

# OHCA

## **Review Choice Demonstration Selection Options and Palmetto GBA eServices**

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*At OHCA, we are dedicated to the advancement and protection of the long-term services and support and post acute care professionals, so that they may provide the highest quality of care.*

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# Review Choice Demonstration Overview

The Review Choice Demonstration (RCD) began on June 1<sup>st</sup>, 2019 in Illinois for all Medicare certified home health agencies (HHAs). The demonstration will begin on September 30<sup>th</sup>, 2019 for Ohio Providers. HHAs will be given a selection period where they can confirm their choice for Round 1 of the RCD selection.

- Choice 1: Pre-Claim Review
- Choice 2: Postpayment Review
- Choice 3: Minimal Review with 25% Payment Reduction

This presentation is meant to educate Ohio HHAs on the three choices for round one, as well as give information on how to submit your selection.

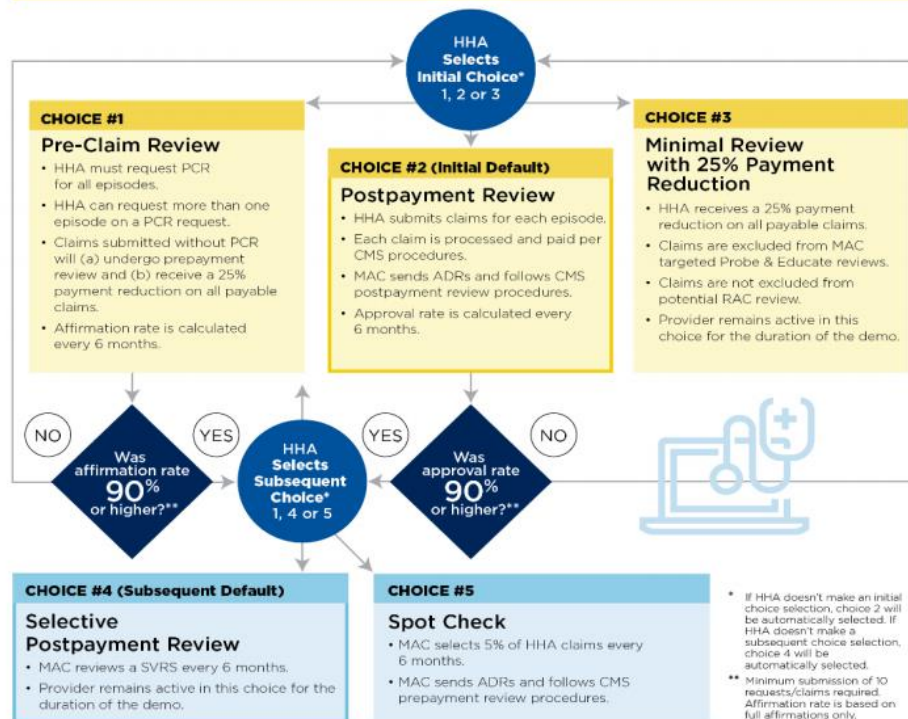
Specifics on proper submission of claims and medical records data during RCD will be provided at a later date

# Review Choice Demonstration Overview

- All home health services are eligible for review, with the exception of LUPA episodes
- Review Choice Demonstration applies to all episodes that start on or after September 30<sup>th</sup>, 2019
  - An episode is any new start of care or recertification
  - Recertifications must include the original plan of care as part of their documentation submissions, as well as the face to face, even if the start of care preceded the RCD implementation date

# Review Choice Demonstration Overview

## Review Choice Demonstration for Home Health Services



Illinois HHAs that participated in the initial pre-claim review demo and reached 90% full provisional affirmation rate (minimum 10 requests) can start the process with the subsequent review choices 1, 4 or 5.

### GLOSSARY

**HHA:** Home Health Agency  
**MAC:** Medicare Administrative Contractor

**ADR:** Additional Documentation Request  
**RAC:** Recovery Audit Contractor  
**PCR:** Pre-Claim Review  
**SVRS:** Statistically Valid Random Sample



# Review Choice Demonstration Selection Time Frames

- Palmetto GBA sent [letters](#) to all HHAs on July 29<sup>th</sup>, 2019 with instructions and time frames for selection.
- Providers have from **August 16<sup>th</sup>, 2019** to **September 15<sup>th</sup>, 2019** to submit their selections through eServices
- Providers who do not make a selection will be placed in Postpayment Review (Choice 2)
- Although the RCD Operational Guide indicates there are multiple submission methods, Palmetto GBA has confirmed they will only accept submissions through eServices
- Instructions on how to register for eServices and how to submit your selection are found at the end of this presentation

