Skilled Home Health Reference Guide

Veterans Affairs Community Care Network (VA CCN)

This reference guide was developed to help skilled home health agencies recognize the type of services authorized by the Department of Veterans Affairs (VA), based on the Standardized Episode of Care (SEOC) listed on an approved referral. Always refer to the consult order in the referral packet for approved services and hours. If the SEOC or consult order is not received, contact the local VA medical center to obtain. Refer to the Provider Manual for additional information.

Agency definitions

Certified home health agency (CHHA) – CHHAs are Medicare-certified home health agencies. They provide intermittent skilled nursing care and various therapy services in the patient's home. Some CHHAs offer both Medicare certified skilled services and non-skilled services.

Licensed home care service agency (LHCSA) – LHCSAs are state licensed, but not Medicare-certified. These agencies generally provide non-bundled skilled and non-skilled home care services to individuals who require assistance and care on a long-term basis.

Scenario and SEOC - Please refer to "Notes" for guidance on which type of agency can perform services on approved SEOC.

SEOC title	Provider type = Bill type	Scenarios	Notes
Skilled Home Health Care **Bundled** sixty (60) or one hundred-twenty (120) Days	CHHA = UB-04/1450	**INTENT: To authorize skilled nursing care on an intermittent basis. Includes all disciplines; nursing, physical therapy, occupational therapy, speech therapy, nutritional services, social worker services, home health aide, mental health and palliative skilled services.** Veteran was just released from inpatient care, following an admission for total knee replacement and needs home health services. The VA provider has entered a consult requesting six (6) to eight (8) weeks of skilled home care for incisional wound care, education on new medications, physical and occupational therapy for home safety evaluations and strengthening, as well as a bath aide. The maximum duration authorized for this episode of care per provider orders is eight (8) weeks (fifty-six (56) days).	Skilled home health care is short-term (intermittent) in nature and includes multiple disciplines. Services are bundled based on Centers for Medicare & Medicaid Services (CMS) reimbursement methodology (OASIS/HIPPS). Veteran does not need to meet Medicare home-bound criteria and face-to-face requirements.

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SEOC title	Provider type = Bill type	Scenarios	Notes
		Utilize the Skilled Home Health Care Bundled sixty (60) days SEOC.	Bundled Services may only be provided by a Medicare CHHA.
Skilled Home Health Care – **Expanded** sixty (60) or one hundred-twenty (120) Days	CHHA = HCFA-1500 and/or UB04/1450 LHCSA = HCFA-1500	**INTENT: To authorize extensive skilled home care services when complex care needs exceed care covered by the Skilled Bundled or Non-Bundled SEOCs. Expanded care is also known as Private Duty Nursing. Care does not meet Medicare criteria.** Veteran has a diagnosis of ALS and is ventilator dependent. The Veteran is cared for by their caregiver at home who is experiencing significant caregiver burden. In addition, Veteran requires a two (2) person transfer, often needs suctioning, and has tube feedings with frequent medications. The VA provider has entered a consult requesting one hundred-twenty (120) days of skilled nursing services to provide support and assistance to maintain Veteran at home, as well as to enable caregiver to leave the home for periods of time. The Skilled Home Health Care – Expanded one hundred-twenty (120) days SEOC would be provided to ensure the Veteran's care needs are met.	Also called "Private Duty Nursing." Veteran's care needs exceed Skilled Home Health Care Bundled or Non-Bundled SEOC levels. Used to maintain Veterans with complex medical conditions in their home. Reimbursement is on a fee-for-service basis. Expanded Services may be provided by either Medicare CHHAs or LHCSAs.
Skilled Home Health Care – **Non-Bundled** sixty (60) or one hundred-twenty (120) Days	CHHA = HCFA-1500 and/or UB04/1450 LHCSA = HCFA-1500	**INTENT: To authorize skilled home care not typically covered under Medicare. Includes all disciplines; nursing, physical therapy, occupational therapy, speech therapy, nutritional services, social worker services, home health aide, mental health and palliative skilled services.** Veteran has Bilateral Above the Knee Amputations (BAKA). Veteran has a wound on their right stump that is not progressing. The VA provider has entered a consult requesting one hundred-twenty (120) days of long-term nursing support to prevent deterioration of wound. Because the care is no longer acute or short term in nature, it will shift to per-visit reimbursement.	Care does not meet Medicare criteria and CMS would not cover the services. Reimbursement is on a fee-for-service basis. Veteran does not need to meet Medicare home-bound criteria and face-to-face requirements. Non-Bundled Services may be provided by either Medicare CHHAs or LHCSAs. If medically necessary, SEOC includes PT, OT, ST,

