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ASSOCIATION NEWS

Congratulations to Rick Kasper

Rick Kasper is now Chief Operations Officer at Heritage Health Care in Harwood Heights, IL. His contact information is: rkasper@heritagehc.org 847 885 1818.

Rick Kasper NHPCO's 2015 Hospice Manager Development Program Level III Designee

Rick Kasper is NHPCO's first 2015 Hospice Manager Development Program's Level III Designee. MPD Level III participants undergo a rigorous assessment process, then identify, work on and complete a specific and individualized professional goal. Components of the Hospice MDP Level III are tied to the participant's organization and the individual's professional responsibilities.

Rick explains: "as the chief executive officer of Joliet Area Community Hospice, I wanted to continually improve communication. Communication is a very sensitive topic for patients, their family members and their caregivers. What I learned in Hospice MDP Level III focused on me. I learned that I need to become comfortable with the other person's communication style in order to improve the communication between us. This program really made me step out of my comfort zone and evaluate myself. This has been very helpful to me professionally as well as personally."

The Hospice MDP is designed to develop competent and confident hospice leaders that can effectively manage the complexities of their responsibilities in the hospice organization.

IL HPCO Board Changes

As you know Norene Scheck has moved out of state and the Board at it's July meeting appointed Mike McHale to the open Board position. Mike is the CEO at Rainbow Hospice and Palliative Care in Mt. Prospect.

VETERANS' CORNER – Nancy Sehy, RN, Hospice Manager, Lincolnland Hospice

Get Involved! Learn and share ideas, inspiration, and Best Practices with VA employees, agencies, and care providers in your area!

Marion HVP: Next meeting is Tuesday, October 13th, 2015, 9:30am-11:30am

If interested or questions- please contact: Michelle Drone Community Health MSA 618-997-5311 ext 55051 Michelle.Done@va.gov

Rockford Area HVP: Next meeting is Tuesday, August 18, 12:00pm-1:00pm

If interested or questions- please contact: Andy Balafas, Veterans Liaison, Vitas Innovative Hospice 630-818-0885 Andrew.Balafas@vitas.com

Chicago Area HVP: Next meeting is Friday, September 25, 2015, 9:00am-12:00pm

If interested or questions- please contact: Jolene Renda, VISN 12 Palliative Care Program Manager
Phone: 608-372-1217 Jolene.Renda@va.gov

Danville/Illiana HVP: Annual meetings- next date pending, anticipated in June 2016.

If interested or questions- please contact: Melissa A. Nelson, RN, LCSW Palliative Care Coordinator 217-554-5137 Melissa.Nelson6@va.gov

LEGISLATIVE OVERVIEW- Betsy Mitchell, IL HPCO Lobbyist

As this is being written, the House passed a bill sent to them by the Senate last week to allow essential services to be paid for one month. In addition, the House added an amendment that would allow all state workers to be made for one month. Because the House amended the Senate's bill, the bill must return to the Senate for the Senate to concur with this change.

The Senate is expected to consider this amendment when they return to Springfield on July 14. Governor Rauner has indicated that he may veto this one month budget plan as it would increase cost significantly.

At the same time, there is an on-going battle in the court system. It began just before the Fourth of July when Attorney General Madigan sought a restraining order against Governor Rauner's plan to continue

to pay state workers. According to the AG, Governor Rauner cannot constitutionally allow any state expenditures without authority from a legally enacted budget. Since the initial court filing, a Cook County judge has ruled in favor of the AG, followed by a St. Clair County judge in a union-filed lawsuit ruling that state workers must be paid even without a budget. Most speculate that this issue is headed for the Illinois Supreme Court.

What Does this Mean for Hospice Providers and What Can You Do?

Clearly without a budget in place, uncertainty is a constant and draining factor for all hospice providers. Planning and moving forward are drastically affected. At the very least, it appears that Medicaid payments will continue to be delayed. No one knows how long this stalemate between the Governor and the legislature will last. It will only be over when both sides find something they can agree on.

In the meantime, all IL-HPCO members are encouraged to maintain contact with their legislators and the Governor's office. Discuss what it is that you do for your community and describe what your community would look like without you in it. Also urge them to find a solution to this terrible situation that is affecting this state adversely. If legislators do not hear from us, they will think we are not affected by all of this.

If you do not know who your legislators are, contact me at Betsy@cook-witter.com. I need your name, address (with ZIP code).

EDUCATION UPDATE – Ronda Dudley, RN, BC, BS, MBA-Memorial Home Services, Home Health & Hospice Director

Registration is now open for the Annual IL HPCO Conference How to: The Right Care, In the Right Place, At the Right Time, to be held in the Memorial Center for Learning and Innovation in Springfield Sept 15-16. We will start this conference on Tuesday evening with our Keynoter Gary Gardia presenting an interactive and fun presentation, the conference will continue all day Wednesday with exceptional speakers and topics as outlined at www.rsvpbook.com/ILHPCO2015

Please make sure to register ... the hospice and palliative care landscape is changing and you will come away with many new ideas for survival and enhancement!

