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THE ANSWER KEY

A COMPENDIUM OF SOLUTIONS TO PROBLEMS ENCOUNTERED BY PROVIDERS IN SUBMITTING MEDICAID CLAIMS

Note: All information was current at the time of publication but is subject to change.

Diagnosis Code Required for Hospice Claims

Entry of diagnosis code for hospice claims is required. At least one diagnosis code must be reported on hospice claims. If several diagnosis codes represent a particular condition, then it is important to use the one with the greatest degree of specificity.

Because reporting correct codes is a common billing problem, we suggest that providers enter only the primary terminal diagnosis code on hospice claims at this time.

Please see the attached spreadsheet for a list of proper codes or visit the CMS website at
http://www.cms.gov/ICD9ProviderDiagnosticCodes/06_codes.asp.

More information on code sets can be found in "The Uniform Language of Code Sets" (a MITS Supplemental Policy Release), which is available at

<http://jfs.ohio.gov/mits/Code%20Sets%2003.11.pdf>