

Medicaid Face to Face (F2F) Compared to Medicare F2F	By William Dombi Vice President for Law National Association for Home Care and Hospice	August 2016	
F2F Element	MEDICARE	MEDICAID	Analysis of Differences
Face-to-Face Encounter	YES	YES	SAME
WHEN	No more than 90 days prior to or within 30 days of the start of home health care	No more than 90 days prior to or within 30 days of the start of home health care	SAME
BY Whom	Certifying physician or qualified alternative practitioner	Ordering Physician or qualifying alternative practitioner	Medicare requires a physician certification of eligibility for home health services. The F2F requirement is incorporated in the certification requirement. Medicaid does not require a physician certification of eligibility and requires the F2F by the physician who orders the home health services.
Alternative qualified practitioner	<ol style="list-style-type: none"> Physician with privileges who cared for patient in an acute or post-acute care facility from which the patient was directly admitted Nurse practitioner or clinical nurse specialist 	<ol style="list-style-type: none"> Attending acute or post-acute care facility physician when the patient was directly admitted to home health from the facility Nurse practitioner or clinical nurse specialist working in accordance with state law in collaboration with ordering physician 	<ol style="list-style-type: none"> SAME Medicaid does not permit nurse practitioners, clinical nurse specialists, or physician assistants working with a non-ordering, acute/post-acute

	<p>working in accordance with state law in collaboration with certifying physician or the acute/post-acute physician</p> <p>3. Certified nurse midwife as authorized by State law, under the supervision of the certifying physician or the acute/post-acute physician</p> <p>4. Physician assistant under the supervision of the certifying physician or the acute/post-acute physician</p>	<p>3. Certified nurse midwife as authorized by State law</p> <p>4. Physician assistant under the supervision of the ordering physician</p>	<p>physician to conduct the F2F</p>
Alternative qualified practitioner action	<p>Certifying facility physician must identify community physician that will follow patient after discharge</p>	<p>Must communicate clinical findings to ordering physician; Clinical findings must be incorporated into a document that is included in the beneficiary’s medical record</p>	<p>Medicare and Medicaid requirements differ</p>
Telehealth	<p>Telehealth F2F permitted if in compliance with Sec. 1834(m) of SSA and reimbursable under physician fee schedule</p>	<p>Telehealth F2F permitted as implemented by the State Medicaid program (phone call not acceptable as telehealth)</p>	<p>Medicare’s standard is highly limiting as telehealth is covered only where it meets the “originating site” requirement that does not include the patient’s home. The Medicaid standard provides wide flexibility to the State to include a range of telehealth services to meet the F2F encounter requirements</p>

Encounter	Must be related to the primary reason the beneficiary requires home health services	Must be related to the primary reason the beneficiary requires home health services	SAME
Documentation Requirements	<ol style="list-style-type: none"> 1. Patient's medical record must support certification of eligibility 2. Certifying physician must document the date of the encounter 3. Certification must be signed and dated by the physician who establishes the plan of care 4. Certifying physician's medical record shall be used as the basis for certification of home health eligibility 5. If physician record is not sufficient to demonstrate patient eligibility, payment of the claim will not be made 6. If patient is admitted to home health directly from a hospital or SNF, the facility's medical records shall be used as a basis for certification of eligibility 	<ol style="list-style-type: none"> 1. Ordering physician must document that the encounter occurred within the required timeframes 2. Ordering physician must indicate the practitioner who conducted the encounter 3. Ordering physician must document the date of the encounter 4. Documentation must show that the encounter was related to the primary reason the beneficiary requires home health services 	<p>Medicaid standards do not require the extent and specificity of documentation required by Medicare. The States must meet the minimum standards of documentation set out in the rule and can do so in a manner that the State chooses.</p>

	Information from the HHA can be incorporated into the certifying physician's medical record, but it must be corroborated by other information in the physician's record.		
Limitations	<ol style="list-style-type: none"> 1. Physician certification and plan of care functions (including F2F) may not be performed by a physician with a prohibited financial interest under Stark II standards. 2. Non-physician practitioner may not perform the F2F encounter if such encounter would be prohibited under Stark II standards if the practitioner were a physician 	None	

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