
-Program Memorandum Intermediaries

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

Transmittal A-03-055

Date: June 27, 2003

CHANGE REQUEST 2732

SUBJECT: Disclosure of Information Requirements Related to Hospice Claims

I. GENERAL INFORMATION

- A. Background:** The purpose of this program memorandum (PM) is to address and clarify the responsibilities of the Regional Home Health Intermediaries (RHHIs) to share provider information related to hospice claims, where the claim of another provider cannot process due to service dates overlapping a hospice claim. This instruction parallels an existing directive specific to home health providers.

Contractors perform the administrative responsibilities for the Medicare Program by processing bills for covered medical services submitted by authorized Medicare providers. The claims payment function involves sharing beneficiary eligibility information among providers. Certified providers and their billing agents are afforded automated access to beneficiary eligibility data through the Common Working File (CWF).

In November 2000, CMS provided written instructions stating that RHHIs may share contact information regarding home health providers with other institutional providers in order to resolve billing conflicts with home health episodes. However, these instructions are specific to HHAs and do not convey to other provider types.

To accommodate the shift to the Home Health Prospective Payment System in 2000 and permit the sharing of claims information, CWF expanded its query access system (HIQA) to provide on-line inquiry transaction citing information pertinent to determining primary HHA status. This system, HIQH: Health Insurance Query for HHAs, allows different types of institutional providers to inquire about a beneficiary and receive an immediate response about their Medicare eligibility based on available claims data. Since beneficiaries often move from home health to hospice care, both HHAs and hospices can employ HIQH as their single CWF inquiry transaction as of October 1, 2000. Further, HIQH includes the information previously made available in HIQA. This transaction as well as HIQA is available to all institutional providers through their intermediaries.

Because problems with overlap in hospice benefit periods is similar to the problems with home health episodes, CMS is expanding the authority for information sharing so that hospices too may follow up with their fiscal intermediary (FI) through existing provider inquiry channels to attain contact information concerning another hospice with an overlapping benefit period. The FI will instruct the provider regarding which RHHI to contact about a particular hospice. CMS has confirmed that each RHHI may provide contact information on either the provider or contractor number the inquiring provider submits given the HIQH responses they receive that show an overlapping period affecting the inquirer's ability to bill. Information released will be determined by each RHHI, such as name and address, but must be enough for the inquiring provider to contact either the hospice, if under that RHHI's jurisdiction, or another RHHI if the provider number from the HIQH response is attached to an alternate RHHI. If there is an instance where a provider is an individual, and uses a Social Security Number as a tax identification number, information cannot be released since it would violate the individual's right to privacy.

- B. Policy:** The requirement that RHHIs may share contact information with home health providers and other institutional providers is found in the HIM 11 §468.4 and MIM §3640.4. Refer to CR 2566 for disclosure requirements. Refer to the Privacy Act of 1974, 5 U.S.C §552a. for disclosures of CWF eligibility data. Refer to the Health Insurance Portability and Accountability Act, Standards for Privacy of Individually Identifiable Health Information, 45 CFR §164.506(c)(3).

II. BUSINESS REQUIREMENTS

Requirement #	Requirements	Responsibility
2732.1	Medicare intermediaries shall comply with requests from any institutional provider to share provider information related to hospice claims due to overlapping service dates.	RHHIs
2732.2	Medicare intermediaries shall post information on their Web sites, within two weeks of receiving this instruction, to educate providers about information sharing related to hospice claims. If you have a listserv that targets the affected provider communities, you shall use it to notify subscribers that important information about “Clarifying RHHI Responsibilities for Hospice Claims” is available on your website.	RHHIs
2732.3	Medicare Intermediaries shall publish information in their next regularly scheduled bulletin to educate providers about information sharing related to hospice claims.	RHHIs

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

B. Design Considerations: N/A

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact:
This instruction was prepared in response to RHHI concerns over existing inquiry workloads. This PM will ease the resolution of such inquiries.

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. ATTACHMENT N/A

<p>Version: final draft May 5, 2003</p> <p>Implementation Date: July 11, 2003</p> <p>Discard Date: May 23, 2004</p> <p>Post-Implementation Contact: CMS Regional Office</p>	<p>Effective Date: July 11, 2003</p> <p>Funding: These instructions should be implemented within your current operating budget</p> <p>Pre-Implementation Contact: Kelly Buchanan (410) 786-6132</p>
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