



Face to Face Encounter (F2F) Check-list

"TO DO" items to assist you in preparation for implementation of rule:

- Familiarize yourself with this new rule. The rule - §424.22(a)(1)(v) - can be found at the *Federal Register*: <http://edocket.access.gpo.gov/2010/pdf/2010-27778.pdf> . See pg #70464 (pg 94 of the *pdf*) for the F2F rule itself and pg #70427 (pg 57 of the *pdf*) for the discussion of comments on this section.
- Determine how you will educate your *physicians*: letters? faxes? both? Will you empower liaisons and outreach staff to make rounds to MD offices with written information on this new rule?
- Determine how you will educate your *referral sources*. Will you send letters to discharge planners, local ServiceLink offices, and Assisted Living Facilities? Who else?
- Develop a training plan for your staff. Educate your intake staff thoroughly on this new rule. Educate your clinicians, case managers, and don't forget your billing staff.
- Develop and implement new procedures for your Pre-Billing Audits to include the date and attestation for the face to face encounter.
- Work with your point of care vendor on implementing the attestation of the face to face encounter. Do this NOW as new programming can take time.
- Develop an alternative method of complying with the attestation and date of face to face visit in case your software vendor is not ready OR if you do not have a point of care system.
- Develop internal systems to audit for compliance, including checks for inclusion of the *date* of the face to face encounter and *proper documentation* in the attestation of the encounter. **Remember, CMS has been very clear that agencies cannot provide a template to assist the physician in completing this process!** However, per CMS, you can label the section of the plan of care or addendum where the physician's documentation should be placed, titling it and including sub-headings such as Date of Encounter, Medical Condition for Encounter, Services Needed, Clinical Findings, Homebound Status, Physician Signature, Date of Signature.
- Determine how this will impact your agency Acceptance and Admission policies. Will you hold admissions until the patient has been seen by the attending physician?
- Determine how you will handle a situation in which a patient agrees to have a face-to-face visit, and then on day 30 post-start of care refuses to comply or has simply failed to do so?
- Prepare to answer questions from upset and concerned physicians about this new rule.
- Monitor referral patterns closely to assess for changes and focus follow-up contacts accordingly.
- Determine how your finance office will handle any visits that you have provided and that you can't bill for if the patient does not see the physician within the specified time frame. Remember, you are not allowed to bill the client for care provided under the plan of care if you are unable to certify the patient.
- Pick up the phone, write a letter or email your Congressional representatives to educate them regarding the hardship this rule is causing in time, money and access to care for your patients. Ask them to postpone enforcement of the rule for at least 6-12 months.**