

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 12911</b>	<b>Date: October 24, 2024</b>
	<b>Change Request 13838</b>

**NOTE: This Transmittal is no longer sensitive and is being re-communicated November 7, 2024. The Transmittal Number, date of Transmittal and all other information remains the same. This instruction may now be posted to the Internet.**

**SUBJECT: Home Health Prospective Payment System (HH PPS) Rate Update for Calendar Year (CY) 2025**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to update the CY 2025 30-day period payment rates, the national per-visit amounts, the separate payment amount for a disposable negative pressure wound device (dNPWT), and the cost-per-unit payment amounts used for calculating outlier payments under the HH PPS. The attached recurring update notification applies to Pub. 100-04, Medicare Claims Processing Manual, chapter 10, section 70.5.

**EFFECTIVE DATE: January 1, 2025**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: January 6, 2025**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	N/A

**III. FUNDING:**

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**Recurring Update Notification**

# Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 12911	Date: October 24, 2024	Change Request: 13838
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## **II. GENERAL INFORMATION**

**A. Background:** The Medicare Home Health Prospective Payment System (HH PPS) rates provided to Home Health Agencies (HHAs) for furnishing home health services are updated annually as required by section 1895(b)(3)(B) of the Social Security Act (the Act). The Calendar Year (CY) 2025 HH PPS rate update includes a change to the 30-day period payment rates, the national per-visit amounts, the separate payment amount for a disposable negative pressure wound device (dNPWT), and the cost-per-unit payment amounts used for calculating outlier payments under the HH PPS.

**B. Policy:** Section 1895(b)(3)(B) of the Act requires that the standard prospective payment amounts for CY 2025 be increased by a factor equal to the applicable home health market basket update for those HHAs that submit quality data as required by the Secretary. Section 1895(b)(3)(B)(v) of the Act requires that the home health update be decreased by two (2) percentage points for those HHAs that do not submit quality data as required by the Secretary. Section 1886(b)(3)(B)(xi)(II) of the Act defines the productivity adjustment to be equal to the 10-year moving average of change in annual economy-wide private nonfarm business Multi-Factor Productivity (MFP) (as projected by the Secretary for the 10-year period ending with the applicable fiscal year, calendar year, cost reporting period, or other annual period) (the “MFP adjustment”). Sections 1895(b)(4)(A)(ii) and (b)(4)(C) of the Act require the Secretary to provide appropriate adjustments to the proportion of the payment amount under the HH PPS that account for area wage differences, using adjustment factors that reflect the relative level of wages and wage-related costs applicable to the furnishing of HH services.

Section 1895(b)(3)(D)(i) of the Act requires the Secretary to annually determine the impact of differences between assumed behavior changes, as described in section 1895(b)(3)(A)(iv) of the Act, and actual behavior changes on estimated aggregate expenditures under the HH PPS with respect to years beginning with 2020 and ending with 2026. Section 1895(b)(3)(D)(ii) of the Act requires the Secretary, at a time and in a manner determined appropriate, through notice and comment rulemaking, to provide for one or more permanent increases or decreases to the standard prospective payment amount (or amounts) for applicable years, on a

prospective basis, to offset for such increases or decreases in estimated aggregate expenditures, as determined under section 1895(b)(3)(D)(i) of the Act.

### Market Basket Update

In the CY 2024 HH PPS final rule, CMS finalized a policy to rebase and revise the home health market basket to reflect a 2021 base year and finalized revisions to the labor-related share to reflect the compensation cost weight of the 2021-based home health market basket of 74.9 percent and the non-labor-related share of 25.1 percent.

Based on IHS Global Insight Inc.'s third-quarter 2024 forecast (with historical data through second quarter 2024), the home health market basket percentage increase for CY 2025 is, specified at section 1895(b)(3)(B)(iii) of the Act, 3.2 percent. The CY 2025 home health market basket percentage increase of 3.2 percent is then reduced by a productivity adjustment, as mandated by the section 3401 of the Patient Protection and Affordable Care Act (the Affordable Care Act) (Pub. L. 111-148), currently estimated to be 0.5 percentage point for CY 2025. In effect, the home health market basket percentage for CY 2025 is a 2.7 percent increase. Section 1895(b)(3)(B)(v) of the Act requires that the home health market basket percentage increase be decreased by 2 percentage points for those HHAs that do not submit quality data as required by the Secretary. For HHAs that do not submit the required quality data for CY 2025, the home health market basket percentage increase is 0.7 percent (2.7 percent minus 2 percentage points).

