

# UnitedHealthcare Community Plan Tennessee Hospice Care

## What You Need to Know

**This guide can help you better understand billing and claims as a hospice care provider.** If you have questions, please contact Provider Relations at **800-690-1606**. Thank you.

### TennCare Medicaid ID and Disclosure of Ownership

To be a participating hospice care provider, you'll need to have a valid registration with TennCare. This means you have a valid Medicaid ID along with an active disclosure of ownership (DOO) on file with TennCare. You can find information about registering at [tn.gov/tenncare](https://tn.gov/tenncare) > Providers > [Provider Registration](#).

### Prior Authorization

You can find the prior authorization request process outlined at [UHCprovider.com/priorauth](https://UHCprovider.com/priorauth). Hospice care providers only have to submit prior authorization requests for:

- Inpatient Hospice Care
  - Healthcare Common Procedure Coding System (HCPCS) code T2045
  - Revenue code 0656
- Inpatient Hospice Respite
  - HCPCS code T2044
  - Revenue code 0655

Please use the appropriate HCPCS code when you submit your prior authorization request.

### Dual Eligible (Medicare and Medicaid) Members

Care providers are required to submit a notification for dual eligible members. Dual eligible members don't need authorizations for room and board or hospice services.

### Hospice Claims and Billing

#### Inpatient Service Category

Service Category	Payment Method
General Inpatient Hospice (non-respite) <ul style="list-style-type: none"><li>• Revenue code 0656 with bill type 82x (Hospital-Based)</li><li>• Revenue code 0656 with bill type 81x (Non Hospital-Based)</li></ul>	Per Diem
Inpatient Respite Care <ul style="list-style-type: none"><li>• Revenue code 0655 with bill type 82x (Hospital-Based)</li><li>• Revenue code 0655 with bill type 81x (Non Hospital-Based)</li></ul>	Per Diem
Room & Board – Nursing Facility (Revenue Code 0658)*	Per Diem

\*The nursing facility name and facility level ID must be included in box 80 of the UB-04 claim form for Room & Board – Nursing Facility (Revenue Code 0658) claims. Patient liability information should be in box 39, 40 or 41 with value code "23" and the patient liability amount. If there is no patient liability, please enter \$0.



## Home Hospice Care Services Category

Service Category	Payment Method
Routine Home Care (RHC) – Hospice (Revenue code 0651) <sup>1</sup>  Days 1-60, or days 61 and after Note: Service Intensity Add-On (SIA) is reimbursed at a per unit rate (for each hour reported in 15 minute increments).	Per Visit
Continuous Home Care – Hospice (Revenue Code 0652) <sup>2,3</sup>	Per Unit

<sup>1</sup> RHC, revenue code 0651, will be reimbursed depending on the number of days the member is in hospice. The payment will be reduced beginning with day 61. These calculations are subject to the normal wage index. SIA services are reimbursable when billed with RHC (revenue code 0651) services during the member’s last seven days of life. To receive the SIA payment, claims must include the appropriate discharge status code. Service intensity add-on (SIA) payment for hospice services will include revenue code 0551 with HCPCS codes G0299 (registered nurse (RN)) and G0300 (licensed practical nurse (LPN)) or revenue code 0561 with HCPCS code G0155. Reimbursement will have a maximum of four hours (15 minute intervals) a day and 28 total hours.

<sup>2</sup> Continuous home care is defined as a minimum of eight hours of home care, not necessarily consecutive, during a 24-hour day which begins and ends at midnight. Nursing care must be provided for at least half of the period of care and must be provided by either a registered nurse (RN) or licensed practical nurse (LPN).

<sup>3</sup> Each unit for revenue code 0652 equals one 15-minute increment of Continuous Home Care Hospice.

### Patient Liability

We follow the [TennCare Guide to Patient Liability for Nursing Facility Services](#) when administering patient liability.