# Review Choice Demonstration Choice 1

## Pre-Claim Review

- 100% of claims are reviewed the pre claim review (PCR) before final claim submission
  - The HHA still submits the RAP, and allows to process, prior to submitting the PCR Request
  - A PCR unique tracking number (UTN) is placed on the final claim prior to submission to pair with the PCR.
- Per Illinois HomeCare and Hospice Council (IHHC), 577 HHAs chose PCR

# Review Choice Demonstration Choice 1

## Pre-Claim Review

- Timeline:
  - HHA Submits RAP and allows to process (payment received)
  - HHA Submits PCR and receives UTN
    - For fastest turn around, Palmetto GBA encourages providers to use eServices
    - The MAC will send a notification of decision and UTN within 10 business days of receipt for the initial request, and 20 business days for a resubmission
  - HHA Submits Final with UTN on claim
    - If the HHA submits a final for a claim that received a non-affirmed decision in PCR, the claim will be denied. Normal appeal rights are afforded
    - If the HHA submits a final for claim that received an affirmed decision in PCR, the claim will be processed and paid.

If a final claim is submitted prior to PCR request, the claim will be stopped and send an ADR through the mail and eServices. The HHA has 45 days to respond. *All claims in this circumstance will receive a 25% reduction in payment if payable*

# Review Choice Demonstration Choice 2

## Postpayment Review

- 100% of claims are reviewed *AFTER* the final claim is submitted through standard postpayment review process (otherwise known as ADR requests)
  - RAP and Final claims are submitted as usual
  - Payments released to providers. If the ADR results in a denial, Medicare will recoup the funds.
- Per IHHC, 3 HHAs *CHOSE* postpayment review. Others in postpayment review were placed there due to failure to respond timely

# Review Choice Demonstration Choice 2

## Postpayment Review

- Timeline
  - The HHA has 45 days to respond to the ADR
  - The MAC (Palmetto GBA) has 60 days after they receive the documentation to issue their determination

Example: Claim starts on October 1<sup>st</sup>. Following normal billing intervals, a final is submitted January 8<sup>th</sup>, 2020.

- ADR Issued on January 15<sup>th</sup>, 2020
- HHA responds on February 15<sup>th</sup>, 2020
- Results generated April 8<sup>th</sup>, 2020

# Review Choice Demonstration Choice 3

## Minimal Review with 25% Payment Reduction

- HHAs submit claim RAP and Finals per the normal claims process
- No option to select a different option in 6 months (Choice 1, 4 or 5)
- All claims receive an automatic 25% payment reduction that is NOT appealable
- Claims are not eligible for ADR but are eligible for RAC audit. All appeal rights are waived
- For those eligible for Round 1 selection, none of the Illinois providers selected this option

# RCD Round 1 Choice Comparison

## Choice 1

### Pre Claim Review

- Informs providers of documentation issues within 30-60 days of start of care
- No delay to RAP payment
- Possible delay in Final payment, dependent on submission of PCR request (delay of 0-60 days); requires more coordination\*
- Much lower risk of takeback due to ADR (Per CMS, limited)
- Possible 25% reduction in final payment if no PCR requested
- PCR request has less documentation needed than ADR

## Choice 2

### Postpayment Review

- Informs providers of documentation issues within 6 months of start of care
- No delay to RAP payment
- No delay to Final payment
- Risk of high takebacks from ADRs that will begin sometime around March 2020-April 2020
- High occurrence in ADR denials can lead to additional TPE reviews outside of RCD
- ADRs have more documentation needed than PCR

## Choice 3

### Minimal Review

- No information on documentation issues, unless RAC audited
- No delay to RAP, but 25% reduction in payment on all claims
- No delay to Final, but 25% reduction in payment on all claims
- No risk of ADR takebacks, however, replaced with risk of RAC audit
- All decisions are final, no appeal rights are afforded

# RCD Round 1 Choice Comparison

## Additional considerations

- PDGM Cash flow impacts are projected to hit HHAs the hardest between March 2020-August 2020
- Illinois providers had practice with PCR prior to the RCD
- Per Palmetto and IHHC, there has not been an increase in RAP Suppression for Illinois providers that selected PCR
- Per IHHC, IL providers chose PCR due to more streamlined process, less documentation required in submission, and opportunity to correct any issues through reaffirmation without negatively impacting affirmation rate.
- Per IHHC, most IL providers achieved 90% affirmation through PCR
- Ohio was selected due to a higher ADR denial rate
  - What does your staffing and documentation look like currently?
  - Have you been successful with ADRs in the first round in the past?