### National, Standardized 30-Day Period Payment

As described in the CY 2025 HH PPS final rule, we are required to implement a permanent payment adjustment to the national 30-day payment rate based on the impact of differences between assumed versus actual behavior change, in accordance with Sections 1895(b)(3)(D)(ii) and (iii) to offset for such increases or decreases in estimated aggregate expenditures. We are implementing a permanent behavior adjustment of -1.975 percent to prevent further overpayments. The permanent behavior adjustment factor is 0.98025 (1 - .01975). To calculate the CY 2025 national, standardized 30-day period payment rate, CMS applies a permanent behavioral adjustment factor of 0.98025, a case-mix weights recalibration budget neutrality factor of 1.0039, a wage index budget neutrality factor of 0.9988 and the CY 2025 home health payment update percentage of 2.7 percent.

The CY 2025 30-day payment rates are shown in Tables 1 and 2. The CY 2025 national, standardized 30-day period payment rates are further adjusted by the individual period's case-mix weight and by the applicable wage index.

### National Per-Visit Rates

To calculate the CY 2025 national per-visit rates, CMS started with the CY 2024 national per-visit rate. CMS applies a wage index budget neutrality factor of 0.9989 to ensure budget neutrality for Low-Utilization Payment Adjustment (LUPA) per-visit payments after applying the CY 2025 wage index. The per-visit rates are then updated by the CY 2025 home health market basket percentage increase of 2.7 percent for HHAs that submit the required quality data and by 0.7 percent (2.7 percent minus 2 percentage points) for HHAs that do not submit quality data. The per-visit rates are shown in Tables 3 and 4.

### Non-Routine Supply Payments

Payment for Non-Routine Supplies (NRS) is part of the national, standardized 30-day period rate. Durable medical equipment provided as a home health service as defined in section 1861(m) of the Act is paid the fee schedule amount and is not included in the national, standardized 30-day period payment amount.

### Outlier Payments

The Fixed Dollar Loss (FDL) ratio and the loss-sharing ratio used to calculate outlier payments must be selected so that the estimated total outlier payments do not exceed the 2.5 percent aggregate level (as required by section 1895(b)(5)(A) of the Act). Historically, CMS has used a value of 0.80 for the loss-sharing ratio which CMS believes, preserves incentives for agencies to attempt to provide care efficiently for outlier cases. With a loss-sharing ratio of 0.80, Medicare pays 80 percent of the additional estimated costs above the outlier threshold amount. The CY 2025 fixed-dollar loss ratio is 0.35 to ensure the total outlier payments do not exceed 2.5 percent of the total payments estimated to be made under the HH PPS.

In the CY 2019 HH PPS final rule with comment period (83 FR 56521), CMS finalized a policy to maintain the current methodology for payment of high-cost outliers upon implementation of the Patient-Driven Groupings Model (PDGM) beginning in CY 2020 and that CMS will calculate payment for high-cost outliers based upon 30-day periods of care. The cost-per-unit rates used for the calculation of outlier payments are shown in Table 5.

### Home Health PPS Wage Index

In the CY 2023 HH PPS final rule, we finalized the application of a permanent 5-percent cap on any decrease to a geographic area's wage index from its wage index in the prior year, regardless of the circumstances causing the decline beginning in CY 2023. That is, we finalized that a geographic area's wage index for CY 2023 and subsequent years, would not be less than 95 percent of its wage index calculated in the prior CY.

On July 21, 2023, OMB issued Bulletin No. 23-01, which establishes revised delineations for the MSAs, Micropolitan Statistical Areas, Combined Statistical Areas, and Metropolitan Divisions, collectively referred to as Core Based Statistical Areas (CBSAs) and guidance on uses of the delineation in these areas. These revisions will be incorporated into the HH PPS wage index for CY 2025.

