



**Imark Billing**  
Home Health & Hospice Billing Specialists  
**Home Health FINAL Rule 2021**  
**NO PAY RAPS**  
**FAQ**  
by  
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CEO & Founder  
Home Health & Hospice Billing & Coding Specialist



\*This Webinar is for Medicare Certified Home Health Agencies

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**REQUEST FOR ANTICIPATED PAYMENT (RAP)**

**NO-PAY RAPS FOR ALL MEDICARE CERTIFIED HOME HEALTH AGENCIES EFFECTIVE JANUARY, 1, 2021**

NO PAY RAP RULE WEBINAR:  
<https://youtu.be/ULokZ65-VH4>

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**REQUEST FOR ANTICIPATED PAYMENT (RAP) 2021**

FAQ:

1. Does the SOC day count as day 1?  
A. No SOC day is considered DAY 0. So the count starts after the SOC day. For example, If the SOC date was Jan 1, 2021, then Jan 6<sup>th</sup> is day five.
2. Do we have to have the OASIS completed Before we can send out the RAP?  
A. No. Oas is does not need to be completed to be able to bill the RAP.  
The criteria to bill the RAPS are less as of Jan 1, 2021, here is the criteria:
  1. *The appropriate physician's written or verbal order that sets out the services required for the initial visit has been received and documented.*
  2. *The initial visit within the 60-day certification period has been made and the individual is admitted to HH care (SOC visit)*

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**REQUEST FOR ANTICIPATED PAYMENT  
(RAP) 2021**

**FAQ:**

- 3. Does the Verbal Order need to be signed in order to submit the RAP?  
A. No not for the RAP, however all orders still need to be signed before billing the final claim.
- 4. Is the weekend included in the 5-day RAP?  
A. Yes. Its based on calendar days.
- 5. If the RAP is late is the penalty counted and calculated from after the 5 day window?  
A. No, If there is a Penalty because the RAP is submitted after the 5 day window, the penalty will be a daily rate starting on the "from date" (day 0) of the claim.

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**REQUEST FOR ANTICIPATED PAYMENT  
(RAP) 2021**

**FAQ:**

- 6. Do we need to submit a RAP for LUPA?  
A. Per Medicare, if there is a LUPA and there is no RAP on file, the claim will pay normally, and no penalty will be applied.
- 7. For the 2<sup>nd</sup> Period RAP, what is the date considered for the 5 day window and do we need a 1<sup>st</sup> billable visit?  
A. The RAP for the 2<sup>nd</sup> period uses the "Start of that period" as the date (the "From date" of that period). A billable visit is not required to bill the 2<sup>nd</sup> Period RAP.  
A. You may submit the RAP for Both the 1<sup>st</sup> and 2<sup>nd</sup> Periods at the same time and the beginning of the episode.

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**REQUEST FOR ANTICIPATED PAYMENT  
(RAP) 2021**

**FAQ:**

- 8. Does the Hipps Code on the RAP and FINAL need to match?  
A. Yes, they do need to match. However, Medicare will base our payments from the Hipps code that is submitted to IQIES on the OASIS.
- 9. If we bill an HMO plan and a few weeks later its denied by the HMO because the patient was on traditional Medicare but the eligibility was not updated, so we didn't submit the RAP to Medicare, how is that handled?  
A. CMS states, that insurance changes that were not updated timely in the eligibility system should be an exception to the penalty. Agencies would need to prove this.

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**REQUEST FOR ANTICIPATED PAYMENT  
(RAP) 2021**

**FAQ:**

10. Does the Verbal order need to have a Dx code on it?  
A. No, you will only need an acceptable PDGM primary Dx code on the RAP.
11. When is the KX modifier used?  
A. Its used on the FINAL claim only to request an exception for a RAP submitted late. Medicare will grant or not grant the exception based on the remarks on the claim and the specific circumstances. There are only 4 reason for an exception:
- Fires, floods, earthquakes, or other unusual events that inflict extensive damage to the HHA's ability to operate;
  - An event that produces a data filing problem due to a CMS or MAC systems issue beyond the control of the HHA;
  - A newly Medicare-certified HHA that is notified of that certification after the Medicare certification date, or which is awaiting its user ID from its MAC; or
  - Other circumstances determined by CMS to be beyond the control of the HHA

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**REQUEST FOR ANTICIPATED PAYMENT  
(RAP) 2021**

**FAQ:**

12. Can RAPs be submitted with a generic HIPPS Code?  
A. Yes, if the OASIS has not been completed a generic HIPPS code will be used on the claim.
13. Does the POC have to be sent to the Physician?  
A. No, the Plan of Care does NOT need to be submitted to be able to bill the RAP

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**REQUEST FOR ANTICIPATED PAYMENT  
(RAP) 2021**

**Key Take Always:**

- Patient Demographics
- Episode set to "Admit Status" in software
- Primary DX code
- Hipps code (place holder)
  - Note Hipps code between rap and final need to match, however they will calculate the HIPPS code separately with their own data before paying the final claim
- SOC visit performed and entered into the software schedule

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Thank You for Attending



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