

Mass Adjustments to Correct Home Health (HH) Claims Priced with Incorrectly Re-Coded Health Insurance Prospective Payment Systems (HIPPS) Codes

Situation

On January 1, 2016, Change Request (CR) 9212 reactivated reason code 37071; however, it caused certain Home Health (HH) claims to price incorrectly. The Fiscal Intermediary Shared System (FISS) Maintainer corrected this problem on March 7, 2016.

Impact to Providers

HH claims impacted by this issue may have either been underpaid or overpaid.

StatusPalmetto GBA will adjust claims that meet the following criteria:

- Processed claims after 01/01/16 thru to 03/07/16
- Type of Bill (TOB): 32x (excluding TOB 322)
- HCPCS field (the provider submitted HCPCS code) matches Return HIPPS1 (HIPPS code returned from the QIES database)

The claim adjustments will be completed within the next 60 calendar days. No provider action is required.

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Medicare Cost Report CONFIRMATIONS

If you are seeking confirmation of the receipt of your cost report and you have confirmation it was received by us prior to June 7, 2016, you may send an email to costreport.reopening@palmettogba.com. Please include your PTAN, NPI, the reporting period, date you submitted your cost report and, if possible, proof of delivery.

You may also call (803) 763-1251 and leave a voicemail with the same information.

You will receive a timely response. If your cost report was received on or after June 7, 2016, it is considered late and subject to payment suspension. Payments will not be resumed until the cost report is received and determined to be acceptable. The acceptance determination may take up to 30 days to complete from date of filing.

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DIRECT DATA ENTRY (DDE) HOURS OF AVAILABILITY ARE CHANGING JULY 1, 2016

Beginning July 1, 2016, the JM Direct Data Entry (DDE) hours of availability for Monday to Friday will be 6 a.m. ET to 8 p.m. ET. This change will allow Companion Data Services (CDS) the ability to begin the nightly data cycle one hour earlier. Saturday hours will remain unchanged with availability from 6 a.m. ET to 4 p.m. ET. DDE is not available on Sunday. [READ MORE >>](#)

RESPOND TO ADRS VIA ESERVICES

AS A PROVIDER, YOU MAY BE SPENDING TIME, EFFORT AND MONEY TO ENSURE MEDICAL RECORDS ARE SENT TO PALMETTO GBA IN A TIMELY FASHION. IF YOU ARE AN ESERVICES USER, YOU HAVE THE ADVANTAGE OR SUBMITTING

MEDICAL RECORDS VIA OUR FREE ESERVICES. THIS WILL ELIMINATE MAILING TIME AND COSTS! YOU WILL ALSO RECEIVE A CONFIRMATION RECEIPT LETTING YOU KNOW WHEN THE RECORDS ARE RECEIVED. [READ MORE >>](#)

CMS WILL BE IMPLEMENTING A THREE-YEAR MEDICARE PRE-CLAIM REVIEW DEMONSTRATION FOR HOME HEALTH SERVICES IN THE STATES OF ILLINOIS, FLORIDA, AND TEXAS BY THE END OF 2016.

CMS plans to include Michigan, and Massachusetts in the demonstration in 2017. CMS is testing whether pre-claim review helps reduce expenditures, while maintaining or improving quality of care. Additionally, CMS believes the demonstration will also help assure services are provided in compliance with applicable Medicare coverage and payment rules, thereby assisting in the prevention of fraud, waste, and abuse. This demonstration should not delay care to Medicare beneficiaries and does not alter the Medicare home health benefit.

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Upcoming Events

TAHC&H 47TH ANNUAL MEETING

August 10-11 | Frisco, Texas

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OCHCH 2016 ANNUAL CONFERENCE AND TRADESHOW

September 12-14 | Columbus, Ohio

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NAHC ANNUAL MEETING AND EXPOSITION

October 23-25 | Orlando, Florida

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PMB HOME HEALTH SEMINARS

September 7-13 | Las Vegas, Nevada

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HOME HEALTH BEGINNER MEDICARE SEMINAR

November 10-11 | Houston, Texas

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