



Dear Home Health Provider,

Aetna Better Health of Illinois wanted to provide your organization with a reminder of upcoming Medicare changes related to the new Patient-Driven Groupings Model (PDGM). Please share this with staff and billers of your organization, as it results in significant changes related to how providers will need to bill these Home Health Prospective Payment (HH PPS) claims. We hope this will assist you when billing Aetna for Home Health claims.

In November 2018, CMS finalized this new case-mix classification model. The PDGM relies more heavily on clinical characteristics and other patient information to place home health periods of care into meaningful payment categories and eliminates the use of therapy service thresholds. In conjunction with the implementation of the PDGM, there will be a change in the unit of home health payment from a 60-day episode to a 30-day period.

Frequently Asked Questions

- Does Aetna Better Health of Illinois have plans to adopt the Patient Driven Groupings Model (PDGM) per Medicare Part A billing requirements?
Yes. We will implement the PDGM payment model for Skilled Home Health Medicare Part A billing.
- Does Aetna Better Health of Illinois plan to change the existing claim billing requirements to accommodate the new PDGM components such as the submission of a PDGM HIPPS Code and/or other information on Medicare claims?
Providers should bill using Medicare guidelines. We will use a pricing tool (Burgess) for calculating claim payments that is consistent with Medicare Fee For Service. The payment changes will be reflected in claims with Dates of Service (DOS) on or after the effective date of PDGM being implemented in our system. We will follow all contractual arrangements and negotiated arrangements regarding reimbursement. Most provider contracts are 100% Medicare allowable.
- When does Aetna Better Health of Illinois plan to implement PDGM requirements and/or changes?
Our changes will align with Medicare effective date which would be 1/1/20 Dates of Service (DOS) forward.

Additional information can be found related to the PDGM Medicare changes at the following sites:

- Details for title: CMS-1689-FC: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HomeHealthPPS/Home-Health-Prospective-Payment-System-Regulations-and-Notices-Items/CMS-1689-FC.html>
- CMS HH PPS home page: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HomeHealthPPS/HH-PDGM>

Should you have any questions related to this communication, please contact our Provider Experience department at 866-600-2139.

Sincerely,

Aetna Better Health of Illinois
Provider Experience Team