STATE HOSPICE ORGANIZATION AND PALMETTO GBA COALITION MEETING SUMMARY - Mary Runge

*The following is a summary of the information gathered at the meeting. It includes data from the dialogue and discussion as well as information provided in any handouts. No information provided in this summary is intended for legal or operational advice but merely as information for planning and awareness. This summary is created entirely by the Georgia Hospice and Palliative Care Organization's coalition member in attendance at the time of the meeting and statements have not been evaluated or approved by Palmetto or the other members of the coalition. Questions submitted to Palmetto GBA by hospice coalition members with the responses provided **will be published separately when they are made available electronically from Palmetto GBA.***

Planned PGBA audits – data analysis will determine areas of focus

- * Live discharges – PEPPER reports impact which discharge codes, geographies and provider/beneficiary groups to assess
- * Level of care for GIP at various locations of care
 - o Q5005
 - o Q5006
 - o Q5004
- * NCLOS edits focused on Q5001 (home hospice care), Q5002 (hospice in the ALF) and Q5003 (hospice in the NF – not the SNF)

CAP discussion

- * 2013 CAP 100% completed

The following table represents those 16 states within the Palmetto RHHI jurisdiction for 2013 CAP. GA had the highest total overpayment while South Carolina had the highest percent of providers with an overpayment.

Item #	State	Total providers	Completed	With Over Payment	% completed with Over Payment	Total Over Payment Amount (\$)
1	AL	117	117	17	15%	\$7,385,371
2	AR	40	40	3	8%	\$804,313
3	FL	40	40	2	5%	\$2,518,169
4	GA	171	171	42	25%	\$25,391,026
5	IL	107	107	3	3%	\$452,116
6	IN	83	83	1	1%	\$143,069
7	KY	24	24	0	0%	\$0
8	LA	138	138	17	12%	\$3,555,820
9	MS	117	117	34	29%	\$8,996,781
10	NM	39	39	4	10%	\$2,518,285
11	NC	79	79	2	3%	\$45,441
12	OH	119	119	4	3%	\$7,304,154
13	OK	125	125	15	12%	\$4,979,009
14	SC	89	89	27	30%	\$16,606,997
15	TN	57	57	1	2%	\$346,582
16	TX	406	406	57	14%	\$19,761,053

Discussion of NOE submission issue

- * Primary concern: providers are submitting the NOE on time but MAC is not processing within timeliness window resulting in NOE being RTP'd which causes the provider to have to submit an exception request with proof of the submission within the 5-day time frame. Providers could potentially lose reimbursement as a result of this.
 - o PGBA cannot identify the number of days not paid for untimely NOE as there is no reason code associated specifically with this on the RA
 - o NOE doesn't alter the days in the "episode" – only the date for which billing can begin if the NOE is untimely
 - o PGBA will look into the trend associated with Occurrence code 77 before and after the NOE implementation as a measure of traffic associated with untimely NOE's
 - o PGBA successfully reduced the cycle time for processing the NOE submission from 5 days to 3 days, the ONLY MAC to achieve this as of this meeting date

Provider Cap calculation

- * Concerns verbalized relative to the calculation of cap amount per CMS's instructions regarding sequestration – in many cases, the amount calculated is incorrect causing providers to appeal these determinations which burdens the MACs and providers in this process. CMS has provided an article to all MACs for public review. See [article HERE](#)
- * 2013 cap is completed for all providers. Total cap overpayments were \$105M, 2012 cap overpayments were \$117M. 2014 reviews have started
- * Provider self-determined cap filing:
 - 91% of providers filed their self-determined report on time
 - Errors associated with the form were limited and were primarily user-error
 - 5% of providers have not filed a form but PGBA believes these are providers who are either closed or are otherwise inactive

EDI and ICD-10 Update

- * System status is LIVE on the website (www.palmettogba.com/medicare)
- * ICD-10 prep continues
 - Separate web page now for all things ICD-10 (click [here](#) to access it)
 - End-to-end testing phase 1 and phase 2 complete, will be able to publish results when CMS approves
- * DDE ID's
 - Assigned to an individual so you CANNOT share these IDs
 - Each user should have their own ID
 - ⊙ Must be validated and authorized by CMS so may take up to 15 days
 - ⊙ User must sign in with the ID at least once every 30 days to maintain active status

CMS NPRM 2016 Hospice Wage Index

- * PGBA cannot discuss anything relative to the NPRM until CMS has finalized the rule and issued subsequent CR's instructing the MACs on implementation
- * NHPCO is in the process of gathering final comments and submitting to CMS
 - Impact to Medicaid – this is not discussed in the NPRM but the change in calculation of days and the reimbursement rates will affect Medicaid at the state level as well and NHPCO does not believe states will be prepared to handle the changes by the 10/1/15 implementation date if it goes forward
 - DX on the claim forms:
 - ⊙ Are we really capturing all the data in our comprehensive assessments?
 - ⊙ What will be the uses for the data once provided to CMS?
 - ⊙ What kind of comparative analysis will be conducted and for what universe of data? How will the results be shared? Who will be impacted?
 - SIA in the NF/SNF – AMDA and MedPAC are against the exclusion of this population from the SIA; concerns remain about the long-term erosion of the RHC rate based on the LOS and the SIA adjustment

Other Notes

- * Value Code 78 error on claims – results when full zip code is not entered or does not match NPI in the system; CR 9042 will be issued 7/6/15 to correct this error code – is on the claims processing issue log as of the date of this meeting
- * MIC audits are currently underway in South Carolina
- * CERT recommendations from PGBA:
 - o RESPOND to every CERT request for records
 - o APPEAL any denials whenever possible
 - o SUBMIT records via online portal if you are at all able
 - o Review the information on [this website](#) for additional support

Sample question and answer via the Q&A portion of the meeting

Q: The regulations state that the comprehensive assessment needs to be completed within 5 days of the date of election. How are the days counted?

A: The regulation at 418.54 indicates that the hospice IDG must complete the comprehensive assessment no later than 5 calendar days after the election of hospice. Thus, the date of election is day “0” or date of election +5 calendar days = completion of the comprehensive assessment.

Final questions and answers will be published by Palmetto GBA and can be found on their website at www.palmettogba.com/medicare