

Eli's Hospice Insider

Regulations: Payment Reform Billing Wrinkles Still Aren't Ironed Out

Plus: CAHPS to become part of Hospice Compare, but not right away.

Under hospice payment reform that took effect Jan. 1, glitches to Medicare payments continue to drag on, and providers aren't happy about it.

For example: "An issue has been identified with the two separate payment rates for [Routine Home Care] services," HHH Medicare Administrative Contractor **Palmetto GBA** notes in a message to providers. "On some claims, the high rate is populating on the claim for the RHC days when the low rate should have been applied."

Palmetto originally projected a July fix date for the glitch, but now it has pushed off that estimate to January 2017.

"This creates a lot of bookkeeping nightmares for hospices to have to carry those overpayments on their books now for what's going to end up being close to a year," protested a provider calling into the **Centers for Medicare & Medicaid Services**' May 4 Open Door Forum for home care and hospice providers.

Another example: This is merely one glitch of many. "A reported issue is under review by CMS involving cases where there is more than one prior period of hospice service not separate[d] by 60 days and the system is issuing an incorrect 'RHC high' payment rate," notes HHH MAC **National Government Services** in a recent message to providers. No resolution is set yet for this issue, NGS reports.

And problems with Service Intensity Add-on payment continue as well. For example, "in limited circumstances, [SIA] adjustments are not occurring on the prior months claim as designed" when the seven-day SIA period spans two claims, NGS explains. The MAC expects this problem to be corrected in the July claims system update.

Medicare is fixing some of the reform-related billing problems, however, NGS notes. As announced in the last forum, a correction to SIA overpayments was installed in February. "Contractors were given instruction by CMS to adjust all claims that were affected by this system issue," NGS says. "The adjustments have been completed."

Other hospice-related issues addressed in the forum include:

Hospice Compare. You don't have to worry if your hospice CAHPS ratings aren't polished quite yet. Right now Medicare isn't planning to include CAHPS ratings on Hospice Compare when it first launches in early to mid-2017, indicated CMS's **Debra Dean-Whittaker** in the forum. "Hospice CAHPS will be reported, but ... not any time soon," Dean-Whittaker said.

However, your CAHPS honeymoon may not be too long. CMS does hope to start publicly reporting hospice CAHPS data some time in 2017, Dean-Whittaker said.

Proposed rule. Payment reform implemented in January 2016 "better aligns payments with visit intensity and the cost of providing care," said **Laura Ashbaugh** in the forum. The 2017 rule "discusses our ongoing efforts to monitor provider behavior in response to these policy changes," Ashbaugh noted.

The proposed changes to the Hospice Item Set tool (see Eli's Hospice Insider, Vol. 9, No. 6) will change HIS "to be more in line with other post-acute care settings," said CMS's **Staci Payne** in the forum.



The proposed changes would transform HIS into a "comprehensive patient assessment instrument."

Watch out: In addition to quality purposes, HIS may "in the future feasibly enable payment determinations," Payne told forum attendees.