

## **OASIS** Alert

## **Education: Bill Correctly For Unexpected Hospitalization**

Consider PEPs before discharging early.

Scenario: A patient admitted to your home health agency received a skilled service on Monday, but then had an unexpected hospital admission that evening.

Question: What action do you take?

A) Bill for the service and follow OASIS guidelines to discharge the patient. Then readmit when the patient is ready to return to home care.

B) Bill for the service and either transfer or discharge the patient according to your agency's policies.

C) Consider that visit a "no charge" one because you cannot bill for a service on the same day as a hospital admission.

Answer: B. A home health agency may bill for skilled services provided on the same day of an inpatient admission or on the day of discharge from an inpatient stay, the regional home health intermediary **Palmetto GBA** says in question 5 of the Home Health Coalition's July 13 question and answer session. This means that if all other Medicare criteria were met, the agency would receive payment for the date of admission to --and/or the date of discharge from -- an inpatient facility.

Caution: The key is to be sure the skilled service is correctly billed on the date of admission or the date of discharge. Other than those days, once the patient is in an inpatient hospital or skilled nursing facility, the facility "continues to have priority over claims for home health services," the Q&A explains.

You Are Not Required To Discharge

OASIS guidelines do not require that a patient be discharged from home care when admitted to an inpatient facility, Palmetto instructs. If the home health agency decides not to discharge this patient, and the patient returns to the HHA before the end of the 60-day episode, the same episode continues.

Heads up: If the episode began before Jan. 1, 2008 a significant change in condition (SCIC) adjustment may apply, the RHHI cautions

Beware PEPs: If the agency decides to discharge the patient, and then readmits before the 60-day episode period is over, the episode would be divided into two shortened episodes and the first episode would receive a partial episode payment (PEP) adjustment. "This would likely reduce the agency's payment overall," Palmetto says.

Note: For an explanation of the PEP adjustment, see **Eli's** OASIS Alert, Vol. 9, No. 2, p. 12. Palmetto's Home Health Coalition July 13 Q&As are at <u>www.palmettogba.com</u>.