

Hospice Medicare Billing Codes Sheet

Type of Bill (FLB) (1st 4 digits hospital benefit or 2nd hospital benefit)			
80A	Notice of Election (NOE)	803	1st date of service
80B	Notice of Termination/Revocation (NOTR)	803	Continuing claim
80C	Change of hospice	804	Discharge claim
80D	Cancel NOE/benefit period	807	Adjustment claim
80E	Nonpayment claim	809	Cancel claim
80J	Admit thru discharge		

CMS Pub. 100-04, Chapter 11, Section 30.1.2 & 30.1

Type of Admission (FL14)			
1	Emergency	3	Elective
2	Urgent	4	Trauma
		9	Information not available

CMS Pub. 100-04, Chapter 25, Section 75.1

Point of Origin (Source of Admission) (FL15)			
1	Non-health care facility	4	Transfer from Another Health Care Facility
2	Office or physician's office		
4	Transfer from hospital	6	Court/Law Enforcement
5	Transfer from SNF or ICF	8	Information not available

CMS Pub. 100-04, Chapter 25, Section 75.1

Patient Status (FL7) (as of "To" date on claim)	
04	Discharged to home, resited, or decertified
05	Still a patient ("To" date must be last day of month)
40	Expired at home (see occurrence code 55)
41	Expired at medical facility (see occurrence code 55)
42	Expired - (date unknown) (see occurrence code 55)
50	Discharged/Transferred to hospice - home (reside in CHC)
51	Discharged/Transferred to hospice - medical facility (reside in GIP)

CMS Pub. 100-04, Chapter 11, Section 30.1

Rebate Reference - CMS Pub. 100-04: <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Information-Only-Manuals-IOBs.html>

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Condition Code (FL 18-20)	
01	Discharge for cause (i.e. patient/staff safety)
02	Discharge for patient unavailability, inability to resolve care, or out of service area

CMS Pub. 100-04, Chapter 11, Section 30.1

Date Change Reason Code (DORC) (FL 18-20) & Adjustment Reason Code (ARC) (DORC only)			
Description	DORC	ARC	TOB
Change in dates of service	08	RP	0X7
Change in charges	01	R10	0X7
Change in revenue/HOPEC code	02	RH	0X7
Cancel/correct provider NPI/C	05	R1	0X3
Cancel/duplicate or OIG payment	06	R1	0X3
Any other/multiple change(s)	09	R88	0X7
Change in patient status	03	RH	0X7

CMS Pub. 100-04, Chapter 1, Section 100.1.2.1

Occurrence Codes (FL 31-34)	
25	Date of certification or recertification
42	Date of revocation (ONLY)
55	Date of death (when patient status = 40, 41 or 42)

CMS Pub. 100-04, Chapter 11, Section 30.1

Occurrence Span Codes (FL 35-36)	
77	Uncovered days due to untimely recertification OR untimely MOE
81	Multiple single days. From/To dates of each day

CMS Pub. 100-04, Chapter 11, Section 30.1

NOTE: The codes listed on this billing codes sheet represent those most frequently submitted on hospice Medicare claims. A complete listing of all codes is accessible from the National Uniform Billing Committee (NUBC) Official UB-04 Data Specifications Manual <http://www.nubc.org>



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Medicare Hospice Diagnosis Codes

Anthony S. Fauci



Medicare Hospice Diagnosis Codes:

Reviewing **Medicare Hospice Diagnosis Codes**: Unlocking the Spellbinding Force of Linguistics

In a fast-paced world fueled by information and interconnectivity, the spellbinding force of linguistics has acquired newfound prominence. Its capacity to evoke emotions, stimulate contemplation, and stimulate metamorphosis is actually astonishing. Within the pages of "**Medicare Hospice Diagnosis Codes**," an enthralling opus penned by a very acclaimed wordsmith, readers attempt an immersive expedition to unravel the intricate significance of language and its indelible imprint on our lives. Throughout this assessment, we shall delve to the book is central motifs, appraise its distinctive narrative style, and gauge its overarching influence on the minds of its readers.

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