Prospective Payment for Medicare Home Care

How it works

Agency completes comprehensive assessment (OASIS) and submits data

Assessment results determine Home Health Resource Group

HHRG determines payment to agency for 60 days of care (episode of care)

Agency achieves goals of Plan of Care (pt. discharged) or 60 days

Agency bills Medicare for advance payment (receives 60% of amount)

Agency secures signed plan of care from physician

Agency completes comprehensive discharge assessment and submits data

Agency submits final episode bill to CMS; paid remainder of HHRG amount

Your Medicare PPS goals as a referral source

– Effective physician involvement throughout the episode of care
– Medically appropriate, effective services
– Coordination of services
– Proven pathways
– Education and support of effective involvement in home care
– Patient satisfaction
– Effective and independent patient management of illness with MD supervision
– Good outcomes
– Programs to help patients with chronic conditions

Why Interim HealthCare®?

– We provide a careful, thorough assessment
– We develop an appropriate Plan of Care as well as goals — and secure physician approval
– We set appropriate goals and secure patient and family understanding
– We effectively assign resources
– We provide proven pathways, with outcomes based on quality improvement
– We work toward preparing the patient to manage his or her illness effectively and independently with physician supervision
– We achieve goals and good outcomes at good cost

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