



News Flash - Medicare Remit Easy Print (MREP) software allows professional providers and suppliers to view and print the Health Insurance Portability and Accountability Act (HIPAA) compliant 835. This software, which is available for free can be used to access and print RA information, including special reports, from the HIPAA 835. Please go to your Carrier or DME MAC's website to download the MREP software. To find your carrier or DME MAC's web address, see <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

MLN Matters Number: MM5794

Related Change Request (CR) #: 5794

Related CR Release Date: February 22, 2008

Effective Date: April 1, 2008

Related CR Transmittal #: R1460CP

Implementation Date: April 7, 2008

Subsequent Hospital Visits and Hospital Discharge Day Management Services (Codes 99231 - 99239)

Provider Types Affected

Physicians and qualified nonphysician practitioners (NPPs), submitting claims to Medicare Administrative Contractors (A/B MACs) and carriers for services provided to Medicare beneficiaries during a hospital visit.

Impact on Providers

The Centers for Medicare & Medicaid Services (CMS) issued Change Request (CR) 5794 to alert providers to updates regarding:

- Physician payment policy for Subsequent Hospital Care visits during a global surgery period; and
- The appropriate use of Hospital Discharge Day Management Services for a final hospital visit by the attending physician and also for a death pronouncement.

See the *Key Points* section of this article for a complete list of the updates.

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This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Background

This CR5794 updates Chapter 12, section 30.6.9.2 of the Medicare Claims Processing Manual. The updated section of this manual is attached to CR5794, which is available at the Web address listed in the *Additional Information* section of this article. The Medicare physician fee schedule payment amount for surgical procedures includes all services (e.g., evaluation and management services) that are part of the global surgery payment. Therefore, physicians and qualified nonphysician practitioners (NPPs) should note that Medicare will not pay more than that amount when a bill is fragmented for staged procedures.

Key Points

The updated manual provisions according to CR5794 are as follows:

- Physicians and qualified NPPs shall remember that Subsequent Hospital Care visits (Common Procedural Terminology (CPT) codes 99231 – 99233) are not separately payable during the global surgery period even when a bill is fragmented for a staged procedure.
- A Hospital Discharge Day Management Service (CPT code 99238 or 99239) is a face-to-face evaluation and management (E/M) service between the attending physician and the patient.
- Only the attending physician of record (or physician acting on behalf of the attending physician) shall report the Hospital Discharge Day Management Service (CPT code 99238 or 99239).
- Physicians and qualified NPPs who manage concurrent health care problems not primarily managed by the attending physician shall use the Subsequent Hospital Care code from CPT code range 99231 – 99233 for a final visit.
- The physician or qualified NPP shall report the Hospital Discharge Day Management Service for the date of actual visit even if the patient is discharged on a different calendar date.
- CMS reminds physicians and qualified NPPs that only one Hospital Discharge Day Management Service is payable per patient per hospital stay.
- Paperwork involved in patient discharge day management services is paid through the pre- and post-service work of an E/M service.
- Physicians and qualified NPPs shall not bill both a Subsequent Hospital Care visit and a Hospital Discharge Day Management Service on the calendar date of discharge.

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- Physicians and qualified NPPs should note that a hospital admission and discharge on the same day should be reported using the Observation or Inpatient Care Services (Including Admission and Discharge Services) from CPT code range 99234 – 99236 when specific Medicare criteria identified in Chapter 12, Section 30.6.9.1 of the Medicare Claims Processing Manual are met.
- Only the physician who personally performs the pronouncement of death shall bill for the face-to-face Hospital Discharge Day Management Service (CPT codes 99238 or 99239).
- The date of the death pronouncement shall reflect the date of service on the calendar date it was performed even if the paperwork is delayed to a subsequent date.

Additional Information

You may see the official instruction (CR5794) issued to your Medicare A/B MAC or carrier by going to

<http://www.cms.hhs.gov/Transmittals/downloads/R1460CP.pdf> on the CMS website.

If you have questions, please contact your Medicare A/B MAC or carrier at their toll-free number which may be found at

<http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

News Flash - It's Not Too Late to Give and Get the Flu Shot! In the U.S., the peak of flu season typically occurs anywhere from late December through March; however, flu season can last as late as May. Each office visit presents an opportunity for you to talk with your patients about the importance of getting an annual flu shot and a one time pneumococcal vaccination. Protect yourself, your patients, and your family and friends by getting and giving the flu shot. **Don't Get the Flu. Don't Give the Flu. Get Vaccinated!** Remember - Influenza and pneumococcal vaccinations and their administration are covered Part B benefits. Note that influenza and pneumococcal vaccines are NOT Part D covered drugs. You and your staff can learn more about Medicare's coverage of adult immunizations and related provider education resources, by reviewing Special Edition MLN Matters article SE0748 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0748.pdf> on the CMS website.

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