

## Eli's Hospice Insider

### Hospice News: MAC Clarifies VBID Carve-In Details

#### Here's how to treat MA payments for cap purposes.

The longer Medicare's Value-Based Insurance Design (VBID) Model's Hospice Benefit Component goes along, the more it proves confusing. Note these three facts recently shared by a HHH Medicare Administrative Contractor to try to clear up the chaos.

**Tip #1:** If you have Medicare patients enrolled in the VBID hospice carve-in model, "you can't include your Medicare Advantage plan payments for these patients in calculating your aggregate and inpatient cap payments for January 1, 2021-December 31, 2024, the performance period of the Model component," MAC Palmetto GBA advises in a recent post on its website.



**Tip #2:** Medicare Advantage Organizations (MAOs) participating in the hospice model "retain responsibility for all Original Medicare services, including hospice care," Palmetto stresses in a separate post. That means MAOs must pay for "non-hospice care provided to a hospice enrollee during a hospice stay, such as the items, drugs, or services that are furnished to treat a condition unrelated to the terminal illness and related conditions" and "other non-hospice care (items, drugs, or services) that are furnished after a hospice stay ends (in the event of a live discharge, including non-hospice care provided on the last day of the stay through the end of the calendar month that the hospice stay ends)," Palmetto specifies.

**Tip #3:** "Under the Hospice Benefit Component ... [MAOs] retain responsibility for all Original Medicare services, including hospice care," Palmetto explains in another separate post on its website. "MAOs must pay for non-hospice care provided to a hospice enrollee during a hospice stay, such as the items, drugs, or services that are furnished to treat a condition unrelated to the terminal illness and related conditions," the MAC says. "And they must cover other non-hospice care (items, drugs, or services) that are furnished after a hospice stay ends (in the event of a live discharge, including non-hospice care provided on the last day of the stay through the end of the calendar month that the hospice stay ends)," Palmetto adds.