# Round 1 Choice Comparison

## Insights from Illinois: Top three steps for successful PCR

1. Educating referral sources that documentation will be needed more timely. Per Sara Ratcliffe, ED of IHHC, this has also helped prepare for PDGM
2. Streamlining internal processes. The IL providers who hired additional staff were less successful. Providers that repurposed ADR staff to be PCR dedicated staff were most successful (ADR/TPE suspended during PCR)
3. Submitting only the documentation that is requested, in the order which it was requested, with labels of what the documentation is.

# Review Choice Demonstration Round 2 Overview

After 6 months of being in the RCD, providers with 90% or higher pass rate on the first round will be asked to make a second selection.

- Providers that do not received 90%, or have not submitted at least 10 requests/claims, will choose between the initial three options again.
- About 24% of Illinois providers passed the first round of PCR and were able to move on to the second round.
- Providers choice between doing Choice 1 again, Choice 4 and Choice 5
  - Choice 1: Pre-Claim Review (75% IL chose in round 2)
  - Choice 4: Selective Post Payment Review (1% IL chose in round 2)
  - Choice 5: Spot Check Review (24% IL chose in round 2)

*OHCA will provide additional education on round 2 as we get closer to implementation  
(March 2020)*

# Additional Resources

- [RCD Home Health FAQs updated 6.14.19](#)
- [RCD Home Health Operational Guide](#)
- [RCD Process Flowchart](#)
- [Home Health Agency Review Decision Flowchart](#)
- [Pre-Claim Review Decision Tool: Education for Documentation Errors](#)
- [Palmetto GBA Home Health Review Choice Demonstration Page](#)

# Palmetto GBA eServices

## Overview

- You must have a Palmetto GBA eServices account to submit your RCD Selection
- No cost for registration or use
- Internet based provider self services secure application
- Offers many great services
  - Claims Data
  - Remittances
  - Financial Forms
  - ADR submission
  - MBI lookup tool

# Palmetto GBA eServices: Registration

- What you need:
  - You can participate in eServices if you have a signed Electronic Data Interchange (EDI) Enrollment Agreement on file with Palmetto GBA.
  - The EDI Enrollment Agreement is a form that is included in the EDI Enrollment Packet, which can be located under the EDI areas of PalmettoGBA.com.
  - If you do not have an EDI Enrollment agreement on file with Palmetto, please go to PalmettoGBA.com and select your line of business. Then, select EDI from the Topics drop-down menu. Select Enrollment for online articles about EDI enrollment.

## NOTE

Only **one** provider administrator per EDI Enrollment Agreement related to a PTAN/NPI combination performs the registration process. The provider administrator grants permissions to additional users related to that PTAN/PTAN combination.

# Palmetto GBA eServices: Registration

- Data Elements Required for Registration
  - Provider Name and Contact Information
  - PTAN
  - NPI
  - Tax ID
  - Line of Business
  - Most Recent Medicare Payment Amount Received
  - Billing Service or Clearinghouse Name and Address

## NOTE

You must register each PTAN/NPI combination separately. If you have multiple NPIs associated with a PTAN, you must register each PTAN/NPI combination. Each combination will have a unique user ID.

# Palmetto GBA eServices: Registration

Palmetto GBA Corporate Palmetto GBA Medicare

**PALMETTO GBA eServices** CMS  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PALMETTO GBA HOME CONTACT US E-MAIL UPDATES SEARCH

## Welcome to Palmetto GBA eServices

You are accessing a U.S. Government information system, which includes: (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only. Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties. By using this information system, you understand and consent to the following:

- You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system. At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.
- Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

Refer to the [Terms of Use](#).

### RETURNING USER

Enter your User ID and password to access your account.

User ID:

Password:

[Forgot Your Password?](#)

[Need Help?](#)

### NEW USER

Palmetto GBA is pleased to offer secure and fast access to your Medicare information through our eServices System. Through this system, you can view beneficiary eligibility, claims status, online remittances and financial information.

Palmetto GBA offers our eServices program to providers who have an [EDI Enrollment Agreement](#) on file with us. One Provider Administrator is allowed to register for each enrollment agreement on file. Once Provider Administrators successfully register, they can grant access to their associates. Get started by clicking the Register Now button.



[Register Now](#)

I want to [learn more](#).