For CY 2025, as a transition to help mitigate any significant negative impacts that HHAs may experience due to the adoption of the revised OMB delineations, the permanent 5-percent cap on decreases will be calculated on the county level as well as the CBSA level, so that individual counties moving to a new delineation would not experience more than a 5 percent decrease in wage index from the previous calendar year. Due to the way that we calculate the 5-percent cap for counties that experience an OMB designation change, some CBSAs and statewide rural areas could have more than one wage index value because of the potential for their constituent counties to have different wage index values as a result of application of the 5-percent cap. Specifically, some counties that change OMB designations would have a wage index value that is different than the wage index value assigned to the other constituent counties that make up the CBSA or statewide rural area that they are moving into because of the application of the 5-percent cap. However, for home health claims processing, each CBSA or statewide rural area can have only one wage index value assigned to that CBSA or statewide rural area. Therefore, HHAs that serve beneficiaries in a county that receives the cap will need to use a number other than the CBSA or statewide rural area number to identify the county's appropriate wage index value for home health claims in CY 2025. Beginning in CY 2025, counties that have a different wage index value than the CBSA or rural area into which they are designated after the application of the 5-percent cap will use a wage index transition code. These special codes are five digits in length and begin with "50." The 50xxx wage index transition codes will be used only in specific counties; counties located in CBSAs and rural areas that do not correspond to a different transition wage index value will still use the CBSA number.

The counties that will require a transition code beginning in CY 2025 are listed in Table 6.

These special 50xxx codes are also shown in the CY 2025 HH PPS wage index file located at <https://www.cms.gov/medicare/payment/prospective-payment-systems/home-health-pps/home-health-pps-wage-index>.

### Low-Utilization Payment Adjustment (LUPA) Add-On factors

In the CY 2019 HH PPS final rule with comment period (83 FR 56440), we finalized our policy of continuing to multiply the per-visit payment amount for the first skilled nursing (SN), physical therapy (PT), or speech-language pathology (SLP) visit in LUPA periods that occur as the only period of care or the initial 30-day period of care in a sequence of adjacent 30-day periods of care by the appropriate add-on factor (1.8451 for SN, 1.6700 for PT, and 1.6266 for SLP) to determine the LUPA add-on payment amount for 30-day periods of care under the PDGM.

In order to implement Division CC, section 115, of the Consolidation Appropriations Act (CAA), 2021, CMS finalized changes to regulations at §484.55(a)(2) and (b)(3) that allowed occupational therapists to conduct initial and comprehensive assessments for all Medicare beneficiaries under the home health benefit when the plan of care does not initially include skilled nursing care, but included OT, as well as either PT or SLP (86 FR 62351). In the CY 2022 HH PPS final rule (86 FR 62289), there was not sufficient data regarding the average excess of minutes for the first visit in LUPA periods when the initial and comprehensive assessments are conducted by occupational therapists. Therefore, we finalized a policy using the PT LUPA add-on factor of 1.6700 as a proxy.

In the CY 2025 HH PPS final rule we finalized the proposal to update the LUPA add-on factors for skilled nursing, physical therapy and speech language pathology. We also finalized the proposal to discontinue use of the PT LUPA add-on factor as a proxy and established a discrete OT LUPA add-on factor.

The updated LUPA add-on factors are shown in table 7.

