

How to Bill Medicare for all Home Health Eligible Claims.

Medicare provides for 3 methods of reimbursement for Physicians who refer patients to a Medicare Certified Home Health Agency:

1. Physician Certification (Billing Code G0180)

- a. Physician Certification of Home Health Plan of Care is defined as physician services for initial certification of Medicare-covered home health services (Form 485).
- b. Reimbursement for this service is typically what Medicare pays for a level-III visit **(\$50 - \$60)**
- c. You can download Physician Guide to CPO from www.vnchha.com/MDresources.html or go to www.vnchha.com and locate **MDresources** in the footer under **Public info**

2. Physician Re-Certification (Billing Code G0179)

- a. Physician re-certification is used when the physician signs the Plan of Care (Form 485) to re-certify a patient for home health services. A physician will re-certify a patient after a 60 day certification period.
- b. Reimbursement for this service is typically greater than what Medicare pays for a level-II visit but less than a level-III visit **(\$40-\$50)**
- c. You can download Physician Guide to CPO from www.vnchha.com/MDresources.html or go to www.vnchha.com and locate **MDresources** in the footer under **Public info**

3. Physician Care Plan Oversight (CPO) (Billing Code G0181)

- a. Physicians can bill for 30 minutes of Care Plan Oversight that includes supervision of a complicated patient and requires extensive review /revision of care plans, review of laboratory or study results, phone calls to other health professionals, and other activities associated with the patient's home health care.
- b. Reimbursement for this service averages approximately **\$100**.
- c. Physician needs to keep a log in the patient's chart that shows activities and time spent. You can download this log at www.vnchha.com/MDresources.html

NOTE:

Physician claims for Certification, Re-certification and Care Plan Oversight, should be submitted on Form HCFA 1500.