**Click Here**

# Palmetto GBA eServices: Registration

Palmetto GBA Corporate Palmetto GBA Medicare

 PALMETTO GBA  
eServices 

PALMETTO GBA HOME CONTACT US E-MAIL UPDATES SEARCH

eServices Registration [Registration Home](#)

Provider Name:

Contact Name:  Last  First

E-mail Address:

Re-enter Email Address :

Phone Number :

Extension :

I am/work for :

PTAN:  [\(Click here to learn more.\)](#)

NPI:  [\(Click here to learn more.\)](#)

Tax ID:

Most Recent Medicare  
Payment Amount Received:  [\(Click here to learn more.\)](#)

Line of Business:

Billing Service/ClearingHouse Name :

Company Address 1 :

Company Address 2 :

Company City :

Company State :

Company Zip Code :

I agree to the [Terms of Use](#).

# Palmetto GBA eServices: Registration

Having trouble registering?

- If you are the provider administrator and your registration information is entered in an incorrect format, the eServices application will display an error message in red at the top of your screen. Carefully read that error message and enter the information again.
- Providers who have a Do Not Forward (DNF) on file with Palmetto GBA will not be able to register until the DNF is lifted.
- If you are sure you entered all information correctly and cannot register, make sure you have an EDI enrollment agreement on file with CMS. If you do not, please access the EDI section of [PalmettoGBA.com](http://PalmettoGBA.com) for helpful articles about how to complete the EDI agreement.
- Palmetto GBA recommends establishing multiple Administrators for RCD. Only the administrator can see all PCR submissions and responses.

# Palmetto GBA eServices: Registration

You will automatically be assigned a User ID, but you will create your own password. The specifications for the password are below

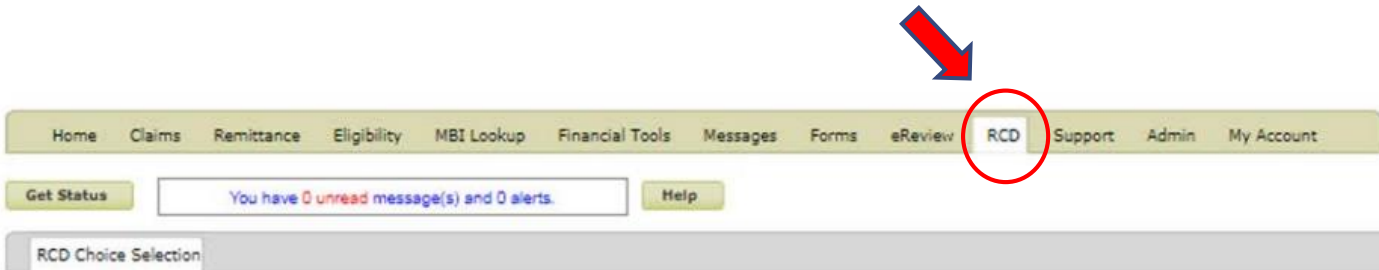
- Must be at least eight characters long
- Must contain an uppercase letter
- Must contain a lowercase letter
- Must have at least one of these special characters (@, #, or \$)
- Must contain numbers (0-9) and letters (A-Z, a-z)
- Must start with a letter
- No leading portion of first or last names may occur
- Must contain at least six changed characters from the previous password
- Must be changed every 60 days
- Cannot contain spaces
- Cannot use same password as the previous 12 passwords

# Palmetto GBA eServices: Registration

- Once you have completed these steps you will receive a validation email with a link to validate your access. Make sure you are out of your profile before you click the link.
- If you were assigned a password by your administrator (who was already registered for eServices, you will be prompted to agree to the terms of use, change your password and choose security questions.
- If this is your first time logging in, you will also be asked to establish security questions
- After these steps are complete, you can login to eServices to submit your RCD Selection

# Palmetto GBA eServices: Selection

- Once logged into eServices, you will see a series of tabs along the top. Select the tab labeled “RCD”



# Palmetto GBA eServices: Selection

## My Review Choice Selection

Please select from one of the three review choice options for medical review of your home health claims. Be sure to read each option thoroughly prior to making a selection as some selections will be locked-in for the duration of the demonstration.

For more information about this topic, please see the [Review Choice](#) category at [www.PalmettoGBA.com](http://www.PalmettoGBA.com)

The current Review Choice Selection period ends on 11/25/2018. Once this period ends you will be unable to change your choice until the next cycle (6/3/2019-6/16/2019).

The changes you make on this screen will apply to the following provider:

Contract/Region

Provider Name

Provider Number (PTAN)

National Provider Number (NPI)

### Review Choice As of 2018-10-08

**Minimal Review**

Minimal Review - 100% of claims have a 25% payment reduction. All providers who make this selection may be referred to the Recovery Audit Contractor. If this option is selected, you will remain in the option for the duration of the demonstration and will not have an opportunity to pick a different option later.

