Eli's Hospice Insider

Diagnosis Coding: CMS To Ban Debility, Failure To Thrive As Primary Diagnoses On Hospice Claims

Most hospices still aren't reporting secondary diagnoses, CMS fumes.

If you thought CMS was cracking down hard on hospice diagnosis coding already, just wait.

A whopping 72 percent of hospices continue to report only one diagnosis code on hospice claims, the **Centers for Medicare & Medicaid Services** says in its proposed rule for 2014 hospice payment rates. That's down from 77 percent CMS found before it published its instructions on coding in last year's hospice wage index notice. "All providers should code and report the principal diagnosis as well as all coexisting and additional diagnoses related to the terminal condition or related conditions to more fully describe the Medicare patients they are treating," CMS stresses in the rule published in the May 10 Federal Register.

"We are actively collecting and analyzing hospice data for evaluation of hospice payment reform methodologies," CMS continues. "To adequately account for any clinical complexities a given hospice patient might have as a result of related conditions, these related conditions must be included on the Medicare hospice claim," the agency insists.

CMS's insistence on including more than one diagnosis code on a hospice claim is one of the rule's most significant provisions, says **Judi Lund Person** with the **National Hospice and Palliative Care Organization**. The requirement "will get people's attention," Person tells **Eli**.

Brace yourself: Accordingly, CMS plans to nix hospices' use of "debility" (799.3) and "adult failure to thrive" (783.7) as primary diagnosis codes on claims. "When reported as a principal diagnosis, these would be considered questionable encounters for hospice care, and the claim would be returned to the provider for a more definitive principal diagnosis," CMS explains. "'Debility' and 'adult failure to thrive' could be listed on the hospice claim as other, additional, or coexisting diagnoses," CMS allows.

CMS also addresses coding for "Mental, Behavioral and Neuro-developmental Disorders" — namely dementia — and stresses the need for hospices to adhere to ICD-9 coding rules.

Note: For more information on home health ICD coding in Eli's Home Health ICD-9 Alert and other products, go to https://www.aapc.com/codes/. Watch for more details about the diagnosis coding changes in a future issue of Eli's Hospice Insider.