#### Disposable Negative Pressure Wound Therapy Device

Division FF, section 4136 of the Consolidated Appropriations Act of 2023 (CAA, 2023) (Pub. L.117-328) mandates that beginning in CY 2024, the separate payment amount for an applicable disposable Negative Pressure Wound Therapy (dNPWT) device would be set equal to the supply price used to determine the relative value for the service under the Physician Fee Schedule (PFS) under section 1848 as of January 1, 2022 (CY 2022) updated by the specified adjustment described in subparagraph (B) for such year. Division FF section 4136 of the CAA, 2023 also adds a new subparagraph 1834(s)(3)(B), which requires that the separate payment amount to be adjusted by the percent increase in the Consumer Price Index for all Urban consumers (CPI-U) for the 12-month period ending with June of the preceding year minus the productivity adjustment described in section 1886(b)(3)(B)(xi)(II) for such year. For 2025 and each subsequent year, the CAA, 2023 requires that the separate payment amount will be set equal to the payment amount established for the device in the previous year, updated by the percent increase in the Consumer Price Index for all Urban consumers (CPI-U) for the 12-month period ending with June of the preceding year minus the productivity adjustment described in section 1886(b)(3)(B)(xi)(II) for such year.

The CPI-U for the 12-month period ending in June of 2024 is 3.0 percent and the corresponding productivity adjustment is 0.6 percent based on IHS Global Inc.'s third-quarter 2024 forecast of the CY 2025 productivity adjustment which reflects the 10-year moving average of changes in annual economy-wide private nonfarm business TFP for the period ending June 30, 2024, which results in a final update of 2.4 percent. Therefore, the CY 2025 final payment amount for an applicable dNPWT device will be \$276.57 which is the CY 2024 rate of \$270.09 updated by the 2.4 percent final update percentage as shown in Table 8.

See CR 13244 for more information on claims processing procedures for dNPWT.

### **III. BUSINESS REQUIREMENTS TABLE**

*"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.*

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13838.1	Contractors shall access the HH PPS Pricer via the Cloud to pay calendar year 2025 payment rates on claims with “Through” dates on or after January 1, 2025.			X						HH Pricer
13838.2	The contractor shall apply the CY 2025 HH PPS payment rates for periods with claim statement "Through" dates on or after January 1, 2025.									HH Pricer
13838.3	The contractor shall use the table of wage index values associated with CBSA codes or special 500xx codes for CY 2025 home health payment calculations.									HH Pricer
13838.4	The contractor shall instruct providers to submit the CBSA code or special 500xx codes corresponding to the state and county of the beneficiary's place of residence in value code 61 on home health claims.			X						

#### IV. PROVIDER EDUCATION

Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don’t need to separately track and report MLN content releases. You may supplement with your local educational content after we release the newsletter.

**Impacted Contractors:** A/B MAC Part HHH

#### V. SUPPORTING INFORMATION

**Section A: Recommendations and supporting information associated with listed requirements:** N/A

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:
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**Section B: All other recommendations and supporting information:**N/A

## **VI. CONTACTS**

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR).

## **VII. FUNDING**

### **Section A: For Medicare Administrative Contractors (MACs):**

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**ATTACHMENTS: 1**



**TABLE 1: CY 2025 NATIONAL, STANDARDIZED 30-DAY PERIOD PAYMENT AMOUNT**

<b>CY 2024 National Standardized 30-Day Period Payment</b>	<b>CY 2025 Permanent BA Adjustment Factor</b>	<b>CY 2025 Case-Mix Weights Recalibration Neutrality Factor</b>	<b>CY 2025 Wage Index Budget Neutrality Factor</b>	<b>CY 2025 Final HH Payment Update</b>	<b>CY 2025 National, Standardized 30-Day Period Payment</b>
\$2,038.13	0.98025	1.0039	0.9988	1.027	\$2,057.35

**TABLE 2: CY 2025 NATIONAL, STANDARDIZED 30-DAY PERIOD PAYMENT AMOUNT FOR HHAS THAT DO NOT SUBMIT THE QUALITY DATA**

<b>CY 2024 National Standardized 30-Day Period Payment</b>	<b>CY 2025 Permanent BA Adjustment Factor</b>	<b>CY 2025 Case-Mix Weights Recalibration Neutrality Factor</b>	<b>CY 2025 Wage Index Budget Neutrality Factor</b>	<b>CY 2025 Final HH Payment Update Minus 2 Percentage Points</b>	<b>CY 2025 National, Standardized 30-Day Period Payment</b>
\$2,038.13	0.98025	1.0039	0.9988	1.007	\$2,017.28

