

CMS UPDATES MSN FOR HOSPICE SERVICES

The Centers for Medicare & Medicaid Services (CMS) has **responded** to criticism detailing how Medicare contractors present hospice service charges in the Medicare Summary Notice (MSN) to beneficiaries. In recent years, CMS has added new reporting requirements for visit data on hospice claims. This resulted in an expansion of the information of the claim record to better understand the services provided under the hospice benefit. However, the new data cause confusion for Medicare beneficiaries when they reviewed their MSN.

Effective July 1, 2012, with an implementation date of July 2, 2012, CMS will revise the presentation of hospice cost charges on the MSN. The revised MSN will be similar to the home health MSN and more accurately reflect the claim data.

This change should reduce beneficiary confusion and present the hospice claim data more clearly. Visit-charge descriptions will inform beneficiaries that the hospice service charge is included in the payment for the hospice daily level of care. This will alleviate the perception of some hospice beneficiaries that they will be billed individually for covered services.

Should you have any questions, please contact:

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