

## Home Health Agencies

Home Health Agencies (HHAs) have recently been a major area of focus for HHS-OIG and CMS. In fact, the new screening requirements mandated by the Affordable Care Act place HHAs in the "high risk" category. Moreover, RACs, PSCs and ZPICs have been aggressively auditing HHAs and identifying two main areas of concern.

- Homebound status: Many home health claims are being denied because Medicare contractors believe that a patient was able to leave his or her home without a "considerable and taxing effort" or other such difficulties.
- Medical need: Claims are also denied based on the belief that there was no medical need for skilled nursing services.

Contractors often use beneficiary interviews, sometimes taking place up to two years after the care was provided, as justification for their denials. Liles Parker is experienced in aggressively defending HHA claims and fighting the extrapolation of damages associated with these audits. Often times, the medical record documentation tells a very different story than the one these contractors rely upon. Only by appealing your HHA claims through the administrative process can you get an in-person hearing to discuss the validity of the services you provided.

**Our attorneys can help guide you through the process. Call now for a free consultation.**