

## Eli's Hospice Insider

### Benchmarking: New Drug Claims Measure To Hit PEPPER Reports In 2021

See how you measure up in the spring.

Hospices' responsibility for their patients' medications will be the emphasis of a new target area for their free benchmarking reports from the feds.

The Hospice Program for Evaluating Payment Patterns Electronic Report will add this new target area in the last quarter of 2020, which will show up in reports scheduled for release in spring 2021: "Average Number of Part D Claims per Hospice Episode," revealed PEPPER report contractor RELI Group in a Sept. 29 webinar held with the National Association for Home Care & Hospice.

To arrive at the new figure, RELI Group will divide the number of Medicare Part D claims for beneficiaries billed during hospice episodes ending in the report period by the number of all beneficiary episodes discharged (by death or alive) by the hospice during the report period, it said.

**Detail:** The denominator includes "all claims billed for a beneficiary by that hospice," RELI Group explained. The 2020 reports will cover 2017 through 2019.



After scrutiny of Part D claims for hospice enrollees intensified, NAHC suggested the new target area, it says in its member newsletter. "Hospices are frequently not aware that a patient is obtaining drugs under the Part D benefit, perhaps drugs that the hospice identified as not reasonable and necessary," NAHC says. "In these situations the beneficiary may be financially liable for the drug as Medicare does not cover any item, service or drug that is not considered reasonable and necessary," the trade group points out.

"It is important for hospices to coordinate with Part D plans and non-hospice providers delivering care or items to hospice beneficiaries," NAHC acknowledges. "However, hospices must be aware of these other providers. This information is usually not available to the hospice through [Centers for Medicare & Medicaid Services] data systems and, sometimes, patients/ families do not make hospice aware they are seeking services outside of the hospice's care."

**Try this:** You can use Medicare's voluntary Part D prior authorization form that took effect in 2014 to help increase communication, NAHC suggests. But it applies only to analgesics, antinauseants, laxatives, and antianxiety drugs. In its 2019 hospice proposed rule, CMS pointed out a rise in hospice patients getting prescriptions filled for "maintenance drugs" such as beta blockers, calcium channel blockers, corticosteroids, and insulin.

Note: The prior auth form and instructions are at

<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Instruction-and-Form-f-or-Hospice-and-Medicare-Part-D.pdf>.