**TABLE 3: CY 2025 NATIONAL PER-VISIT PAYMENT AMOUNTS**

<b>HH Discipline</b>	<b>CY 2024 Per-Visit Payment Amount</b>	<b>CY 2025 Wage Index Budget Neutrality Factor</b>	<b>CY 2025 Final HH Payment Update</b>	<b>CY 2025 Per-Visit Payment Amount</b>
Home Health Aide	\$76.23	0.9989	1.0270	\$78.20
Medical Social Services	\$269.87	0.9989	1.0270	\$276.85
Occupational Therapy	\$185.29	0.9989	1.0270	\$190.08
Physical Therapy	\$184.03	0.9989	1.0270	\$188.79
Skilled Nursing	\$168.37	0.9989	1.0270	\$172.73
Speech-Language Pathology	\$200.04	0.9989	1.0270	\$205.22

**TABLE 4: CY 2025 NATIONAL PER-VISIT PAYMENT AMOUNTS FOR HHAS THAT DO NOT SUBMIT THE REQUIRED QUALITY DATA**

HH Discipline	CY 2024 Per-Visit Payment Amount	CY 2025 Wage Index Budget Neutrality Factor	CY 2025 Final HH Payment Update Minus 2 Percentage Points	CY 2025 Per-Visit Payment Amount
Home Health Aide	\$76.23	0.9989	1.0070	\$76.68
Medical Social Services	\$269.87	0.9989	1.0070	\$271.46
Occupational Therapy	\$185.29	0.9989	1.0070	\$186.38
Physical Therapy	\$184.03	0.9989	1.0070	\$185.11
Skilled Nursing	\$168.37	0.9989	1.0070	\$169.36
Speech-Language Pathology	\$200.04	0.9989	1.0070	\$201.22

**TABLE 5: CY 2024 COST-PER-UNIT PAYMENT RATES FOR THE CALCULATION OF OUTLIER PAYMENTS**

		For HHAs that DO Submit the Required Quality Data		For HHAs that DO NOT Submit the Required Quality Data	
HH Discipline	Average Minutes Per-Visit	CY 2025 Per-Visit Payment	Cost-per-unit (1 unit= 15 minutes)	CY 2025 Per-Visit Payment	Cost-per-unit (1 unit= 15 minutes)
Home Health Aide	63.0	\$78.20	\$18.62	\$76.68	\$18.26
Medical Social Services	56.5	\$276.85	\$73.50	\$271.46	\$72.07
Occupational Therapy	47.1	\$190.08	\$60.54	\$186.38	\$59.36
Physical Therapy	46.6	\$188.79	\$60.77	\$185.11	\$59.58
Skilled Nursing	44.8	\$172.73	\$57.83	\$169.36	\$56.71
Speech- Language Pathology	48.1	\$205.22	\$64.00	\$201.22	\$62.75

**TABLE 6: LIST OF COUNTIES THAT MUST USE 50XXX CODES FOR CY 2025 DUE TO THE 5- PERCENT CAP ON WAGE INDEX DECREASES**

FIPS County Code	County Name	CY 2024 CBSA	CY 2024 CBSA Name	Redesignated CBSA or rural Area	CY 2025 CBSA NAME	CY 2025 Transition Code
01129	WASHINGTON	33660	Mobile, AL	99901	ALABAMA	50001
05047	FRANKLIN	22900	Fort Smith, AR-OK	99904	ARKANSAS	50002

