Eli's Hospice Insider

Hospice News: Include A Second NPI In This Circumstance Or Face Returned Claims

You'll need to know the NPIs of the facilities in which your patients reside when reporting certain place of service codes on hospice claims, or face payment slow-downs.

The problem: Reason code 34952, indicating that a service facility National Provider Identifier is required on the claim but was not reported, "consistently appears in the top Claim Submission Error (CSE) data," says HHH Medicare Administrative Contractor **CGS** on its website. "Claims that do not include an NPI in the SERV FAC NPI field when required will be sent to the return to provider (RTP) file (status/location T B9997) with reason code 34952, for you to correct."

The solution: Report the NPI of the facility where the patient received services when billing any of the following POS HCPCS codes: Q5003 (hospice care provided in nursing long term care facility [LTC] or non-skilled nursing facility [NF]); Q5004 (... skilled nursing facility [SNF]); Q5005 (... inpatient hospital); Q5007 (...long term care hospital [LTCH]); or Q5008 (...inpatient psychiatric facility).

Exception: "This is not required when the facility is the same as the billing hospice," CGS notes.

Report the service facility NPI in Loop 2310E in the 5010 electronic claim format or the SERV FAC NPI field in the Fiscal Intermediary Standard System (FISS) on Claim Page 03.

"Help reduce claims processing time and avoid payment delays by ensuring this information is reported on the claim when required," CGS urges.