



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS

16401 EAST CENTRETECH PARKWAY
AURORA, COLORADO 80011-9066

TRICARE
MANAGEMENT ACTIVITY

MB&RS

CHANGE 72
6010.55-M
FEBRUARY 28, 2008

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FOR
TRICARE REIMBURSEMENT MANUAL (TRM)

The TRICARE Management Activity has authorized the following addition(s)/
revision(s) to the 6010.55-M, issued August 2002.

CHANGE TITLE: CALENDAR YEAR (CY) 2008 UPDATES TO THE TRICARE
HOME HEALTH PROSPECTIVE PAYMENT SYSTEM
(HH PPS)

PAGE CHANGE(S): See page 2.

SUMMARY OF CHANGE(S): See page 4.

EFFECTIVE DATE: January 1, 2008.

IMPLEMENTATION DATE: Upon direction of the Contracting Officer.

This change is made in conjunction with Aug 2002 TSM, Change No. 55.


Reta Michak
Chief, Office of Medical Benefits
and Reimbursement Systems

ATTACHMENT(S): 313 PAGE(S)

DISTRIBUTION: 6010.55-M

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SUMMARY OF CHANGES

1. Implementation of a refined 4-equation case-mix model that recognizes and differentiates payment for episodes of care based on whether a patient is in what is considered to be an early (first and second episode in a sequence of adjacent episodes) or late (the third episode and beyond in a sequence of adjacent episodes) episode of care as well as recognizing whether a patient was a high therapy (14 or more therapy visits) or low therapy (13 or fewer therapy visits).
2. Change in labor related and non-labor related share of HH PPS rates.
3. National 60-day episode payment amount update for CY 2008.
4. Change in Non-Routine Supply (NRS) payment.
5. Add-on payments for Low Utilization Payment Adjustments (LUPAs) that occur as initial episodes or as the only episodes.
6. National updated per visit amounts used to pay LUPAs and compute imputed costs in outlier calculations.