

CMS released the much anticipated Home Health Final Rule October 31. Much of the content from the Proposed Rule and the Final Rule will remain the same, with significant changes highlighted below.

Good News: Rate Increase Projected!

For the first time in more than 10 years, CMS projects a rate increase for home health agencies! (Originally, the projected increase was expected = \$400 million, but according to Wednesday's Final Rule, CMS projects a 2.2% increase, or \$420 million.

As a result, PDGM will now contain 432 case-mix groups.

The Final Rule outlines 12 clinical groupings (a change from the 6 clinical groupings outlined in the Proposed Rule) and is driving the case mix groups from 216 to 432. These clinical groupings capture the primary reason/focus for home care delivery and are listed in the table below. The updated additional clinical groupings are a result of dividing the original Medication Management, Teaching, and Assessment (MMTA) group into 7 subgroups. These subgroups were selected based on public comments (which focused primarily on cardiac, oncology, infectious disease, and respiratory diagnoses) in response to the CY 2018 HH PPS Proposed Rule.



Table 27: Final Clinical Groups Used in the PDGM

| Clinical Groups | The Primary Reason for the Home Health Encounter is to Provide |
|---------------------------|---|
| Musculoskeletal | Therapy (physical, occupational, or speech) for musculoskeletal condition |
| Rehabilitation | |
| Neuro/Stroke | Therapy (physical, occupational, or speech) for neurological condition or |
| Rehabilitation | stroke |
| Wounds - Post-Op Wound | Assessment treatment & evaluation of a surgical wound(s); assessment, |
| Aftercare and Skin/Non- | treatment, and evaluation of non-surgical wounds, ulcers, burns, and |
| Surgical Wound Care | other lesions |
| | |
| Behavioral Health Care | Assessment, treatment and evaluation of psychiatric conditions |
| Complex Nursing | Assessment, treatment, and evaluation of complex medical and surgical |
| Interventions | conditions including IV, TPN, enteral nutrition, ventilator, and ostomies |
| Medication Management, | |
| Teaching, and | |
| Assessment (MMTA) | |
| MMTA - Surgical Aftercare | Assessment, evaluation, teaching, and medication management for |
| | surgical aftercare |
| MMTA - | Assessment, evaluation, teaching, and medication management for |
| Cardiac/Circulatory | cardiac or other circulatory related conditions |
| MMTA - Endocrine | Assessment, evaluation, teaching, and medication management for |
| | endocrine related conditions |
| MMTA - GI/GU | Assessment, evaluation, teaching, and medication management for |
| | gastrointestinal or genitourinary related conditions |
| MMTA - Infections | Assessment, evaluation, teaching, and medication management for |
| Disease/Neoplasms / | conditions related to infectious diseases, neoplasms, and blood-forming |
| Blood-forming Diseases | diseases |
| MMTA - Respiratory | Assessment, evaluation, teaching, and medication management for |
| | respiratory related conditions |
| MMTA - Other | Assessment, evaluation, teaching, and medication management for a |
| | variety of medical and surgical conditions not classified in one of the |
| | previously listed groups |

For a detailed list of the elements contained within the PDGM final rule read more here.

You should start preparing for PDGM now. Ensure you have strong coding programming in place. ICD-10 coding will be critical to ensure appropriate clinical groupings and comobility adjustments are captured. OASIS competency remains imperative in order to support the most accurate functional level within PDGM. Look at opportunities to expand your clinicians' understanding and comfort with the functional OASIS items.

What does this mean for the delivery of therapy services? Therapy will remain critical to the delivery of home health services in order to maximize functional outcomes that are achieved. Within the home care industry, we have opportunity to reengineer the overall



delivery of therapy services, and HealthPRO® Heritage is here to help you navigate these changes.

Seek Support

Our Home Health Division, HealthPRO® Heritage at Home, is focused on supporting home health providers with consulting, management, and staffing services. Contact us at info@healthpro-heritage.com if you have any questions.

