

Eli's Hospice Insider

Hospice News: Are You Billing Discharge Days Correctly?

Do you know how to bill for a day when a patient changes hospice care levels on that day? If not, you may pay in medical review.

"In general, except for Continuous Home Care (CHC) and discharging deceased, the hospice should bill the level of care the beneficiary was receiving at the end of that specific date," HHH Medicare Administrative Contractor **Palmetto GBA** says in a recently updated question-and-answer set from the MAC's October Hospice Coalition meeting.

Inpatient: For General Inpatient (GIP) care, hospices should bill the day of discharge at the Routine Home Care (RHC) rate, unless the beneficiary was discharged as deceased, Palmetto instructs. For Inpatient Respite Care, hospices should bill the date of respite care discharge as RHC. "If the beneficiary dies under respite care, the day of death is paid at the inpatient respite care rate," Palmetto adds.

For Continuous Home Care, "if the requirements for CHC are met for the day of discharge, it should be billed as CHC," Palmetto tells hospices. "If it does not meet the requirements, it should be billed at the routine care rate."

Hospices should bill RHC any day that doesn't qualify for any other level of care, Palmetto advises. "This level of care is ... also paid when the patient is receiving outpatient hospital care for a condition unrelated to the terminal condition," the MAC clarifies.

The Coalition Q&As are at http://www.palmettogba.com/palmetto/providers.nsf/ls/JM Home Health and Hospice~BKVSH6147?opendocument&utm_source=JMHHHL.