HOME HEALTH DENIAL FACT SHEET

Denial Reason 5FFTF: Missing/Incomplete/Untimely Face-to-Face Encounter

What is the face-to-face encounter?	An initial (start of care) home health certification must include documentation that a physician or non-physician practitioner (NPP) had a face-to-face (FTF) encounter with the patient. The FTF encounter must be related to the primary reason for the home health admission.
What is the timeframe for the FTF encounter?	The FTF must occur within 90 days prior to the start of care (SOC) or 30 days after the SOC. The FTF documentation must confirm the encounter occurred within this timeframe.
Who can perform the FTF encounter?	The FTF must be performed by one of the following: • The certifying physician; • A physician who cared for the patient in an acute or post-acute facility during a recent stay, and has privileges at the facility; **or** • A qualified non-physician practitioner (NPP) working in conjunction with a certifying physician.
How is the FTF encounter documented?	The FTF documentation must be a separate and distinct section, or an addendum, to the SOC certification. It must include the following: • Clear title indicating a face-to-face encounter (the HHA may title); • Patient's name; • Date of the encounter; • Description of clinical findings during the encounter; • Explanation of how clinical findings support homebound status; • Explanation of how clinical findings support need for skilled care; • Certifying physician's signature and date (the HHA may enter date if not dated by physician) **Note:** A diagnosis code alone is not sufficient documentation to support homebound status or the need for skilled care. Example of **sufficient** FTF documentation: • "Homebound secondary to status post total knee, currently walker dependent with painful and unsteady ambulation. PT needed due to gait abnormality, pain, balance and range of motion issues. SN needed for medication teaching and management due to new medications and diagnosis." Examples of **insufficient** FTF documentation: • "SN for wound assessment; PT for home safety assessment." • "Homebound due to weakness; taxing effort to leave home; fall risk"

What is important to remember?	• The FTF requirement is a condition of payment. If the FTF is not done, or not documented sufficiently, claims may be denied.
	• Only the certifying physician may sign the FTF encounter documentation.
	• The FTF encounter documentation must be completed, signed and dated by the certifying physician **prior to** claim submission.
	  - HHAs should delay submitting the claim until all FTF requirements are met, and documentation has been received.
	• It is the home health agency's responsibility to:
	  - Ensure that the FTF occurs timely;
	  - Ensure that all FTF requirements are met;
	  - Ensure the physician's documentation is complete before billing.

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Where do I find more information?	• Medicare Benefit Policy Manual (CMS Pub. 100-02, Ch. 7) section 30.5.1.1 http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c07.pdf • CMS Home Health Face-to-Face Encounter Questions and Answers, http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HomeHealthPPS/Downloads/Home-Health-Questions-Answers.pdf • CGS Face-to-Face Encounters for Home Health Certification Quick Resource Tool, http://www.cgsmedicare.com/hhh/education/materials/pdf/FTF.pdf • CGS Home Health Face-to-Face Frequently Asked Questions (FAQs), http://www.cgsmedicare.com/hhh/education/faqs/FTF_FAQs.html • CGS Home Health Face-to-Face Encounter Web page, http://www.cgsmedicare.com/hhh/coverage/HH_Coverage_Guidelines/HH_FTF_encounter.html