



Expanded Home Health Value-Based Purchasing Model

Instructions for Submitting a Recalculation Request

September 2024

Home health agencies (HHAs) may submit a recalculation request if they believe there is an error in their quarterly Interim Performance Report (IPR) or Annual Performance Report (APR).

Recalculation requests do not apply to errors with data submission. Submission requirements for the expanded HHVBP Model align with current Code of Federal Regulations (CFR), including the Conditions of Participation (CoPs) ([§484.55](#)) and the conditions for payment ([§484.205\(c\)](#)).

Submitting Recalculation Requests for IPRs

Publication of the January, April, July, and October IPRs includes two (2) report versions, respectively:

1) Preliminary IPR:

- Once the “Preliminary IPRs” are published, HHAs have 15 calendar days to submit a recalculation request by emailing hvbp_recalculation_requests@abtglobal.com. Recalculation requests must include the following information:
 - The provider’s name, address associated with the services delivered, and CMS Certification Number (CCN);
 - The basis for requesting recalculation to include the specific data that the HHA believes is inaccurate or the calculation the HHA believes is incorrect;
 - Contact information for a person at the HHA with whom CMS or its agent can communicate about this request, including name, email address, telephone number, and mailing address (must include physical address, not just a post office box); and,
 - A copy of any supporting documentation, **NOT containing Protected Health Information (PHI)**, the HHA wishes to submit in electronic form.

Note: Please do not send any supporting information via links to file hosting services, including but not limited to Dropbox.

2) Final IPR:

- The “Final IPRs” reflect any changes resulting from approved recalculation(s). All HHAs that receive a “Preliminary IPR” will receive a “Final IPR,” even if the HHA did not submit a recalculation request.

Submitting Recalculation Requests for APRs

Publication of the APR each year includes three (3) report versions:

1) *Preview APR:*

- Once the “Preview APRs” are published, HHAs have 15 calendar days to submit a recalculation request by emailing hhvbp_recalculation_requests@abtglobal.com. Recalculation requests must include the following information:
 - The provider’s name, address associated with the services delivered, and CMS Certification Number (CCN);
 - The basis for requesting recalculation to include the specific data that the HHA believes is inaccurate or the calculation the HHA believes is incorrect;
 - Contact information for a person at the HHA with whom CMS or its agent can communicate about this request, including name, email address, telephone number, and mailing address (must include physical address, not just a post office box); and,
 - A copy of any supporting documentation, **NOT containing Protected Health Information (PHI)**, the HHA wishes to submit in electronic form.

Note: Please do not send any supporting information via links to file hosting services, including but not limited to Dropbox.

2) *Preliminary APR:*

- Once the “Preliminary APRs” are published, HHAs have 15 calendar days to submit a reconsideration request if they submitted a recalculation request and are not in agreement with the recalculation request decision. **All HHAs that receive a “Preview APR” will receive a “Preliminary APR,” even if the HHA did not submit a recalculation request.**
 - HHAs that did not submit a recalculation request are not eligible to submit a reconsideration request. HHAs that submitted a recalculation request receive instructions on how to submit a reconsideration request as part of the email notifying them of the outcome of the recalculation request decision.
 - HHAs will also have 7 calendar days from the notification of the reconsideration request decision to submit a request for Administrator review if they submitted a reconsideration request and are not in agreement with the reconsideration request decision. HHAs that did not submit a reconsideration request are not eligible to submit a request for Administrator review. HHAs that submitted a reconsideration request receive instructions on how to submit a request for Administrator review as part of the email notifying them of the outcome of the reconsideration request decision.

3) *Final APR:*

- CMS makes the “Final APRs” available after all recalculation requests, reconsideration requests, and requests for Administrator review are processed, and no later than 30 calendar days before the payment adjustment takes effect. **All HHAs that receive a “Preliminary APR” will receive a “Final APR,” even if they did not submit a recalculation, reconsideration, or Administrator review request.**