

## Eli's Hospice Insider

### Audits: Dot Your 'I's and Cross Your 'T's -- Or Face Payment Hits

**Insufficient or incomplete documentation is a significant weakness among medicare providers, reviewers report.**

Medical reviewers can retroactively deny your hospice claims for a number of reasons -- but one that you can easily remedy is lack of medical documentation.

You could get hit with medical review from a variety of sources these days: Medicare Administrative Contractors, intermediaries, Program Safeguard Contractors, Zone Program Integrity Contractors (ZPICs), Recovery Audit Contractors, and more.

If a medical reviewer from one of these contractors requests your medical documentation and you don't send it -- or you submit incomplete or illegible records -- your payments can be denied. Plus, money that your MAC or intermediary already sent to you can be recovered in cases of nonexistent or incomplete documentation.

The **Centers for Medicare & Medicaid Services** recently identified the issue of incomplete documentation as a "high dollar improper payment vulnerability," and the agency issued MLN Matters article SE1024 to discuss the topic and explain to providers that documentation should be a top priority.

Staff "should be catching insufficient documentation before a claim leaves the office, but in some cases, it's caught by RACs on the back end -- after a claim has already been reimbursed" says Atlanta-based consultant **Jay Neal**. "If you know you're missing documentation, you really shouldn't bill for the service in the first place, or you could have to reimburse that money down the road."

Bottom line: Oversight authorities are on the lookout for documentation mistakes, so carve out time now to both catch and prevent any sloppy record-keeping practices.