

## Eli's Hospice Insider

### Managed Care: MACs Won't Help You With VBID Billing Problems

#### Reimbursement woes continue under carve-in program.

If you're having trouble getting billing to work for patients enrolled in the Medicare Advantage Hospice Benefit Value-Based Insurance Design (VBID) Model, you're not alone. So indicates a question-and-answer set from a recent Hospice Coalition meeting, according to HHH Medicare Administrative Contractor Palmetto GBA.

**Question:** "Hospices are working with a Medicare Advantage Organization (MAO) and billing both Palmetto GBA and the MAO," says one Q&A. "Recently we've needed to get help with a claim, but our attempts to get help through the MAO online claims portal or information hotline have not been answered. We attempted to contact Palmetto GBA and were told that the MAO is primary and everything related to the claim has to go through the MAO. Specifically, who do we contact to discuss our issue?"

**Answer:** The Centers for Medicare & Medicaid Services "has instructed the MACs that hospice providers should reach out directly to the participating MAOs for any specific questions regarding processes related to claims and notifications submissions, claims and notifications processing, clinical questions and network participation," Palmetto confirms. "All stakeholders can reach out to the VBID Model Team with any questions, comments, or concerns about the Hospice Benefit Component at [VBID@cms.hhs.gov](mailto:VBID@cms.hhs.gov)," the MAC adds.



Information about the VBID carve-in, including billing and payment information, is at <https://innovation.cms.gov/innovation-models/vbid-hospice-benefit-billing-payment>.

Another hospice noted in the Q&A that "VBID may cause providers to lose reimbursement if a patient changes plans and the hospice doesn't know about this change in time to send the 81A to the new MAO VBID. In addition to open enrollment, there is also special enrolment

if the beneficiary moves to a new area. What suggestions does Palmetto GBA have to help providers navigate this risk? Is a 'change in MAO plans' a reason to discharge?"

Palmetto doesn't offer much help, just referring to a VBID Frequently Asked Question that says, "If an enrollee changes plans during a hospice election, coverage for that enrollee's care depends on his/her current enrollment" and that a new election isn't necessary.

Note: Links to Hospice Coalition Q&A sets are at [www.palmettogba.com/palmetto/jmhjh.nsf/T/Hospice~Coalition Questions](http://www.palmettogba.com/palmetto/jmhjh.nsf/T/Hospice~Coalition%20Questions).