

Eli's Hospice Insider

Hospice Item Set: Hundreds Of Hospices Lag On HIS Submission

NOE billing, CAHPS also addressed in Open Door Forum.

You'd better get on the stick if you want to avoid payment penalties for failing to submit Hospice Item Set information.

Reminder: You were supposed to start submitting HIS-Admission and HIS-Discharge data July 1 (see Eli's Hospice Insider, Vol. 7, No. 8). The **Centers for Medicare & Medicaid Services** will dock your Medicare reimbursement by 2 percent starting in October 2015 if you fail to do so.

So far, it looks like hundreds of hospices may be on track to see just such a pay cut, CMS revealed in the Nov. 13 Open Door Forum for hospice providers. Of the 4,104 hospices that were Medicare certified as of July 1, 2014, 3,628 have created QIES accounts to submit HIS data for the first reporting quarter, said CMS's **Michelle Brazil** in the forum. They have submitted 724,106 HIS records successfully. "This also means, however, that 476 hospice providers have not submitted any data," Brazil pointed out.

However, you can still save your reimbursement rates by getting with the HIS program ASAP. In a new HIS question-and-answer set, CMS says it "realizes there is a learning period and that hospices will run into unexpected difficulties or timeliness issues with completion and submission of HIS records, especially during the first months of implementation," the agency responds. "If a hospice realizes that it will not meet the timeliness criteria for any given record, it should still complete and submit that record, even if that means the completion/submission will be 'late' for the record."

Late completion and submission of HIS records results in a non-fatal (warning) error message, CMS points out. "Records containing nonfatal errors can still be accepted by the QIES ASAP system."

Do this: Hospices that have not yet submitted HIS data should complete and submit their HIS records "as soon as possible," Brazil urged. If you have not done so yet, register for your two user IDs □ CMSNet and QIES user ID □ to access the HIS system, she added.

"Hospices should make every effort to correct any collection and submission difficulties they are experiencing in an effort to comply with HQRP requirements," CMS says in the four-question Q&A set at www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-Item-Set-HIS.html □ scroll down to the "Downloads" section and click on the October Q&A link.

CMS's HIS page, containing links to educational materials and instructions, is at www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-Item-Set-HIS.html.

Other issues addressed in the forum include:

- **NOE billing.** Since Oct. 1, the Medicare claims system has been cutting the number of days Medicare pays you if you are late submitting the Notice of Election. But don't believe the message you receive stating that determination isn't subject to appeal.

Since the NOE filing deadline began last month, "Medicare systems have reported provider liable days with the RA message N211, which states decisions aren't appealable," explained CMS's **Wil Gehne** in the forum. That statement isn't consistent with policy, because those determinations actually may be appealed, he said. (See box, this page, for exception details.)

Starting in April, the system no longer will apply the incorrect message about appeals. "We appreciate hospice providers'

continued patience until we can get that piece corrected," Gehne said.

CAHPS. Don't forget to authorize your CAHPS vendor to submit your data, urged CMS's **Lori Teichman**. Starting in April, if your vendor fails to report your CAHPS data, your FY 2017 payments will be reduced by 2 percent.