



#### Home Health Services Frequently Asked Questions

#### What are home health services?

Home health services provide medically necessary care to an eligible Medicaid recipient whose medical condition, illness, or injury requires the care to be delivered in the recipient's place of residence or other authorized setting. These services promote, maintain, or restore health, or minimize the effects of illness and disability.

## Who is allowed to render home health services to Florida Medicaid recipients?

Florida Medicaid reimburses for home health services that are rendered by licensed, Medicaid-participating home health agencies and Medicaid enrolled or registered independent personal care providers.

Services must be rendered by providers meeting one of the following:

- Home health agencies licensed in accordance with section 408.810, F.S., and Rule Chapter 59A-8, F.A.C;
- Licensed practical nurses (LPN) licensed in accordance with Chapter 464, F.S; or
- Registered nurses (RN) licensed in accordance with Chapter 464, F.S.

### Which Florida Medicaid recipients are eligible to receive home health services?

All Florida Medicaid recipients who meet the following criteria may receive home health services:

- Are under the care of an attending physician and have a physician's order for home health services;
- Have a medical condition or disability that substantially limits their ability to perform activities of daily living (ADL) or instrumental activities of daily living (IADL), and do not have a parent or legal guardian able to provide this care; and
- Require services that can be safely, effectively, and efficiently provided in the home or other authorized setting.

#### What home health services does Florida Medicaid reimburse?

Florida Medicaid reimburses for the following services:

- Home visit services provided by a registered nurse or a licensed practical nurse;
- Home visits provided by a qualified home health aide;





- Private duty nursing for children age 20 or younger; and
- Personal care services for children age 20 or younger.

#### Where can home health reimbursement rates be found?

For a schedule of rates, visit the AHCA Web site at <u>http://ahca.myflorida.com/Medicaid/review/index.shtml</u>.

#### What claim type can home health services be billed on?

Professional (837P/CMS-1500).

## Does a Florida Medicaid provider need prior authorization to receive reimbursement for the services provided to a home health recipient?

Providers must obtain authorization from the Medicaid contracted Quality Improvement Organization (QIO) every 60 days, or more frequently if there is a change in the recipient's condition requiring an increase or decrease in authorized services.

## Who did the Agency contract as their Quality Improvement Organization?

The Agency for Health Care Administration has contracted with a certified Quality Improvement Organization (QIO), eQHealth Solutions, Inc., to provide medical necessity reviews for Medicaid home health services.

For more information on eQHealth Solutions, Inc., please visit the <u>website</u>.

### What documentation is required when submitting a prior authorization request?

The following documentation is required to be submitted with prior authorization requests:

- Physicians written prescriptions;
- Plan of care; and
- Physician Visit documentation.

### What is the home health services electronic visit verification program or EVV?

Section 409.9132, Florida Statutes (F.S.), directs the Agency for Health Care Administration (Agency) to competitively procure a vendor to operate an Electronic Visit Verification (EVV) Program of home health services provided through the fee-for-service delivery system. The EVV Program must verify the utilization and delivery of home health services (home health visits, private duty nursing, and personal care services) using technology that is effective for identifying delivery of the service and deterring fraudulent or abusive billing for the service. Also, the EVV Program must provide an electronic billing interface and require the electronic submission of claims for home health services.



### Who did the Agency contract to operate the EVV program of home health services for Florida Medicaid?

The Agency has contracted with Netsmart Technologies (vendor) to provide EVV of home health services using the AHCA EVV System (Smart Phone Mobile Application, Dashboard, and Claims Portal).

# Are Florida Medicaid home health providers required to register and use the EVV System?

Home health agency providers who render services through the fee-for-service delivery system must register, and create an EVV Dashboard profile for their home health agency in the AHCA EVV system to be able to schedule services or submit claims for reimbursement. Providers may create one initial EVV System Administrator account by going to the <u>EVV Registration</u> page.

#### Is training material available for the AHCA EVV System?

Yes, fee-for-service home health providers and caregivers are encouraged to visit the AHCA EVV website for training materials: <u>https://mobilecaregiverplus.com/training/</u>. Providers may also request one-on-one technical assistance and training by contacting the AHCA EVV Customer Support Line toll-free at 1-833-AHCA-EVV (1-833-2422-388) or online at <u>netsmartconnect.com</u>.

# Does the AHCA EVV System allow the use of EVV third-party integration?

The AHCA EVV System may allow the use of EVV third-party integration for approved integratable systems. Third-party integration means that home health providers who have an EVV system may continue to use it to capture and send EVV data to the EVV Claims system for billing. Providers who are interested in EVV third-party integration should contact the AHCA EVV Customer Support Line toll-free at 1-833-AHCA-EVV (1-833-2422-388) or online at <u>netsmartconnect.com</u>.

# Does Florida Medicaid Statewide Medicaid Managed Care (SMMC) plans cover home health services?

Florida Medicaid managed care plans must comply with the coverage requirements outlined in the Home Health Visit Services Coverage policy, unless otherwise specified in the AHCA contract with the Florida Medicaid managed care plan. The provision of services to recipients enrolled in a Florida Medicaid managed care plan must not be subject to more stringent coverage limits than specified in Florida Medicaid policies.

# Where can a provider find Florida Medicaid policy information for home health services?

Providers can find policy information in the <u>Home Health Visit Services Coverage Policy</u> <u>Adopted Rules</u>, which is available on the Agency's website.



## How do I apply to become a home health provider with Florida Medicaid?

To enroll with Florida Medicaid, please visit the Florida Medicaid public Web Portal at <u>www.mymedicaid-florida.com</u>, and navigate to <u>Provider Services > New Medicaid</u> <u>Providers</u>, to access the Online Enrollment Wizard.

#### Where can a provider find additional home health related resources?

Home health providers can visit the <u>Home Health Agencies</u> page of the AHCA website to find links to helpful resources, such as:

- State Laws & Rules;
- Surveys;
- Accrediting Organizations for Skilled Home Health Agencies;
- Licensure Application and Related Forms;
- Background Screening;
- Medicare/Medicaid;
- Emergency Management;
- DOH Instructions for Submitting Comprehensive Emergency Management Plans (CEMPs);
- Home Health Aides; and
- Alzheimer's Disease and Related Disorders Training.



#### **Contact Us**

We're here to help! Providers may contact us using the following information.



Visit the Florida Medicaid Web Portal at <u>mymedicaid-florida.com</u>.



Visit the Agency's website at <u>ahca.myflorida.com</u> to access servicespecific policies, as



Contact the Provider Services Contact Center at 1-800-289-7799, Option 7, if billing assistance is needed or to request to speak to a plan and provider services specialist.