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SEOC title	Provider type = Bill type	Scenarios	Notes
		Utilize the Skilled Home Health Care Non-Bundled one hundred-twenty (120) days SEOC.	SW, bath aide, based on plan of care.
Skilled Home Health Care – **Non-Bundled** sixty (60) or one hundred-twenty (120) days	CHHA = HCFA-1500 and/or UB04/1450 LHCSA = HCFA-1500	**INTENT: Authorize skilled home care for a specific reason and not covered by Medicare.** **The VA provider has entered a consult requesting one hundred-twenty (120) days of medication management by a skilled nurse. No other services have been requested.** **The Skilled Home Health Care Non-Bundled one hundred- twenty (120) days SEOC would be provided.**	Care does not meet Medicare criteria and CMS would not cover the services. Reimbursement is on a fee-for-service basis. Veteran does not need to meet Medicare home-bound criteria and face-to-face requirements. *Non-Bundled Services may be provided by either Medicare CHHAs or LHCSAs. If medically necessary, SEOC includes PT, OT, ST, SW, bath aide, based on plan of care.
Skilled Home Health Care **Bundled** sixty (60) or one hundred-twenty (120) Days ALSO **Homemaker/Home Health Aide SEOC*** Please refer to the Personal Care Services Reference Guide for additional information.	CHHA = UB-04/1450 for bundled services ALSO If homemaker /home health aide services provided by CHHA = HCFA-1500 and/or UB04/1450 If homemaker /home health aide services provided by	**INTENT: To authorize skilled home care on an intermittent basis. Includes all disciplines, including physical therapy, occupational therapy, speech pathology, social worker, and limited bath aide.** **ALSO:** **To authorize homemaker/home health aide care not covered by Medicare.** **Veteran was ordered sixty (60) days of skilled home health following a hip fracture and subsequent repair. A nurse and physical therapist will be visiting with the Veteran in their home to provide skilled care, and a home health aide has been ordered to assist with a shower once a week. The Veteran's caregiver has been providing support with showering the remainder of the week. In the process of assisting the Veteran, the Veteran's caregiver seriously injured their back and is no longer able to assist the Veteran with their shower.** **The Skilled Home Health Care bundled SEOC will generally provide bathing assistance once or twice a week. The Veteran, however, requires a daily shower due to a specialized skin condition, and therefore the VA provider has also entered a consult for**	A concurrent homemaker/home health aide referral is placed to provide daily assistance with the shower, as well as to assist the Veteran with additional grooming and dressing tasks while the Veteran's caregiver heals. Bundled Services may only be provided by a Medicare CHHA.

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SEOC title	Provider type = Bill type	Scenarios	Notes
	LHCSA = HCFA-1500 ***This is a change from how agencies were billing directly to VA.**	**homemaker/home health aide requesting twenty (20) hours a week for sixty (60) days.** **To ensure the Veteran's care needs are adequately met, two (2) SEOCS would be provided. The Skilled Home Health Care Bundled sixty (60) days SEOC would be provided to cover the skilled nurse and physical therapist, while the Homemaker/Home Health Aide seventeen (17) to twenty (20) hours a week for sixty (60) days SEOC would be provided to cover the home health aide.**	

For Personal Care Services Reference Guide please reference vacommunitycare.com/provider >Training & Guides > Benefits

Claims Management

The claim with the approved referral number must be submitted within one hundred-eighty (180) calendar days of the date of service. VA CCN providers must include the referral number (VA + 10 digits) on all claims and the dates of service must be within the referral validity period.

VA CCN providers can review training on how to submit claims and check status of a claim at vacommunitycare.com/provider > Medical & Behavioral Provider Portal.

- All care provided to a Veteran must be included on a CCN approved referral, and the approved referral number must be listed on the claim form
- Providers are encouraged to either update the first appointment date in HSRM, or notify VA staff of start date of care if it differs from the start date on the referral.
- More information can be found in the Provider Manual
- Submit medical records directly to VA, not with the claim

Note: Fee schedule information can be found at Fee Schedules and VA SEOC Billing Codes

When reimbursement is on a fee-for-service basis under the Non-Bundled or Expanded Skilled Home Health Care SEOCs, billing should be as defined by the CPT®/HCPC code billed.

Skilled Home Health Care Bundled SEOC is based on CMS reimbursement methodology. When billing for services within the Skilled Home Health Care Bundled SEOC, please refer directly to CMS educational resources:

- CMS.gov – Home Health Patient-Driven Groupings Model
- CMS.gov - Federal Register/Vol. 83, No. 219 Rules and Regulations
- CMS MLN Matters articles MM11081 and MM11272
  - CMS.gov - MLN Matters Home Health Patient-Driven Groupings Model (PDGM) – Split Implementation
  - CMS.gov – Home Health Patient-Driven Groupings Model Additional Manual Instructions

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CMS Medicare Benefit Policy Manual Chapter 7 – Home Health Services may be referenced for additional information.

- Signed plan of care is received from VA. Claims are sent to Optum for reimbursement of approved care.

The VA SEOC billing code list of preapproved billing codes associated to the services within each SEOC are located at va.gov/COMMUNITYCARE/providers/PRCT-requirements.asp#list.

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Medical Documentation

All providers must submit medical documentation directly to VA and to the referring provider.

Preferred Methods:

- HealthShare Referral Manager (HSRM) allows CCN providers to receive, process and track referrals as well as submit documentation to VA. (not available for Urgent Care)
- Veterans Health Information Exchange (VHIE) allows providers to electronically exchange information with VA (accessible through your practice's current Electronic Medical Record (EMR))

To learn more about HSRM and VHIE, and how they may benefit your practice, please click here.

All medical documentation must include the approved referral number. For proper processing, place the referral number in the top right corner of the cover page.

Additional information on medical documentation requirements is available at vacommunitycare.com/provider > Training & Guides > Medical Documentation and Referrals > Medical Documentation Requirements.

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