

## Eli's Hospice Insider

### Finance: Tick These 2 Items Off Your List Before New Year's

**Don't forget: Hospice cap reporting has moved up by a month.**

If you want to keep your initial cap overpayment report to a minimum, you'll need to get busy with cap reporting duties before the holidays are over.

**Change:** As the **Centers for Medicare & Medicaid Services** confirmed in the 2018 final rule for hospice payment, it's switching hospices' cap years to align with the federal fiscal year (see Eli's Hospice Insider, Vol. 10, No. 8). "This alignment eliminates timeframe complexities associated with counting payments and beneficiaries differently from the FFY and will help hospices avoid mistakes in calculating their aggregate cap determinations," HHH Medicare Administrative Contractor **National Government Services** says in a recent message to providers.

The switchover means the 2017 cap year ended on Sept. 30 and is 11 months long. And "the per beneficiary cap amount for calculating the hospice aggregate cap for the 2017 transition year will not be prorated for the shorter time frame," NGS reminds hospices. That lack of cap proration will give hospices a bit more breathing room their potential cap overpayments, experts note.

The realignment also means hospices' cap self-reporting is due a month earlier - Feb. 28 instead of the end of March, NGS points out. In turn, "hospice providers can begin to submit the self-determined cap starting on 12/31/2017," also a month earlier than usual, NGS notes.

**Tip:** If your hospice expects to have a cap liability for 2017, you should secure Provider Statistical & Review (PS&R) data for the cap year "at the earliest possible date that includes payments through December 31, 2016 or later," advises **The Health Group** in Morgantown, West Virginia. The data should include payments for services rendered for the period of Nov. 1, 2016 through Sept. 30, 2017, and beneficiary counts, the consulting firm says in its electronic newsletter.

"With the holidays coming up, hospices should make certain access to the PS&R System has been updated and is available, as well as plan for the submission itself," The Health Group counsels. And "this is also a good time to estimate ultimate cap liabilities and to prepare for the submission of a Request for Extended Repayment Schedule ... if this is necessary to liquidate any cap liability expectation," the firm adds.

**Another tip:** "When making your submission, secure any evidence available" such as "email response to submission, signature of delivery receipt, etc.," The Health Group says. "Several hospices that submitted 2016 filings had to overcome MAC's position that filing was not made."

### Preview Your Quality Reports Before It's Too Late

Hospices have until almost New Year's Eve to review two new Hospice Quality Reporting Program preview reports. The Hospice Provider Preview Report, containing Hospice Item Set-based quality measure data, and the Hospice CAHPS Provider Preview Report are available in your CASPER folder until Dec. 30, CMS says in a new message to providers.

The former report contains Hospice Item Set-based quality measure data from second quarter 2016 to first quarter 2017, CMS says. The latter includes CAHPS survey results from second quarter 2015 to first quarter 2017.