

Eli's Hospice Insider

Reimbursement: New Nursing G Codes Finally Released For Hospice Reform

Track RN vs. LPN visits.

If you want to avoid a major cash flow crunch in the New Year, you need to get familiar with two new G codes before Jan. 1.

In order to facilitate Service-Intensity Addon payments in the last seven days of a patient's life under hospice payment reform, the **Centers for Medicare & Medicaid Services** has issued two new nursing G codes to replace the current single G-code of G0154 for "Direct skilled nursing services of a licensed nurse (LPN or RN) in the home health or hospice setting."

The new codes are:

- G0299 □ "direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting;" and
- G0300 □ "direct skilled nursing of a licensed practical nurse (LPN) in the home health or hospice setting," the Centers for Medicare & Medicaid Services says in Oct. 16 Change Request 9360.

Rationale: Under hospice payment reform finalized in the 2016 final rule for hospice payment, Medicare will furnish SIA payments only for RN visits, not for LPNs, CMS reminds providers in the accompanying MLN Matters article. Thus, the current single nursing G-code had to be split.

The new codes will take effect, and the old one will retire, for hospice claims dated Jan. 1 or later.

Hospices have a compelling incentive to comply with the requirement, since their SIA payments depend on it, notes **Lynn Olson** of billing company **Astrid Medical Services** in Corpus Christi, Texas.

Unexpected: In what may be a surprise to many HHAs, "since G0154 is used in both the home health and hospice settings, home health agencies and hospices will be required to use" the new codes, CMS instructs.

You can expect policy-makers at CMS, the **Medicare Payment Advisory Commission**, and elsewhere to analyze the data provided by the new codes when making reimbursement decisions such as setting new rates, etc., observers warn.

Watch for: The new codes "may be applicable to Medicaid and other payer claims where reporting of nursing visits is required," cautions the **National Association for Home Care & Hospice**.

Prepare Your Systems Now

Head start: "Some organizations I know have already been separately tracking RN versus LPN visits," relates billing expert **M. Aaron Little** with **BKD** in Springfield, Mo. "But that tracking has not been differentiated on the claims, so even those organizations will now need to ensure that they have their software systems correctly coded and mapped with the new codes."

Hospices that have not been separately recording RN and LPN visits will need to start from scratch. "They will need to ensure they have systems in place" to track the visits, Little advises. For smooth implementation, stay tuned for further guidance from CMS and its MACs, Olson recommends.

HHH Medicare Administrative Contractor **CGS** has already issued further guidance, but it applies to HHAs. "CMS has provided clarification" that for home health episodes that span Jan. 1, HHAs must report G0154 for 2015 visits. They must report the new codes, G0299 or G0300, for visits made in 2016. "The G0154 code will no longer be allowed for visits made on or after January 1, 2016," CGS points out.

Note: The CR is at www.cms.gov/RegulationsandGuidance/Guidance/Transmittals/Downloads/R3378CP.pdf and the MLN Matters article is at www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9369.pdf.