

Eli's Hospice Insider

Hospice News: New Face-To-Face Code Solves Hospice Billing Problems

Problem: Currently, if a hospice misses the F2F date and dates are denied, "the partially denied hospice claim does not cause Original Medicare systems to post a revocation date on the beneficiary's hospice benefit period," the **Centers for Medicare & Medicaid Services** says in CR 9385. "This interferes with the hospice's ability to submit a new election when coverage is restored."

Solution: As of April 1, Medicare will use payer-only occurrence code 48 "for internal processing with the definition 'Date hospice face-to-face encounter was untimely,'" CMS says in the transmittal. When the medical reviewer assigns this code and non-covers all subsequent line item dates of service, CWF will post the code 48 date as the revocation date on the current benefit. Then "the hospice claim will be accepted by CWF with line item dates beyond the revocation date ... as long as those line items are non-covered. This action will require the hospice to submit a new Notice of Election before any future dates of service can be submitted."