

### NDoc<sup>®</sup> Billing Reference for Configuring Hospice Discharge Reasons for Medicare Claims

(changes included in 1.2.8.36 Billing Update)

### **Summary:**

In NDoc Billing Release 1.2.8.36, Electronic Claims were altered to allow for additional Hospice discharge reason types. We made this program change to prevent claim rejections due to new Medicare Edits.

### **How it Works:**

Based on the entries in the Discharge Reason table and the Electronic Claim set up, the discharge Status code, occurrence code, condition codes, and bill notes will pull according to the Medicare Hospice Discharge Matrix shown below. When the status code is TR in the billing Discharge Reason table, the patient status code 01 will pull to the claim and no occurrence 42 code with discharge date will be generated. However, when the discharge status code is blank or 01, the occurrence code 42 will pull to the claim. When 52 or H2 are used as the status codes, the patient status code 01 will pull to the claim, no occurrence code 42 with date will be generated, and these status codes will populate the claim as condition codes based on the fact that the Electronic Option Set is configured accordingly.

Medicare Hospice Discharge Matrix							
Reason for Discharge	Status Code in Billing Table	Status Code which will pull to Claim	Remarks Required on Claim	Occurrence Code and Date of Discharge/ Death	Condition Code on Claim		
Died at home	40	40	None required	55	NO		
Died in facility	41	41	None required	55	NO		
Died, location unknown	42	42	None required	55	NO		
Transfer/Discharge to Hospice – Home (Routine or CHC)	50	50	Bene transferred to a Medicare Certified Hospice eff (DC date)	NO	NO		
Transfer/Discharge to Hospice – Medical Facility (Respite or GIP)	51	51	Bene transferred to a Medicare Certified Hospice eff (DC date)	NO	NO		
Revoked election	01	01	Bene Revoked Eff (DC date)	42	NO		
No Longer Terminally III	TR	01	Bene was discharged due to stable condition eff (DC date)	NO	NO		
Moved Out of Service Area	52	01	Bene moved out of our service area and did not transfer to a certified hospice eff (DC date)	NO	52		
Discharged for Cause	H2	01	Bene discharged for cause	NO	H2		

**NOTE:** If the Status Code is blank in the billing table, then the system will default to the status code of 01, and for Hospice patients, pull the Occurrence code 42 and discharge date.

#### How to Review:

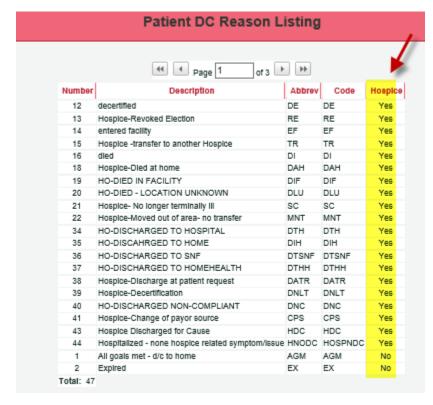
In Clinical, verify which Discharge Reasons are used for Hospice patients and should be reviewed. Go to Administration > Tables > Patient DC Reason > Print Patient DC Reason Table > View Report. By clicking on the header "Hospice", you can re-sequence the table so that all Hospice Discharge Reasons (yes) are listed together. These are the discharge reasons that need to be reviewed in the Billing tables.



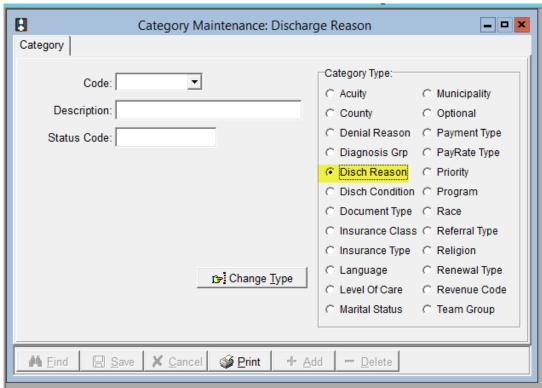


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In NDoc Billing, go to File > File Maintenance > Category > Change type to Discharge Reason. Click in the Code field to select the table.







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To easily confirm the necessary Discharge Reasons and Status Codes have been entered, click Print, then Preview to view the Discharge Reason List. The entries identified as Hospice discharge reasons in the Clinical table are the entries that should be reviewed on the billing list.

