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Implementation Date: January 5, 2009

## Hospice Discharge for Cause

### Provider Types Affected

Hospice providers who bill Medicare regional home health intermediaries (RHHI) or Medicare Administrative Contractors (A/B MAC) for providing hospice services to Medicare Beneficiaries.

### What You Need to Know

CR 6115, from which this article is taken, announces a new condition code of H2, effective January 1, 2009, to identify hospice discharges for cause. Make sure that your billing staffs are aware of this new hospice condition code.

### Background

Section 418.26 of the Code of Federal Regulations (CFR) 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. This new code (H2) 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. Please note that this results only in a discharge from the provider's care, not from the Medicare hospice benefit.

#### Disclaimer

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You 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.

## Additional Information

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You can find more information about the new hospice discharge for cause condition code by going to CR 6115, located at <http://www.cms.hhs.gov/Transmittals/downloads/R1558CP.pdf> on the CMS website. There, you will find the updated *Medicare Claims Processing Manual*, Chapter 11 (Processing Hospice Claims), Section 30.0 (Billing and Payment for General Hospice Services) as an attachment to that CR.

If you have any questions, please contact your RHHI or A/B MAC at their toll-free number, which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

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