

Hospice Discharges & Revocations

This chart provides instructions on the appropriate use of discharge (patient) status and occurrence codes when submitting a hospice claim.

Discharge Reason	Discharge (Patient) Status Code	Occurrence Code (OC)	Condition Code (CC)	Impact on Medicare Hospice Benefit (MHB)	Common Working File (CWF)	Billing Requirements
Beneficiary unavailable/in-availability to receive hospice services from the hospice which has been responsible for the patient	Report appropriate NUBC discharge status code that best describes the beneficiary's situation.	N/A	52	Current hospice benefit period will be terminated.	Claim will terminate the beneficiary's current hospice benefit period as of the "Through" date on the claim.	<p>Examples of when such a code could be used include, but are not limited to:</p> <ul style="list-style-type: none"> • Patients who relocate to another part of the country or go on vacation outside of the hospice's service area. • A hospice patient is receiving treatment for a condition unrelated to the terminal illness or related conditions in a facility with which the hospice does not have a contract, as a result is unable to provide hospice services to that patient. <p>Do not report OC 42, patient status 30, 50 or 51, or condition code H2.</p>

Discharge Reason	Discharge (Patient) Status Code	Occurrence Code (OC)	Condition Code (CC)	Impact on Medicare Hospice Benefit (MHB)	Common Working File (CWF)	Billing Requirements
Beneficiary transfers to another hospice.	50 – Beneficiary is transferring to home hospice OR 51 – Beneficiary is transferring to an inpatient medical facility	N/A	N/A	Current hospice benefit period will not be terminated.	Claim will not terminate the current hospice benefit period.	Discharging hospice: <ul style="list-style-type: none"> Do not use any discharge status code other than 50 or 51. Do not report OC 42. Admitting/receiving hospice: <ul style="list-style-type: none"> Submit a notice of change of provider (TOB 8XC).
Hospice determines that the beneficiary is no longer terminally ill.	Report the appropriate NUBC discharge status code that best describes the beneficiary's situation.	N/A	N/A	Current hospice benefit period will be terminated.	Claim will terminate the beneficiary's current hospice benefit period as of the "Through" date on the claim.	Do not use OC 42 for this situation. Occurrence Span Code (OSC) 77 is not appropriate when a required face-to-face encounter is not timely.
Discharge for cause; and the beneficiary is transferring to another hospice. The hospice determines the beneficiary meets their internal policy regarding discharge for cause.	50 – Beneficiary is transferring to home hospice OR 51 – Beneficiary is transferring to an inpatient medical facility	N/A	H2	Current hospice benefit period will not be terminated.	Claim will not terminate the current hospice benefit period.	Discharging hospice: <ul style="list-style-type: none"> Do not use any discharge status code other than 50 or 51. Do not report OC 42. Admitting/receiving hospice: Submit a notice of change of provider (TOB 8XC).

Discharge Reason	Discharge (Patient) Status Code	Occurrence Code (OC)	Condition Code (CC)	Impact on Medicare Hospice Benefit (MHB)	Common Working File (CWF)	Billing Requirements
Discharge for cause; There is no transfer involved , and the hospice determines the beneficiary meets their internal policy regarding discharge for cause.	Report appropriate NUBC discharge status code that best describes the beneficiary's situation.	N/A	H2	Current hospice benefit period will be terminated.	Claim will terminate the beneficiary's current hospice benefit period as of the "Through" date on the claim.	Do not report OC 42, patient status 30, 50 or 51, or condition code 52
Revocation: Beneficiary no longer wants the Medicare hospice benefit.	Report appropriate NUBC discharge status code that best describes the beneficiary's situation.	Report OC 42 and the date of revocation on the final claim.	N/A	Current hospice benefit period will be terminated.	Claim will terminate the current hospice benefit period as of the OC 42 date.	
Beneficiary is Deceased	Report the appropriate NUBC discharge status code that best describes the place in which the beneficiary died (40, 41, or 42). Discharge status code 20 is not used on hospice claims.	Report OC 55 and the beneficiary's date of death	N/A	Current hospice benefit period will not be terminated.	Claim will not terminate the hospice benefit period.	The date of death reported on the claim with OC 55 will be posted to the Medicare Master Beneficiary Record.

Key points:

Discharge Status Codes

Medicare contractors will set the revocation indicator on a beneficiary's hospice benefit period when a hospice claim is received with any discharge status code other than 30, 40, 41, 42, 50 or 51 and when occurrence code 42 is not present.

- Medicare contractors will set the end date of the beneficiary's hospice benefit period to match the claim "Through" date when a hospice claim is received with any discharge status code other than 30, 40, 41, 42, 50 or 51 and occurrence code 42 is **not** present.
- Medicare contractors will set the end date of the beneficiary's hospice benefit period to match the occurrence code 42 date when a hospice claim is received with any discharge status code other than 30, 40, 41, 42, 50 or 51 and occurrence code 42 **is** present.

Billing Reminders: Hospice claims will return to provider (RTP) where:

- Both condition code 52 and condition code H2 are present; Condition code 52 is present and the patient status code is 30;
- Condition code H2 is present and the patient status code is 30;
- Condition code H2 is present with occurrence code 42;
- Condition code 52 is present with occurrence code 42; or
- Patient status code 40, 41, or 42 is present and occurrence code 55 is **not** present

Reminder!

Hospices must bill for their Medicare beneficiaries on a monthly basis. Monthly billing should conform to a calendar month (i.e. limit services to those in the same calendar month if services began mid-month) rather than a 30 day period which could span two calendar months.