

## Eli's Hospice Insider

### **Billing: Choose Your Drug Reporting Method And Stick With It, CMS Urges**

**Look to 2019 rule for clarifications on new options taking effect next month.**

Drug reporting may still present a burden for hospice providers, but at least that burden's a tad lighter.

**Old way:** Currently, Medicare requires hospices to report line item drug data on their claims.

**New way:** Starting Oct. 1, "providers will have the option to continue to report infusion pumps and drugs ... on the hospice claim as separate line items. This submission option will no longer be mandatory," the **Centers for Medicare & Medicaid Services** says in the 2019 hospice payment final rule published in the Aug. 6 Federal Register. "Alternatively, hospices can submit total, aggregate DME and drug charges on the claim."

CMS made the change in its effort to provide regulatory burden relief to providers, it indicated in the proposed rule. The agency also explained the change in Change Request 10573, released the same day as the proposed rule (see Eli's Hospice Insider, Vol. 11, No. 6).

While the change is "an improvement," billing expert **M. Aaron Little** with **BKD** in Springfield, Missouri judges that it's "not a huge burden relief." Still, it's "nice to see this simplification offered," Little tells **Eli**.

But hospices commenting on the proposed rule asked CMS to provide some clarification on its instructions. "Several commenters wanted to know if they needed to choose one option," the rule notes. "Some commenters asked if the reporting method could be determined on a case by case basis or if all claims had to be submitted using the same reporting option, meaning whether some claims could be reported with detailed line item information while others reported in the aggregate."

In the rule, CMS points out that "at this time, there is no claims processing edit prohibiting providers to submit both separate line item drug data and aggregate drug data on the claim. However, we encourage providers to select one consistent mechanism for reporting this data."

Little agrees. "Providers should pick a way of reporting and stick with it," he advises.

Note: The final rule is at [www.gpo.gov/fdsys/pkg/FR-2018-08-06/pdf/2018-16539.pdf](http://www.gpo.gov/fdsys/pkg/FR-2018-08-06/pdf/2018-16539.pdf). CR 10573 is at [www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R4035CP.pdf](http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R4035CP.pdf).