

## Eli's Hospice Insider

### Reimbursement: Must You Adjust Claims Paid Incorrectly Under Payment Reform? It Depends On You

**Questions still remain about payment reform corrections.**

Hospices annoyed that Medicare isn't fixing its own reimbursement errors under payment reform may be tempted to chuck the whole idea of recovering lost money ☐ or refunding it ☐ but that may not actually be an option.

Earlier this year, the **Centers for Medicare & Medicaid Services** said it had fixed most of the problems related to hospice payment reform billing errors, and on May 24 it issued the transmittal and MLN Matters article giving instructions for the adjustments to hospices and HHH Medicare Administrative Contractors (see Eli's Hospice Insider, Vol. 10, No. 7).

One thing the transmittal and article did not spell out was whether the adjustments were mandatory. Now CMS has issued clarifying comments to a trade group indicating they are ☐ in certain circumstances.

Some hospices have tracked their incorrectly paid claims while others haven't, CMS acknowledges in a question and answer set responding to the **National Association for Home Care & Hospice**. "Any provider that is aware of an error should act on that information, following the instructions in the article," CMS tells NAHC in the Q&As.

**However:** "Hospices that lack the information to identify the errors at this point cannot take any action," CMS allows.

Even if you did track the errors and are ready to adjust, you may want to wait to see if an easier billing method emerges. For the adjustment billing process, "CMS will look into the suggestion of submitting a roster list with the MACs to see if it is feasible and respond to the national hospice associations in the near future," the agency says. Other Q&A clarifications include:

- The transfer workaround in the transmittal and article can be used on adjustments as well as new, original claims until the problem is corrected.
- The transfer problem and workaround apply to claims following the submission of an 8XC transfer notice.
- Adjustments shouldn't impact sequential billing.

Note: See the MLN Matters article at

[www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE17014.pdf](http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE17014.pdf).