
Program Memorandum Intermediaries

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

Transmittal A-02-036

Date: MAY 1, 2002

CHANGE REQUEST 2135

SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) Institutional 837 Health Care Claim - Outpatient Hospice Implementation Direction

This Program Memorandum (PM) provides additional information for intermediaries and their standard systems and is a follow-up to Transmittal A-02-014, Change Request 2028, dated February 12, 2002.

Outpatient Hospice Claims via the 837

The 837 2300 loop Admission Date segment must be used to report the start of care date for outpatient hospice claims.

Intermediaries should advise their submitters/providers via their next scheduled bulletin (or Web site) to use the 2300 loop Admission Date segment to submit the start of care date for outpatient hospice claims for test (and later, for production) version 4010 claims and to submit "0001" as a default value for the hour and minute (HHMM) part of the admission date data element if the information is not available.

Outpatient Hospice claims via Direct Data Entry (DDE)

The admission hour (HH) is available via DDE whereas the minutes (MM) are not. Notify your submitters/providers via your next scheduled bulletin (or Web site) to submit a compliant numeric hour ("00" is acceptable if unknown) for outpatient hospice claims submitted via DDE. For purposes of coordination of benefits (COB) processing, the HH and MM must be submitted by your standard system. Your standard system will create a default value of "01" for the MM and submit this value for COB.

The effective date for this PM is May 1, 2002.

The implementation date for this PM is October 1, 2002.

These instructions should be implemented within your current operating budget.

This PM may be discarded after October 31, 2004.

Medicare contractor questions concerning this PM may be directed to Matt Klischer at (410) 786-7488, or mklischer@cms.hhs.gov.

Any provider, clearinghouse, or other vendor questions related to this PM should be directed to their servicing Medicare intermediary(s).