**Pre-Claim Review (PCR)**

Pre-Claim Review (PCR) - 100% of claims are reviewed prior to final claim submission. If this option is selected, you will participate in the option until the next selection period.

**Post-Payment Review**

Post Payment Review - 100% of claims are reviewed after final claim submission. If this option is selected, you will participate in the option until the next selection period.

Save

View History

Your screen will look like this in the RCD tab

Make your selection and hit "Save" to submit.

# Palmetto GBA eServices: Selection

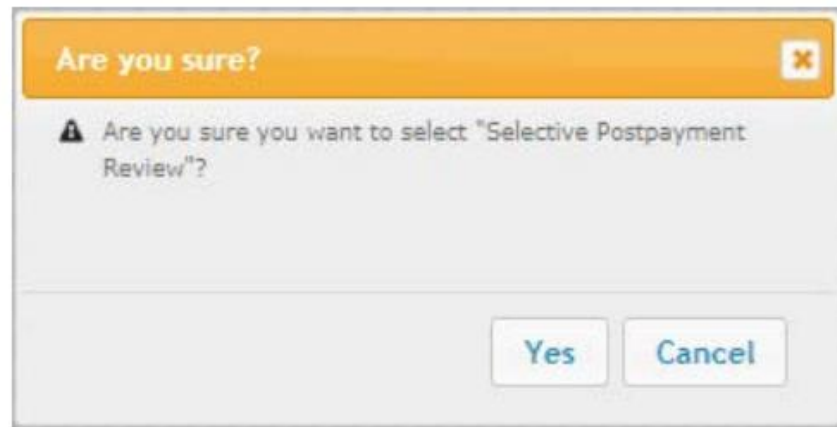
## REMINDERS

- Multiple choices can be made in a day, but the last one made will be the one recorded as the selection. You can change your selection during the selection period, but the last selection made at the end of the period (on September 15<sup>th</sup>) is the one that will be final.
- The selection choices do not appear in eServices in numerical order. For example
  - Minimal Review = Choice 3
  - Pre-Claim Review = Choice 1
  - Post-Payment Review = Choice 2

# Palmetto GBA eServices: Selection

After clicking the Save button, a pop-up message will appear asking you to confirm your choice. You can confirm the changes or click Cancel to cancel the action.

Figure 80: Review Choice Save Confirmation



# Palmetto GBA eServices: Selection

- Once you submit your selection, it will have “In Processing” next to it. It can take up to 48 hours, excluding holidays and weekends to process. For this reason, Palmetto GBA advises that you make your selections early. (The figure below includes options from round two processing, Choice 4 and 5. These do not apply to us yet)

## Review Choice As of 2018-08-02

**Selective Postpayment Review**

Selective Postpayment Review - A statistically valid percentage of claims are reviewed every 6 months. If this option is selected, you will remain in the option for the duration of the demonstration and will not have an opportunity to pick a different option later.

**Pre-Claim Review (PCR)** **In Processing**

Pre-Claim Review (PCR) - 100% of claims are reviewed prior to final claim submission. If this option is selected, you will participate in the option until the next selection period.

**Spot Check**

Spot Check - 5% of claims are reviewed after final claim submission and prior to payment. If this option is selected, you will participate in the option until the next selection period.

Save

View History

# Palmetto GBA eServices: Selection

Want more information? Review the Palmetto GBA eServices user manual,

Registration: Pages 18-22

Login: Pages 23-30

Review Choice Demonstration: Pages 103-112

<https://www.palmettogba.com/eServicesUserGuide>

**Palmetto GBA eServices Provider Contact Center**

**855-696-0705**

**Hours: 8am – 5pm**

# Save the Date!

**OHCA and Palmetto GBA Present**

## Review Choice Demonstration: Post Implementation Workshop

October 23<sup>rd</sup>, 2019

8:30 am-12:15 pm

Holiday Inn Independence

Greater Cleveland Area, OH

Just in time for claims submissions, learn proper submission protocols, lessons learned from the Illinois implementation, and ask questions of the Palmetto GBA RCD experts, CJ Sims and Charles Canaan.

All HHAs receive the OHCA Member Rate

Registration and details: <https://www.efohca.org/pages/details.aspx?id=12242>

# Thank you!

Have questions or what to know more about becoming and OHCA Home Care and Hospice member?

Contact Erin Begin at [ebegin@ohca.org](mailto:ebegin@ohca.org)

Or visit our [OHCA website](#)