

Eli's Hospice Insider

Billing: Don't Let CWF Mistakes Torpedo Your Billing

CMS claims its hands are tied when it comes to inaccuracies in the Common Working File.

When you rely solely on the Common Working File to determine your new patient's hospice history, you're risking your Medicare reimbursement.

So said **Centers for Medicare & Medicaid Services** officials in the May 23 Open Door Forum for home health, hospice and durable medical equipment providers. When you admit a hospice patient and her CWF history comes up clear, that won't necessarily mean you're entitled to the Medicare payment you think you'll be receiving.

Why: When another hospice provider serving the patient doesn't bill promptly, the CWF won't show that the patient is under a hospice benefit period, noted CMS's **Katie Lucas** in the forum. So you'll bill for the reimbursement you believe you're entitled to, then have the claim shot down or have reimbursement taken back when those late-billed claims show up in CWF.

Hospices check the CWF for notices of election (NOEs) and claims, one provider told CMS. When NOEs and claims turn up later, the current hospice's benefit period is no longer correct, and certification and face-to-face dates are no longer timely, the hospice complained.

CMS's hands are tied when this happens, Lucas related. For any reason, if the F2F encounter didn't occur, the certification isn't complete and the episode isn't covered.

"While we share your frustration about providers who are slow to post their notice of elections, we are limited by the statutory language in what we can do to address this issue," she said.

For DME suppliers, they'll submit a claim for supplies and get paid, then see that reimbursement recouped six or nine months later when a HHA finally gets around to billing for the patient, a supplier told CMS in the forum.

"We're really restricted, similar to the hospice situation, for home health and statutorily we're required to bundle all the supplies into the home health PPS payment," CMS's **Randy Thronset** told the caller. "Unfortunately CMS doesn't have any flexibility with regards to that because of what the statute tells us we have to include in our payments."

Play Detective During Admission

Don't rely solely on the CWF for your patient's history, Thronset urged forum participants. "There are different avenues besides just looking at the CWF systems," he said.

Talk with the patient and/or her representatives to find out what services she has received, Lucas advised. Document those conversations, she added.

Plus: Bill timely yourself, so other providers know what they are dealing with, CMS urges providers.