CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1799	Date: February 17, 2017
	Change Request 9932

SUBJECT: Preventing Hospice Notices of Election with Future Dates

I. SUMMARY OF CHANGES: There are currently future date edits for statement dates on notices, but these edits exclude notice type of bills. This change request (CR) will prevent future dates from being accepted in the admission and from date fields of a hospice notice.

EFFECTIVE DATE: July 1, 2017

*Unless otherwise specified, the effective date is the date of service.

IMPLEMENTATION DATE: July 3, 2017

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE			
N/A	N/A			

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Attachment - One-Time Notification

Pub. 100-20 Transmittal: 1799 Date: February 17, 2017 Change Request: 9932

SUBJECT: Preventing Hospice Notices of Election with Future Dates

EFFECTIVE DATE: July 1, 2017

*Unless otherwise specified, the effective date is the date of service.

IMPLEMENTATION DATE: July 3, 2017

I. GENERAL INFORMATION

A. Background: There is currently no edit in place to prevent a future date from being posted to the admission and from date fields in a notice of election (8XA) or other notice types of bill (8XB, 8XC, 8XD, 8XE) when submitted by the hospice. While this is an uncommon error, it is an error that can prove costly. Future dates should not be accepted on the hospice notice to prevent this error from occurring.

B. Policy: NA

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
					D M E	M System				Other
		A	В	H H H	M A C	F I S S	M C S		_	
9932.1	The contractor shall create an edit to prevent notices from being accepted when there is a future date present in the admission date field or the from date field on an election (8XA), termination (8XB), transfer (8XC), cancellation (8XD), or change of ownership (8XE) types of bill.					X				
9932.1.1	The contractor shall return to the provider notices when there is a future date present in the admission date or the from date field.			X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B MAC			C E D
		A	В	H H H	M A C	Ι
9932.2	MLN Article: A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within 5 business days after receipt of the notification from CMS announcing the availability of the article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.			X		

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information: N/A
Requirement	
Number	

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Charles Nixon, Charles.Nixon@cms.hhs.gov , Wilfried Gehne, Wilfried.Gehne@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0