



Using the 60-Day Wellness Break 1135 Waiver

April 22, 2020

Confidential and For Internal Use Only

Using the 60-Day Wellness Break 1135 Waiver

Scenario A: Med A resident exhausting 100 days due to the emergency continues to require skilled services and meets the requirements to utilize the 60-day wellness break waiver.

- Do NOT discharge
- No new evaluation required
- We will start a new PPS track – following the Optima instructions below
- A recertification will be needed only for the following:
 - Rehab is the only skilled service and an acute change has occurred to warrant skilling and using this benefit that would otherwise result in a hospitalization
 - A change in condition changes the primary and additional codes supporting therapy services different from the initial evaluation. Or the goals or plan of care is different from the original based on the acute change in condition. An early recertification is the only way to change those ICD-10 codes. For example, a COVID + diagnosis warranting continued skilled services would warrant a recertification to adjust the primary diagnosis to U07.1 for this condition. A clarification order will need to be completed to align with this recertification
- With the new PPS track, a new 5-day ARD will need to be set in projections/planner screen within 2-3 days of the new 100-day spell of illness.

Scenario B: Med A resident exhausted 100 days prior to 3/1/20 and did not have a 60-day wellness break and requires skilled services to prevent an unnecessary hospital stay due to the emergency.

- This Resident will need a new case, payer, PPS track beginning the first day of the skilled services just like a new admission – with a full 100 days
- Start a new track as applicable

How to handle this waiver in Optima

- Click Edit Case Payers

Overview
 Date Range: 3/7/2020 - open
 Description: left hip fx s/p ORIF
 Place of Residence: Skilled Nursing Facility
 Medical Record Number: 205604

Current Payer Information [Edit Case Payers](#)

Payer: Medicare Part A (NGS) (MCA) as of 3/7/2020

Edit Case End Case Delete/Inactivate Case Payer Coverage Attachments Forms Print

- End the current Med A PPS payer on day 100:
 - To do this- click + Add and start the new Med A payer the first day after day 100 and chose Medicare A as the payer and "Create a New PPS Track" as shown below and click ok.
- This will end the previous payer and start the new 100-day and PPS track.

Payer Coverage for Case + Add Refresh

Discipline	Coverage Period	Payer
Default	3/7/2020 thru open. PPS Effective: 3/7/2020	Medicare Part A (NGS) (MCA)

Authorizations

Reference No.

Planned Disch. Section GG

Edit Case Coverage

Payer Details
 Coverage: 4/21/2020 Thru:
 Payer: Medicare Part A
 Plan: Medicare Part A (NGS) (MCA)
 HICN:

PPS Track Information
 Link to PPS Track effective 3/7/2020
 Create New PPS Track
 Effective Date: 4/21/2020
 Days Available: 100
 Projected Last PPS Day: 7/29/2020
 CFS Score: <choose a CFS score>

OK Cancel