



Medicare Program Integrity Manual: CY 2024 Home Health Prospective Payment System Updates

Related CR Release Date: December 7, 2023

MLN Matters Number: MM13333 **Revised**

Effective Date: January 1, 2024

Related Change Request (CR) Number: [CR 13333](#)

Implementation Date: January 2, 2024

Related CR Transmittal Number: R12393PI

Related CR Title: Incorporation of Recent Provider Enrollment Regulatory Changes into Chapter 10 of CMS Publication (Pub. 100-08) – Home Health Prospective Payment System (HH PPS) Final Rule

What's Changed: We added information on the requirement to report all current managing employees. Substantive changes are in dark red on page 2.

Affected Providers

- Physicians
- Hospices
- Home Health Agencies (HHAs)
- Suppliers
- Other providers billing Medicare Administrative Contractors (MACs) for services they provide to Medicare patients

Action Needed

Make sure your billing staff knows about:

- Expanding the HHA 36-month rule
- Moving hospices into the high level of categorical risk-screening
- Other updates to Chapter 10 of the Medicare Program Integrity Manual

Background

The CY 2024 HH PPS [final rule](#) contains provisions about Medicare provider enrollment. These include, but aren't limited to:

- Expanding the HHA 36-month rule to include hospice changes in majority ownership
- Moving hospices into the high level of categorical risk-screening

CR 13333 updates Chapter 10 of the manual with instructions regarding these regulatory

provisions. The main manual revisions are:

- [Section 10.1.1](#): CMS revised the definition of managing employee. For purposes of this definition of managing employee, this includes, but isn't limited to, a hospice or skilled nursing facility (SNF) administrator and a hospice or SNF medical director. **Every Medicare provider and supplier must report all current managing employees. If a hospice or SNF hasn't reported a medical director or administrator as a managing employee, they must report now.**
- [Section 10.6.1.1.5](#): We added this section to give details on reporting HHA and hospice majority ownership changes occurring within 36 months after the effective date of the HHA's or hospice's initial enrollment in Medicare or within 36 months after the HHA's or hospice most recent change in majority ownership.
- [Section 10.6.15](#): We updated this section to show the revised screening requirements for hospices.

More Information

We issued CR 13333 to your MAC as the official instruction for this change.

For more information, [find your MAC's website](#).

Document History

Date of Change	Description
February 7, 2024	We added information on the requirement to report all current managing employees.
December 7, 2023	Initial article released.

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