RelayHealth

Hospice Enrollment Transaction

Hospice Provider Election Transaction Status Report Guide

Version 01

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1 Background

The Health and Human Services Office of Inspector General ("OIG") published a report indicating that Medicare Part D paid for prescription drugs in 2016 that should have been paid for under the Medicare Part A hospice benefit. https://oig.hhs.gov/oas/reports/region6/61708004.pdf.

In the report, OIG stated that Medicare Part D paid $422.7 million for prescription drugs for beneficiaries enrolled in hospice in 2016 that should have been paid for under Medicare Part A.

Medicare Part A pays a per diem payment for each beneficiary enrolled in hospice, "regardless of the number of services provided." Prescription drugs to treat the beneficiary's pain, as well as symptoms related to the terminal illness and related conditions should be covered under the hospice per diem. If those same drugs are being paid for under Medicare Part D, these are considered duplicate payments.

As a result of the audit, OIG believes that in 2016 Medicare Part D paid for $422.7 million in prescriptions that it believes $160.8 million should have been paid for by Medicare Part A and $261.9 million should have been paid by hospice organizations or hospice beneficiaries.

Hospices provided reasons for these payments such as:

- They didn't know that the medication was prescribed by a provider not associated with the hospice and filled by a pharmacy other than the hospice pharmacy
- The drug was miscoded as non-covered
- The drug was dispensed close to the hospice admission, so the hospice election was not yet processed
- The drug was billed Part D in error by the pharmacy
- The hospice believed there was a non-Medicare third party paying

OIG recommended that oversight be performed by Centers for Medicare and Medicaid Services ("CMS"), to ensure drugs covered under the hospice per diem not be paid by Medicare Part D.

To minimize the Part D payments, Part D plans need timely notification when a beneficiary enrolls in hospice to enact appropriate edits that deny payment of drugs under Part D, where appropriate.

1.1 What Hospice Enrollment Data Sharing Solves

In 2018 1.55 million Medicare beneficiaries were enrolled in hospice care for one or more days. The average length of service for Medicare beneficiaries was 89.6 days, with the median length being 18 days.

Research indicates that due to Medicare Administrative Contractor (MAC) payment processes and system processing constraints, the receipt of data from the Common Working File can be as long as 65 days.

Lag times in Hospice Enrollment data coordination from CMS can result in a Part D plan inadvertently covering a drug that should be covered under the hospice benefit or by the beneficiary. CMS guidance encourages hospice providers to report a beneficiary's Hospice Enrollment directly to the beneficiary's Part D sponsor prior to sending claims for drugs administered during hospice.

Hospice providers have up to 5 days to submit enrollment notifications (notice of election) to CMS and the process proposed in the hospice enrollment data sharing project seeks to reduce Part D notification time to a maximum of 48 hours after the notification is sent.

1.2 How Hospice Enrollment Data Sharing Works

The hospice submits the Notice of Election to the MAC by EDI using the 837 Health Care Claim: Institutional (837I) transaction based on the ASC X12 Technical Report Type 3 (TR3), version 005010X223a2 837I. These notices may be any of the following: election, transfer, termination/revocation, changes or cancellation.

Hospices, through their software or clearinghouses, are encouraged to send a copy of the 837I NOE to RelayHealth (**RHPS**) using the RelayHealth External Managed File Transfer (**MFT**) System. The RHPS MFT service validates the 837I X12 implementation standard and transfers accepted transaction data to the Medicare Part D Transaction Facilitator (**PDTransFac**) for processing.

The PDTransFac service validates that the required NOE data is present. When the required data is available PDTransfac creates a real-time NCPDP Nx transaction to notify the Part D plan about the beneficiary hospice election, changes, or cancellation.

During Phase I of the pilot, only 837I transaction information will be sent to the Part D Plan. Data entered by hospice providers into Direct Data Entry (DDE) will not be sent.

2 Report Overview

The Hospice Provider Election Transaction Status Report provides the processing status outcomes for transactions that were accepted by 837I NOE submission processing and transferred to PDTransFac.

The report shows the transactions with a final status from NOE and Part D validations and the Part D response status.

The report will provide visibility to:

- Transactions sent to PDTransFac that passed the syntax edits (did not return a 999 or TA1 reject)
- Transaction data that passed the syntax edits but rejected due to not passing a business rule

  - Reject codes listed in the report will define the errors found by PDTransfac in the data that was transferred from the 837I interchange submission process

- Valid transactions where a beneficiary match was not found
- Valid transactions where a beneficiary match was found
- Valid transactions where a beneficiary enrollment in Part D was found
- Status of Part D plan notification
- Part D plan information (contract ID, coordination of benefits contacts)

3 Document Purpose

The purpose of this document is to describe the Hospice Provider Election Transaction Status Report, fields in the report, naming convention, format, and delivery methods. It includes the report data header definitions.

4 Report Delivery

4.1 Delivery Method

RHPS delivers the report by secure email to the hospice provider with the subject: SECURE: [NPI]_ Hospice_Provider_Election_Transaction_Status_[YYYYMMDD].txt

In an instance of empty/blank report, the email subject line will contain the word "NONE."