09150	NORTHEASTERN CONNECTICUT	49340	Worcester, MA-CT	99907	CONNECTICUT	50003
13171	LAMAR	12060	Atlanta-Sandy Springs-Alpharetta, GA	99911	GEORGIA	50004
15005	KALAWAO	99912	HAWAII	27980	Kahului-Wailuku, HI	50005
16077	POWER	38540	Pocatello, ID	99913	IDAHO	50006
17183	VERMILION	19180	Danville, IL	99914	ILLINOIS	50007
18133	PUTNAM	26900	Indianapolis-Carmel-Anderson, IN	99915	INDIANA	50008
21101	HENDERSON	21780	Evansville, IN-KY	99918	KENTUCKY	50009
22045	IBERIA	29180	Lafayette, LA	99919	LOUISIANA	50010
24009	CALVERT	47894	Washington-Arlington-Alexandria, DC-VA-MD-WV	30500	Lexington Park, MD	50011
24047	WORCESTER	41540	Salisbury, MD-DE	99921	MARYLAND	50012
25011	FRANKLIN	44140	Springfield, MA	99922	MASSACHUSETTS	50013
26155	SHIAWASSEE	29620	Lansing-East Lansing, MI	99923	MICHIGAN	50014
27075	LAKE	20260	Duluth, MN-WI	99924	MINNESOTA	50015
27133	ROCK	99924	MINNESOTA	43620	Sioux Falls, SD-MN	50016
32019	LYON	99929	NEVADA	39900	Reno, NV	50017
34009	CAPE MAY	36140	Ocean City, NJ	12100	Atlantic City-Hammonton, NJ	50018
36123	YATES	40380	Rochester, NY	99933	NEW YORK	50019
37077	GRANVILLE	20500	Durham-Chapel Hill, NC	99934	NORTH CAROLINA	50020
37087	HAYWOOD	11700	Asheville, NC	99934	NORTH CAROLINA	50021
39123	OTTAWA	45780	Toledo, OH	41780	Sandusky, OH	50022
42103	PIKE	35084	Newark, NJ-PA	99939	PENNSYLVANIA	50023
51113	MADISON	47894	Washington-Arlington-Alexandria, DC-VA-MD-WV	99949	VIRGINIA	50024
51175	SOUTHAMPTON	47260	Virginia Beach-	99949	VIRGINIA	50025

			Norfolk- Newport News, VA- NC			
51620	FRANKLIN CITY	47260	Virginia Beach- Norfolk- Newport News, VA- NC	99949	VIRGINIA	50025
54035	JACKSON	16620	Charleston, WV	99951	WEST VIRGINIA	50026
54043	LINCOLN	16620	Charleston, WV	99951	WEST VIRGINIA	50026
54057	MINERAL	19060	Cumberland, MD-WV	99951	WEST VIRGINIA	50027
72001	ADJUNTAS	38660	Ponce, PR	99940	PUERTO RICO	50028
72023	CABO ROJO	41900	San Germ n, PR	32420	Mayagüez, PR	50029
72079	LAJAS	41900	San Germán, PR	32420	Mayagüez, PR	50029
72121	SABANA GRANDE	41900	San Germán, PR	32420	Mayagüez, PR	50029
72125	SAN GERMAN	41900	San Germán, PR	32420	Mayagüez, PR	50029
72055	GUANICA	49500	Yauco, PR	99940	PUERTO RICO	50030
72059	GUAYANILLA	49500	Yauco, PR	38660	Ponce, PR	50031
72111	PENUELAS	49500	Yauco, PR	38660	Ponce, PR	50031
72153	YAUCO	49500	Yauco, PR	38660	Ponce, PR	50031
72081	LARES	10380	Aguadilla- Isabela, PR	99940	PUERTO RICO	50032
72141	UTUADO	10380	Aguadilla- Isabela, PR	99940	PUERTO RICO	50032
72083	LAS MARIAS	32420	Mayagüez, PR	99940	PUERTO RICO	50033

**Table 7: UPDATED LUPA ADD-ON FACTORS**

<b>Discipline</b>	<b>CY 2025 Updated LUPA Add-on Factors</b>
SN	1.7200
PT	1.6225
SLP	1.6696
OT	1.7238

**TABLE 8: CY 2025 DISPOSABLE NEGATIVE PRESSURE WOUND THERAPY (dNPWT) DEVICE RATE**

<b>CY2024 dNPWT Device Payment Rate</b>	<b>CY2025 dNPWT Device Payment Update (12-month CPI-U ending in June 2024 (3.0%) minus Multifactor Productivity Adjustment (0.6%))</b>	<b>CY2025 dNPWT Device Payment Rate</b>
\$270.09	1.024	\$276.57