

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 1428</b>	<b>Date: September 24, 2014</b>
	<b>Change Request 8795</b>

**Transmittal 1400, dated August 1, 2014, is being rescinded and replaced by Transmittal 1428 to correct the first sentence of the Background section. The reference to three days is changed to five days. All other information remains the same.**

**SUBJECT: Correction to Hospice Notice of Revocation Processing**

**I. SUMMARY OF CHANGES:** This instruction requires an update to the Direct Data Entry (DDE) system to allow providers access to all fields necessary to complete a termination or revocation of a hospice election prior to submitting their final claim.

**EFFECTIVE DATE: January 1, 2015**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: January 5, 2015**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	N/A

**III. FUNDING:**

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**One Time Notification**

# Attachment - One-Time Notification

Pub. 100-20	Transmittal: 1428	Date: September 24, 2014	Change Request: 8795
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**IMPLEMENTATION DATE: January 5, 2015**

**I. GENERAL INFORMATION**

**A. Background:** When a hospice period is terminated the hospice provider is required to submit the termination or revocation notice within five calendar days. If the provider is not prepared to submit their final claim they must submit the 08XB type of bill to terminate the hospice period. Currently, there are fields required to submit this form through DDE that providers do not have access to and therefore, contractors must facilitate the completion of the submission for the hospice. This instruction requires updates to the Direct Data Entry (DDE) system to allow providers to complete all fields required for complete submission of the notice of revocation.

**B. Policy:** No change in policy.

**II. BUSINESS REQUIREMENTS TABLE**

*"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.*

Number	Requirement	Responsibility								
		A/B MAC			D M E	Shared- System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
8795.1	Medicare contractors shall ensure all fields necessary for a complete submission of the 08XB type of bill for revocation or termination of a hospice period are accessible to providers using Direct Data Entry (DDE).					X				

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D I
		A	B	H H H	M A C	
8795.2	MLN Article: A provider education article related to this instruction will be available at <a href="http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/">http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.			X		

### IV. SUPPORTING INFORMATION

**Section A: Recommendations and supporting information associated with listed requirements: N/A**

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:

**Section B: All other recommendations and supporting information: N/A**

### V. CONTACTS

**Pre-Implementation Contact(s):** Wilfried Gehne, [Wilfried.Gehne@cms.hhs.gov](mailto:Wilfried.Gehne@cms.hhs.gov)

**Post-Implementation Contact(s):** Contact your Regional Coordinator.

### VI. FUNDING

**Section A: For Medicare Administrative Contractors (MACs):**

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**ATTACHMENTS: 0**