

## Eli's Hospice Insider

### Reader Question: Don't Let ICD-10 Delay Your NOEs -- And Cut Into Your Reimbursement

**Switch to the new coding system is imminent.**

With the switch to ICD-10 almost upon you, many hospices are scrambling to sort out transition details. Check out these recent answers from one MAC for guidance.

**Question:** What should we do if the Notice of Election for a patient is dated before Oct. 1, but services are furnished Oct. 1 or later?

**Answer:** Look to a recent question-and-answer set from HHH Medicare Administration Contractor **National Government Services** for the answer. "A NOE that is filed for an admission that occurred prior to 10/1/2015 should be filed with the ICD-9 codes," NGS instructs. "As long as the ICD-9 code[s] utilized are correct at the time the NOE is submitted, they should not be changed. If you attempt to change the diagnosis coding on the NOE, this may cause the NOE to become untimely."

"For NOEs that are submitted for an admission that occurred on or after 10/1/2015 the ICD-10 codes should be used," NGS continues. "However, for all services provided on/after 10/1/2015, ICD-10 coding must be submitted on the claim even if the NOE contained ICD-9 coding with a date prior to 10/1/2015."

**Question:** Should we put both ICD-9 and ICD-10 codes on our hospice claims now, since the second benefit period will start after Oct. 1?

**Answer:** "Medicare does not allow dual coding of ICD-9 and ICD-10 on claims submitted to Medicare," NGS warns. "For all claims with a from DOS prior to 10/1/2015 □ Use ICD-9 coding on claims and the NOE. Note that Hospice claims are always split by month; all claims with a from DOS on/after 10/1/2015 are coded with ICD-10."

"Bottom line: It is the 'from' DOS on that claim that determines whether ICD-9 or ICD-10 is used," NGS advises in the Q&As.

The MAC does encourage hospices to practice dual coding before the ICD-10 implementation date of Oct. 1, it adds. Just practice it by "performing a dual coding process in your documentation," NGS advises.