

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201749 JULY 25, 2017

Clarification of face-to-face encounter requirements for coverage of home health services

As announced in *Indiana Health Coverage Programs (IHCP) Bulletin [BT201723](#)*, effective May 1, 2017, the IHCP revised its coverage policy for home health services to align with the *Code of Federal Regulations 42 CFR 440 Medicaid Program; Face-to-Face Requirements for Home Health Services; Policy Changes and Clarifications Related to Home Health*. The following information is provided to further explain federal regulations and IHCP policy:

- The face-to-face encounter requirements for coverage of home health services applies to all initial orders and to all episodes initiated with the completion of a *Start-of-Care OASIS* (Outcome and Assessment Information Set) assessment.
- The face-to-face encounter requirements do not apply to recertification of home health services.
- Home and community-based services (HCBS) programs and benefits are outside the scope of this regulation and are not subject to the face-to-face encounter requirements.



QUESTIONS?

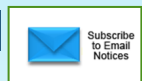
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