



MEDICAL MUTUAL®

ReviewLink News

Medicare Advantage Home Health Care Services Effective 1/1/2017

Effective **January 1, 2017**, prior approval is required for all home health services for your patients who have Medical Mutual MedAdvantage plans. We previously only required prior approval for home health aides. We updated our Medicare Advantage Prior Authorization Requirements List for 2017 and posted it on the Medical Mutual provider portal at Provider.MedMutual.com. Click Tools & Resources > Care Management > Prior Approval & Investigational Services, then Medicare Advantage Plans (2017) to see the updated document.

As noted, prior approval is now required for the following home health services:

- Home Health Aide Services
- Home Health Skilled Nursing Visits
- Home Health Occupational Therapy
- Home Health Physical Therapy
- Home Health Speech Therapy

As part of our collaboration for discharge planning, if the member is in an inpatient status (hospital, LTAC, SNF or inpatient rehabilitation), the inpatient facility must submit the following information, via ReviewLink, for prior approval of home health care visits before services are rendered.

For observation stays, please coordinate with the HHC agency for discharge planning needs. The HHC agency is responsible to obtain prior approval for any HHC services.

- Home Health Care (HHC)
 - Services ordered
 - Initial visit must occur within 48h of discharge from the inpatient facility
 - Frequency of visits
 - Duration of HHC
 - MA network HHC agency name and phone number and contact person
 - New agency or established agency for this member
 - Clinical information to support HHC visits
 - Member and family aware and agreeable to HHC
 - Will member be discharged to other than own home? If so, contact name and phone number required.

- Durable Medical Equipment (DME)
 - Does member currently have necessary DME at home? If not,
 - Identify required DME items
 - MA network supplier of DME items, including phone number
 - Is this a new supplier or established supplier for this member?
 - Delivery date for DME
 - Family in agreement with DME delivery date

It is important that the member is utilizing providers in the Medicare Advantage network. You may access this list at <https://www.medmutual.com/About-Medical-Mutual/Find-a-Doctor.aspx>. Be sure to click on the appropriate link for Medicare Advantage PPO or Medicare Advantage HMO based on the member's policy.

After collaboration with the inpatient facility, MMO will complete this initial authorization process with the HHC agency. Prior approval for any **additional** home health care services will be obtained by the home health care agency.

Need Help? Have ReviewLink or InterQual® Criteria Questions?

- Email Robin.Bender@MedMutual.com.
- Call (855) 225-7626 or (419) 473-7198.