

# Local Coverage Article: Waiver of Face-to-Face Visit for Home Dialysis Patients (A55058)

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## Contractor Information

<b>Contractor Name</b>	<b>Contract Type</b>	<b>Contract Number</b>	<b>Jurisdiction</b>	<b>State(s)</b>
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01111 - MAC A	J - E	California - Entire State
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01112 - MAC B	J - E	California - Northern
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01182 - MAC B	J - E	California - Southern American Samoa
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01211 - MAC A	J - E	Guam Hawaii Northern Mariana Islands American Samoa
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01212 - MAC B	J - E	Guam Hawaii Northern Mariana Islands
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01311 - MAC A	J - E	Nevada
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01312 - MAC B	J - E	Nevada American Samoa California - Entire State
<a href="#">Noridian Healthcare Solutions, LLC</a>	A and B MAC	01911 - MAC A	J - E	Guam Hawaii Nevada Northern Mariana Islands

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## Article Information

### General Information

<b>Article ID</b> A55058	<b>Original Article Effective Date</b> 07/07/2016
<b>Article Title</b> Waiver of Face-to-Face Visit for Home Dialysis Patients	<b>Revision Effective Date</b> N/A
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	<b>Retirement Date</b> N/A

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## Article Guidance

### Article Text:

Physician management services for patients on dialysis are usually paid for a full month of management services. For in-center dialysis patients, this is billed and paid based on the number of face-to-face visits made during the month and the age bracket of the patient. For home dialysis patients there is a single fee based on the age bracket of the patient. Medicare requires that physicians billing this service must provide certain minimal services including at least one face-to-face visit each month to assess the condition of the vascular access.

Since 2011, CMS has allowed payment of the ESRD Monthly Capitation (MCP) for certain home dialysis patients even when the physician has not actually had a face-to-face visit; this requires an individual waiver at contractor discretion (IOM 100-04, Chapter 8, Section 140.1.1). Starting July 7, 2016, physicians may request this waiver by appending the -52 modifier (reduced services) to the appropriate monthly capitation CPT code (90963 – 90966).

Place the words, "No Face-to-Face" in Item 19 (or electronic equivalent). Noridian may request medical records to assess whether the notes support that the **physician actively and adequately managed the care of the home dialysis patient throughout the month**. Noridian expects that requests for these waivers will be unusual.

**References:** Internet Only Manual (IOM), Publication 100-04, *Medicare Claims Processing Manual*, Chapter 8, Section 140.1.1 at [MCPM](#)  
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## Coding Information

### Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the article does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the article should be assumed to apply equally to all claims.

### Bill Type Code Bill Type Description

0x TBD

### Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to  
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apply equally to all Revenue Codes.

N/A

**CPT/HCPCS Codes** N/A

**ICD-10 Codes that are Covered** N/A

**ICD-10 Codes that are Not Covered** N/A

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## **Revision History Information**

N/A [Back to Top](#) **Related Local Coverage Document(s)** N/A

**Related National Coverage Document(s)** N/A

**Statutory Requirements URL(s)** N/A

**Rules and Regulations URL(s)** N/A

**CMS Manual Explanations URL(s)** N/A

**Other URL(s)** N/A

**Public Version(s)** Updated on 05/13/2016 with effective dates 07/07/2016 - N/A [Back to Top](#)

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## **Keywords**

- ESRD
- Monthly Capitation
- MCP
- 90963
- 90964
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- 90966
- waiver
- face to face
- home visit
- dialysis

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