

## Eli's Hospice Insider

### Billing: Gear Up For New Hospice Claims Data Reporting With New Info From CMS

**The deadline for reporting new data is almost here.**

Medicare is offering some clarifications to help hospices with their new claims data reporting.

**Reminder:** Last summer, the Centers for Medicare & Medicaid Services issued a transmittal instructing hospices to report a slew of new data by April 1, 2014 (see Eli's Hospice Insider, Vol. 6, No. 9). That includes "visit reporting for general inpatient care, reporting the facility NPI where the care was provided when not provided at the billing hospice facility, and reporting of infusion pumps and prescription drugs," CMS describes.

"This includes visits by hospice nurses, aides, social workers, physical therapists, occupational therapists, and speech-language pathologists, on a line-item basis, with visit and visit length reported as is done for the home levels of care," the agency details in July 26, 2013 Transmittal 2747 (CR 8358). "It also includes certain calls by hospice social workers ... on a line-item basis, with call and call length reported as is done for the home levels of care."

In a newly reissued version of the transmittal, CMS offers a few tweaks to its original instructions. That includes specifying that the "home levels of care" means routine home care.

**Also:** CMS instructed hospices to report post mortem visits on the date of death with a "PM" modifier in the original transmittal. (Due to billing system limitations, visits after the date of death are not billable.) "Hospices shall report hospice visits that occur before death on a separate line from those which occur after death," CMS clarifies in the updated memo.

CMS also gives more detailed instructions on reporting drugs in facilities. "When a facility (hospital, SNF, NF, or hospice inpatient facility) uses a medication management system where each administration of a hospice medication is considered a fill for hospice patients receiving care, the hospice shall report a monthly total for each drug ... along with the total dispensed," the updated memo says.

The facility drug clarification could help with hospices' concerns about exceeding the 450-line claim limit.

Note: The memo, including the updated guidance in red, is online at <http://cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2864CP.pdf>.