4.2 Frequency

RelayHealth Pharmacy Systems (RHPS) generates the Hospice Provider Election Transaction Status Report daily to report the transaction status activity from the previous day.

4.3 Filename

[NPI]_Hospice_Provider_Election_Transaction_Status_[CCYYMMDD].txt.

The date is the report run date in numeric format CCYY – 4-digit year, MM – 2-digit month, DD – 2-digit day of the month.

4.4 Format

The report will be tab delimited .txt formatted.

5 Report Field Definitions

The following table lists the report headers, header definition, data type and maximum characters.

Header	Description/Business Rules	Format (Length)
Provider NPI	Hospice NPI from the 837I NOE	X (10)
Claim #	837I NOE Claim ID from CLM01	X (38)
Event Type	- NOE - Notice of Election - Change NOE - (NOE-C) Transaction to change/correct a previous NOE - Cancel NOE - (NOE-X) Transaction to cancel a previous NOE - NOC - Notice of Cancellation of an election - Change NOC - (NOC-C) Transaction to change/correct a previous NOC - Cancel NOC - (NOC-X) Transaction to cancel a previous NOC - NOTR - Notice of Termination/Revocation - Change NOTR - (NOTR-C) Transaction to change/correct a previous NOTR - Cancel Unspecified - *See reported transaction status details for more information*	
Hospice MBI	Medicare Beneficiary Identifier from the 837I NOE transaction	X (11)

Header	Description/Business Rules	Format (Length)
MBI	Medicare Beneficiary Identifier from Part D Plan If there is no Part D match the Hospice MBI is used	X (11)
DOB	837I NOE beneficiary date of birth	CCYYMMDD
Hospice Pt Last	837I NOE beneficiary last name	AN (1/60)
Hospice Pt First	837I NOE beneficiary first name	AN (1/35)
CMS Pt Last	CMS file beneficiary last name	X (15)
CMS Pt First	CMS file beneficiary first name	X (12)
Claim Date	837I Date	CCYYMMDD
Date Received by RHP switch	Date 837I Received	CCYYMMDD
Switch Status	837I NOE transaction status A - Accepted R - Rejected Rejected transactions are not processed for messaging to Part D plans. If Part D should receive the notice, correct the errors, and resubmit	A (1)
Validation Error Code	Code identifying the transaction data validation error found during RelayHealth system processing of the NOE transaction data Note: Validation error codes are defined in the document named "Valid Reject Codes for The Hospice Provider Election Transaction Status Report." You can find the document posted in the Related Documents list in the Hospice Providers section of the Hospice page on the Medicare Part D Transaction Facilitator website (MediFacD) at: https://medifacd.mckesson.com/Hospice/Hospice-Providers/	
Part D Match	Y - Yes N - No The Part D plan was found for the beneficiary based on MBI & DOB	A (1)

Header	Description/Business Rules	Format (Length)
Contract ID	Part D Plan contract ID	X (5)
Part D Plan Contact Last Name	Part D plan contact last name	
Part D Plan Contact First Name	Part D plan contact first name	
Part D Plan Contact Phone Number for Hospice	Phone number of Part D plan contact for Hospice related issues	X (10)
Part D Plan Contact Email for Hospice	Email address of the Part D plan contact for Hospice related issues	
Part D Plan Effective Date	Beneficiary effective date for the contract ID reported	CCYYMMDD
Part D BIN/IIN	Bank identification number for the Part D Plan	9(8)
Part D PCN	Processor control number for the Part D Plan	X (10)
Part D Group	Group number for the Part D plan	AN (15)
Part D Cardholder ID	Part D plan cardholder ID for the beneficiary	X (20)
Part D N Timestamp	Date and time the N transaction was sent to the Part D plan	CCYYMMDD: HHMMSS
Part D status	A – Accepted R - Reject Status on Part D Nx Response	A (1)

Header	Description/Business Rules	Format (Length)
Reject Code1	Nx transaction reject reason code1 received from the Part D Plan Each of up to 5 possible reject codes received from the Part D plan will be listed separately in the Reject Code1 – Reject Code5 fields Note: Part D Plan reject codes are defined in the document named "Valid Reject Codes for The Hospice Provider Election Transaction Status Report." You can find the document posted in the Related Documents list in the Hospice Providers section of the Hospice page on the Medicare Part D Transaction Facilitator website (MediFacD) at: https://medifacd.mckesson.com/Hospice/Hospice-Providers/	X (3)
Reject Code2	Nx transactions Part D plan Reject Reason Code2	X (3)
Reject Code3	Nx transactions Part D plan Reject Reason Code3	X (3)
Reject Code4	Nx transactions Part D plan Reject Reason Code4	X (3)
Reject Code5	Nx transactions Part D plan Reject Reason Code5	X (3)
Try count	The number of message submission tries for eligibility rejections	X (2)
Final Try	Whether this was the final try to submit an Nx message to the Part D plan Y - Yes N - No	X (2)

6 Report Example Scenarios

Report samples for transaction scenarios can be found on the Hospice Providers section of the Hospice page on the Medicare Part D Transaction Facilitator website (MediFacD) at https://medifacd.mckesson.com/Hospice/Hospice-Providers/

Document Name: Hospice Provider Election Transaction Status Report Guide Samples.