-07










Publication #	100-07
Title	State Operations Manual
Downloads	

[Chapter 10 - Chapter 10 - Survey and Enforcement Process for Home \(PDF 313K\)](#)
[Appendices Table of Contents \(PDF, 43KB\)](#)

II. OASIS: Outcome and Assessment Information Set:

Found at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/OASIS/index.html>

- The “source” for all things related to Completion and Submission of the OASIS.
- The purpose of this site is to **store and disseminate policy and technical information related to the OASIS** for use in HHAs, state agencies, software vendors and other Federal agencies.
- ***This is an important distinction. This site will not provide information related to conditions of clinical coverage.***
- At the bottom of each page is a “Downloads” section, so don’t forget to scroll down!

Outcome and Assessment Information Set (OASIS)		
Background		<i>Background: Informs providers of the main components, how to use OASIS in care planning, and compliance requirements. Also provides an Assessment Reference Sheet</i>
Regulations		
jHAVEN		<i>jHAVEN: provides links to the latest version of the jHAVEN, the free software for submitting OASIS data sets</i>
Data Set		
Data Specifications		<i>Data Specifications: provides links to the latest version of the OASIS data set for all submission timepoints</i>
User Manual		<i>User Manual: A link to the most up-to-date OASIS User Manuals</i>
Education Coordinators		<i>Educational Coordinators: List of Coordinators by State</i>
Automation Coordinators		<i>Automation Coordinators: List of Coordinators by State</i>
OASIS PPS		<i>OASIS PPS: provides information for how the OASIS factors into the HHA’s prospective payment system and the episodic rates</i>
Home Health Agency Questions and Answers		<i>HHA Questions and Answers: Link to email questions to CMSOASISquestions@oasisanswers.com ; and a link to the Quarterly CMS Q&A documents</i>
OASIS C Based Home Health Agency Patient Outcome, Process and Potentially Available Event Reports		<i>OASIS-C Based HHA Patient Outcome, Process and Potentially Avoidable Event Reports: Providers can access state-by-state comparison of outcome, process and potentially avoidable event measures reports</i>
Archive OASIS B1-33		
Training		<i>Training: links to CMS training materials and resources</i>
Archive		

Ellen Strunk is owner of Rehab Resources & Consulting, Inc., a company providing continuing education, consulting and audit/review services for post-acute care settings. She specializes in utilizing medical record reviews and data systems to help both inpatient and outpatient therapy providers meet regulatory guidelines. She has worked with clients on a variety of Medicare/Medicaid payment and certification matters, including substantial overpayment assessments and facilitation of Corporate Integrity Agreements. Ellen is a member of the Home Health Section Government Affairs Committee.



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Advanced Competency in Home Health

The Home Health Section's **Advanced Competency in Home Health** program synthesizes current evidence-based practice and tailors it to the unique physical therapy setting of home health. This program enables home health agencies, outpatient practices that provide home care physical therapy, and individual physical therapists to enhance efficacy and efficiency of treatment of their home health patients and clients.



Successful completion of the **Advanced Competency in Home Health** program is a great way for physical therapists new to home care to prepare for this practice setting and for current home care therapists to increase and test their expertise.

Advanced Competency in Home Health courses will be available online in the **APTA Learning Center** this summer. <http://learningcenter.apta.org>
Keyword search: Home Health

Learn more here: www.homehealthsection.org

