



Hospice Discharge for Cause – JA6115

Related CR Release Date : July 18, 2008

Date Job Aid Revised: August 25, 2008

Effective Date: January 1, 2009

Implementation Date: January 5, 2009

Key Words

MM6115, CR6115, R1558CP, Hospice, Discharge

Contractors Affected

- Regional Home Health Intermediaries (RHHIs)
- Part A/B Medicare Administrative Contractors (A/B MACs)

Provider Types Affected

Hospice providers who bill Medicare RHHIs or A/B MACs for providing hospice services to Medicare beneficiaries



Effective January 1, 2009, there will be a new condition code of H2 used to identify hospice discharges for cause.

Provider Needs to Know...

- The new H2 code is to be used for claims with dates of service on or after January 1, 2009, as appropriate, to indicate that the patient meets the hospice's documented policy addressing discharges for cause.
- Providers should note that this results only in a discharge from the provider's care, not from the Medicare hospice benefit.

Background

- Section 418.26 of the Code of Federal Regulations provides discharge instructions for hospices, including for those extraordinary circumstances in which a hospice may be required to discharge a patient for cause from its services, including causes such as where patient safety or hospice staff safety is compromised.

- Currently, discharge for cause is not identified on the Medicare claim.
- In order to identify these discharges, the Centers for Medicare & Medicaid Services (CMS) asked the National Uniform Billing Committee (NUBC) to approve a new condition code.
- On May 21, 2008, the NUBC approved condition code H2 to be effective January 1, 2009.

Operational Impact	N/A
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The related MLN Matters article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6115.pdf> on the CMS website.

Reference
Materials

The official instruction (CR6115) regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R1558CP.pdf> on the CMS website. The updated *Medicare Claims Processing Manual*, Chapter 11 (Processing Hospice Claims), Section 30.0 (Billing and Payment for General Hospice Services) is attached to the CR.

Providers can review the Medicare hospice policy on discharging for cause in the *Medicare Benefit Policy Manual*, Chapter 9 (Coverage of Hospice Services under Hospital Insurance), Section 20.2.1 (Hospice Discharge). This chapter is available at <http://www.cms.hhs.gov/manuals/downloads/bp102c09.pdf> on the CMS website.