5/19/2017 1:22:13 PM	Category Lis	Page 1	
Alphabetic	HBS Empty Database:	Discharge Reasor	
Code	Description	Status-Code	
NF	Admitted to SN Facility	03	
AC	Alternate Care Program	70	
DC	Discharged for cause	H2	
EXHO	Expired at Home - Hospice PT	40	
EX	Expired HH	20	
EXF	Expired in Med Facility- Hospice PT	41	
EXUK	Expired location unknown	42	
GM	Goals Met	01	
AH	HOSPITAL	02	
MO	Moved out of service area	52	
LF	Nonpayment of /lack of funds	01	
ОТ	Other	01	
RS	Patient refused service	01	
PR	Patient remained in community	01	
REV	Revoked	01	
SC	Stable -no longer terminally ill	TR	
TRM	Transfer to hospice-med facility	51	
TR	Transferred to another agency	01	
TRHO	Transferred to hospice -home	<mark>50</mark>	
UP	Unavailable personnel	01	
MV	Unknown because patient moved	01	

### Medicare Hospice Bill Option Set requirements:

To review and update the Medicare Hospice bill Option Set(s) where necessary, follow the steps below. For Electronic Claims:

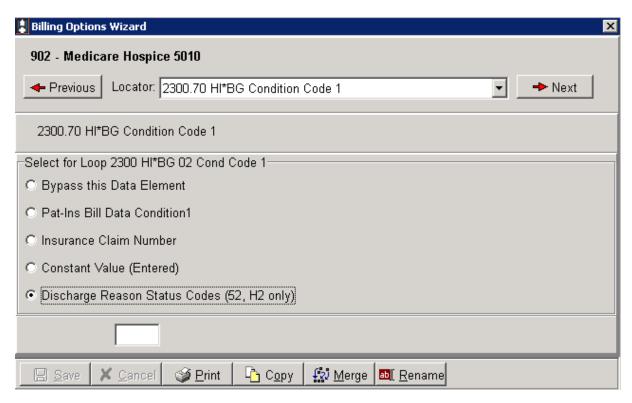
- Merge the latest "1151 Electronic 837 (Baseline)" option set (dated 5/18/17 or later) into your Medicare Hospice option set(s):
  - Go to Billing>Electronic Claims.
  - Select the "1151 Electronic 837 (Baseline)" Option Set and click on the "Options" button.
  - Once in the Billing Options Wizard, select "Merge" and enter the Medicare Hospice option set to receive the new changes.
  - After a successful merge, Exit the Billing Options Wizard and the Electronic Claims menu.
- Reopen Electronic Claims and select your Medicare Hospice set.
- Click "Options" to access the Billing Options Wizard.



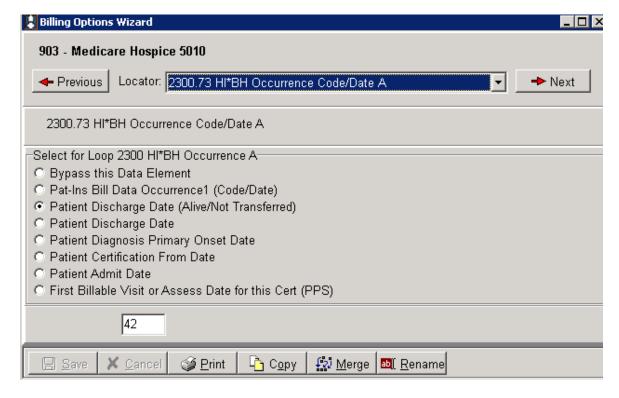


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Go to Locator 2300.70 HI\*BG Condition Code 1 and set to "Discharge Reason Status Codes (52, H2 only):



Go to Locator 2300.73 HI\*BH Occurrence Code/Date A and set to "Patient Discharge Date (Alive/Not Transferred) and enter "42" in the free text field:

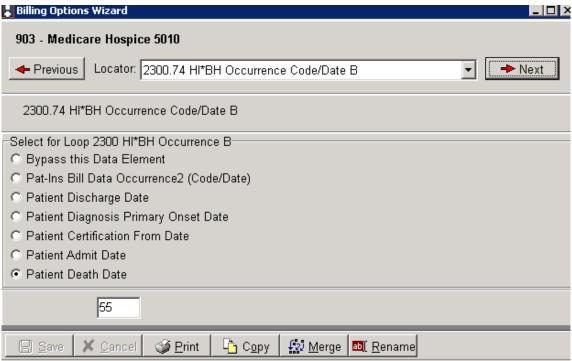




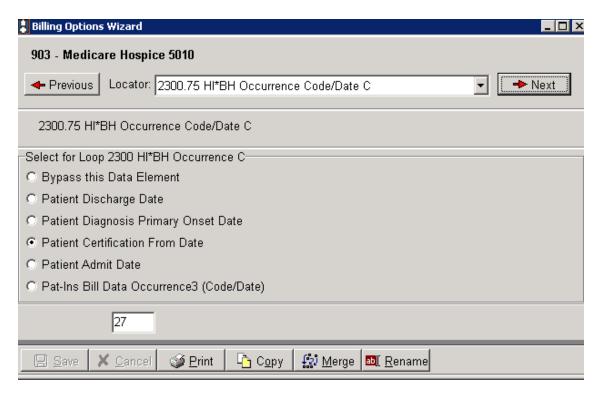


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 Go to Locator 2300.74 HI\*BH Occurrence Code/Date B and set to "Patient Death Date" and enter "55" in the free text field:



 Go to Locator 2300.75 HI\*BH Occurrence Code/Date C and set to "Patient Certification From Date" and enter "27" in the free text field:



Save Changes.

