

## Eli's Hospice Insider

### Reimbursement: Keep '42' Codes Straight, CMS Tells Providers

**Also: You're still responsible for your quality data submission, not your vendor.**

Even if you didn't receive a PEPPER comparative billing report, you still need to pay attention to correct coding for patients who die or are discharged.

So stressed the **Centers for Medicare & Medicaid Services** in its Nov. 28, 2012 Open Door Forum for hospice and home care providers. That's because a review of 2011 claims data showed more than 22,000 hospice claims reported a through date matching the patient's date of death, but a patient status code of other than expired, explained CMS's **Wendy Tucker** in the forum.

**Do this:** When a patient dies, hospices generally should report a patient status code of 40 (expired in the home), 41 (expired in medical facility), or 42 (expired place unknown), Tucker noted. In contrast, many claims reviewed incorrectly listed patient status code 01 (discharge to the home) when the hospice patient died.

Hospices also incorrectly used occurrence code 42 on claims, Tucker added. In the round of PEPPER reports that 2,700 hospices received in the fall, hospices ended up with sky-high "Live Discharge" statistics because of the error (see Eli's Hospice Insider, Vol. 6, No. 1). PEPPER report contractor **TMF Health Quality Institute** advised hospices to go back and correct claims that used the error, although billing experts didn't necessarily agree.

CMS is scratching its head about why so many hospices made the occurrence code 42 error. "We aren't sure if this is being confused with the patient status code of 42, which is used to indicate expired, or if the provider believes it's necessary to close the election at the time of death," Tucker said in the forum.

**Bottom line:** Hospice should use occurrence code 42 only when the patient decides to discontinue hospice care and revoke the benefit, Tucker emphasized to listeners.

Heed These Quality Data Details

If you were frustrated when you tried to access CMS's free training on quality data reporting, it may be time to try again. Technical difficulties put the WebEx training session on hold almost as soon as CMS posted it in November, acknowledged CMS's **Robin Dowell** in the forum. But the training session should be back up and available at <https://www.qtso.com> until April, she confirmed.

**Also:** Third-party vendors for hospice quality data submission may be a big help, but the buck still stops with you. CMS holds the hospice -- not the vendor -- fully accountable for the data, including its accuracy, and its submission, Dowell stressed. Vendors should remember that scripting or batch submissions for hospices aren't allowed, she added.