



Care Plan Oversight

Overview: Care Plan Oversight (CPO) services are one of the major billing/revenue capturing opportunities providers leave on the table, as well as unaccounted time spent. In 2001, CMS began reimbursing physicians for CPO services, and many other commercial payers have since followed suit. CPO is the supervision of a patient under the care of HHA or Hospice who requires complex & multidisciplinary care. Follow the steps outlined below each month to report & bill for CPO services rendered.

Physician Workflow

1. Open Patient Station; access patient
2. Click *New Encounter*
3. Type = "Documentation Only"; Department = appropriate dept (e.g. FM WESTMINSTER, etc)
4. Accept
5. Chief complaint = reason for care plan (e.g. cancer, ALS, etc)
6. Review and update Allergies, History, Medications, and Problem List
7. Click *Documentation*
8. Enter **.upicpo**, or activate SmartText "**CPO AND HH CERT**" (or synonym)
9. Select "*CPO: Physician Supervision...*" appropriately; complete other documentation sections
10. Charge capture **Care Plan Oversight Services And Home Health Cert**
11. Select code G0181 or G0182 for Medicare; 99374-99380 codes for non-Medicare
12. Click *Followup*
13. Recipient = enter your name; comments = "CPO for month of ***, 20****"
14. Close encounter
15. Send any paperwork to scanning, as paperwork will be attached to the encounter

When additional CPO services are performed:

- Highlight message in "CC'd Charts" and click *QuickNote*, add additional CPO documentation using the .upicpo SmartPhrase or CPO SmartText. **DO NOT FILE** additional charges for the month.

At the end of the month (or beginning of the following)

- "Done" message, then start over at the Physician Workflow with a new encounter for the following month.

****EACH MONTH WILL REQUIRE A NEW ENCOUNTER****

Why do this?

<u>Code & Description</u>	<u>Work RVUs</u>	<u>UPI Charge</u>	<u>Medicare Payment</u>	<u>Commercial Carrier Average Payment</u>
G0181 Medicare Home Health CPO	1.73	\$ 490.00	\$ 104.57	N/A
G0182 Medicare Hospice CPO	1.73	\$ 494.00	\$105.94	N/A
99374 Home Health CPO 15-29 min./mth.	1.10	\$ 207.00	N/A	\$ 120.00
99375 Home Health CPO ≥30 min./mth.	1.73	\$ 342.00	N/A	\$ 185.00
99377 Hospice CPO 15-29 min./mth.	1.10	\$ 207.00	N/A	\$ 110.00
99378 Hospice CPO ≥30 min./mth.	1.73	\$ 349.00	N/A	\$ 200.00
99379 Nursing Home CPO 15-29 min./mth.	1.10	\$ 207.00	\$ 54.90	\$ 75.25
99380 Nursing Home CPO ≥30 min./mth.	1.73	\$ 327.00	\$ 86.41	\$ 145.00



Home Health Certification

Overview: *Care Plan Oversight (CPO) may be paid by many insurance carriers, but only if the patient is certified to receive home health services. When a provider certifies or recertifies a patient for home health services, follow the steps outlined below every 61 days to certify or recertify and bill for HH Cert/Recert.*

Physician Workflow

1. Open Patient Station; access patient
2. Click *New Encounter*
3. Type = "Documentation Only"; Department = appropriate dept (e.g. FM WESTMINSTER, etc)
4. Accept
5. Chief complaint = Home Health + any other CC's (e.g. fever, headache, etc)
6. Review and update Allergies, History, Medications, and Problem List
7. Click *Documentation*
8. Enter **.upicpo**, or activate SmartText "**CPO AND HH CERT**" (or synonym)
9. Select "HH...Initial" or "HH...Recert" in smart list; complete other documentation sections
10. Charge capture **Care Plan Oversight Services And Home Health Cert**
11. Select code G0180 for initial Cert; G0179 for Recert
12. Click *Followup*
13. Recipient = enter your name; comments = "61 day HH recert"
14. Close encounter
15. Inbasket – "CC'd Charts"
16. Right-click on message; select "Properties"
17. Click *Postpone* tab and forward 2 months (61 days); click accept
18. Refresh
19. Send HH Cert or HH Recert form and any other paperwork to scanning; the form(s) will be scanned and attached to the encounter

In 61 days:

1. Message will pop back up in "CC'd Charts"
2. "Done" message, then repeat steps above for recertification

****EACH CERT or RECERT WILL REQUIRE A NEW ENCOUNTER****

Why do this?

<u>Code & Description</u>	<u>Work RVUs</u>	<u>UPI Charge</u>	<u>Medicare Payment</u>	<u>Commercial Carrier Average Payment</u>
G0180 Home Health Initial Cert	0.67	\$ 247.00	\$52.70	\$ 75.00
G0179 Home Health Recert (billable every 61 days)	0.45	\$ 190.00	\$ 40.81	\$ 70.00



UPI Workflow: CPO & HH Cert/Recert

Overview: *There are many rules surrounding billing for CPO and HH Cert/Recert, so UPI Claims Manager team will review each of these charges, compare to documentation, then release, modify, or reverse charges according to what is documented*

UPI Claims Manager Workflow for CPO

1. Charges will be held in a workfile, reviewed by Claims Manager Coder
2. On approximately the 5th day of the following month, charges will be reviewed for prior month and reconciled against documentation to ensure appropriate amount of time is documented within the note, then charges will be released if documentation supports charge. Charge date (DOS) = last calendar day of the month (e.g. July 31st; February 28th; etc), even if last day is a weekend or holiday
3. If provider files a charge but not enough time is documented, coder will send e-log to provider with comment code #145 (NOT ENOUGH TIME)
4. If provider's documentation supports a higher level of service than the code submitted, coder will send e-log to provider with comment code #149 (CPO TIME = HIGHER LEVEL)

UPI Claims Manager Workflow for HH Cert/Recert

1. Charges will be held in a workfile, reviewed by Claims Manager Coders; edits in place to ensure 61 days between charges.
2. If provider submits a recert charge <61 days, coder will send e-log to provider with comment code #146 (HOME HEALTH <60)
3. If provider submits an "Initial Cert" charge but upon coder review it is determined the charge is for a recert, coder will send e-log to provider with comment code #147 (CODE CHANGED TO RECERT)
4. Provider will NOT be contacted if recert charge is not received. ***It is up to the provider to ensure the recert is documented and an appropriate recert charge is filed.***