

Part B Insider (Multispecialty) Coding Alert

Double Counseling Could Cost Hospices \$55 Per Patient

If your physician wants to perform an initial consultation with a patient who is going into hospice care, then you need to make sure the physician hasn't duplicated that work with some earlier counseling to the patient about hospice options.

That's part of the instructions that the **Centers for Medicare & Medicaid Services** put out about the new initial hospice consultation code, [HCPCS G0337](#), which becomes effective in January. In Dec. 3 Change Request 3585, CMS notes the national payment amount for G0337 will be \$54.57.

The physician can't bill for this code directly. Instead, hospices must bill their regional home health intermediaries (RHHIs) directly with Revenue Code 0657. "No other revenue codes may appear on the claim," CMS stresses. The physician must be an employee of the hospice.

The service includes evaluating an individual's need for pain and symptom management, counseling the individual regarding hospice and advising the individual about advanced care planning. Medicare will only pay for these services if the patient's regular physician believes that the patient should seek the expertise of a hospice medical director or physician employee.

And Medicare will pay for the service only once, so duplicate G0337 claims will be denied. More information is at www.cms.hhs.gov/manuals/pm_trans/R28BP.pdf.