



PPS Calculator 2008 User Tips

1. Begin your analysis by printing the HCS Resource Material or pulling out your own copy of the proposed regulations. The changes can be confusing, and it's helpful to have this information readily available while analyzing data.
2. The payment calculation on the right side of the Calculator screen shows:
 - a. the scoring or points applicable to your responses
 - b. the corresponding HHRG with "G" in 2008 representing the Group or Equation and "N" in 2008 representing the Non-Routine Supply Payment, *and*
 - c. the corresponding HIPPS code
3. The **Enter** key can be used to calculate payment as you enter or change information. Use the mouse to click changes to OASIS questions and the **Enter** key to see the specific payment change for each OASIS or therapy difference.
4. The "(M0826) Therapy Visits" Box has two parts. The first part is the response to M0825 from the current methodology. (The 2007 payment calculation drives solely off of this response. I.E. If you check this box, it will calculate your 2007 HHRG payment as if the agency provided ten or more therapy visits.) The second part is the actual number of therapy visits. This number drives the calculation of the HHRG payment under 2008. When populating the Calculator directly from HAVEN information, a "yes" answer to M0825 will populate as both a checked M0826 box and 10 therapy visits. The user will then need to adjust this to actual remembering to uncheck the box if ten or more therapy visits were not completed.
5. Significant Changes in Condition (SCICs) – as you probably know by now, SCICs will not be a part of the new system. While current legislation still requires completion of the assessments, they will no longer be billed. When analyzing your agency's information, the impact on SCIC episodes can be determined by comparing SCIC payments to the OASIS information from the initial episode assessment, actual therapy visits and whether it was an early or late episode with no adjustment for the SCIC assessment information. In many cases, these episodes fare better without the billing of the SCIC because you're getting full credit for the number of therapy visits provided.
6. The PPS Calculator 2008 was developed for use with episodes beginning in 2007. As such, it does not include the rural add-on for rural CBSA episodes that ended but did not begin in the first two months of 2007.
7. For HCS Connect® users, the easiest method of analysis is to use the detail report from your monthly statistical book or to request a separate detail report from

HCS. This will provide you with the assessment dates, the actual therapy visits by episode and CBSA codes necessary to perform your analysis.

8. You can't break it. The easiest way to understand how it works is to play. If you're populating from HAVEN, pull a patient's assessment in and then adjust each of the answers to see the impact. If you're not populating from HAVEN, just enter your CBSA and then answer the questions calculating between each response to see the incremental changes. Remember that HCS staff are available at (877) 296-0074 should you have questions concerning this product.