



Consolidated Billing



Overview

- In the Balanced Budget Act of 1997, Congress mandated that payment for the majority of services provided to beneficiaries in a Medicare covered SNF stay be included in a bundled prospective payment made through the Part A Medicare Administrative Contractor (MAC) to the SNF

Consolidated Billing of Bundled Services

- These bundled services are required to be billed by the SNF to the Part A MAC in a consolidated bill. No longer would entities that provided these services to beneficiaries in a SNF stay be able to bill separately for those services

Covered Services - Part A & Part B

- Part A covered SNF stay includes medical services as well as room and board
- Part B non-covered stay still covers certain medical services when Part A benefits have been exhausted, though room and board is not covered

Billing Services - Covered Part A

- Consolidated billing requires the SNF to bill the entire package of care that residents receive during a covered Part A SNF stay *and* physical, occupational, and speech therapy services received during a non-covered stay.
- There are a limited number of services that are specifically excluded from consolidated billing, which makes them separately payable.

Separately Payable Services

Covered Part A stay, separately payable services include:

- Physician's professional services;
- Certain dialysis-related services, such as ambulance transportation to dialysis and Erythropoietin for dialysis;
- Certain ambulance services, including ambulance services to the SNF initially, from the SNF at discharge (other than in situations involving transfer to another SNF), and roundtrip ambulance services furnished during the stay that transport the beneficiary offsite temporarily in order to receive dialysis, or to receive certain types of intensive or emergency outpatient hospital services;
- Certain chemotherapy drugs and certain chemotherapy administration services;
- Radioisotope services; and
- Customized prosthetic devices.

Non Covered Stay Consolidated Billing

- For Medicare beneficiaries in a non-covered stay, only **therapy services** are subject to consolidated billing. All other covered SNF services for these beneficiaries can be separately billed to and paid by the Medicare contractor.

Provider Questions About Consolidated Billing

- Physicians, non-physician practitioners, and suppliers should contact their Part B MAC or Durable Medical Equipment (DME)
- Institutional providers should contact their Part A MAC with questions about SNF consolidated billing.

AHCCCS Authorization Requests

- AHCCCS is the secondary payer for Medicare covered services when an AHCCCS member also has the portion of Medicare that covers the requested service type. When AHCCCS is not the primary payer providers must exhaust all attempts to obtain reimbursement from Medicare for Medicare covered services -before requesting authorization from AHCCCS
- When a provider submits a request for authorization of services when the member has Medicare it should be determined whether:
 - The service is a Medicare covered service
 - Is the DME provider the correct Competitive Bidding Provider for the member's geographical service area (for DME requests)
 - The provider has submitted a request to Medicare for the service
 - Why the Medicare covered service was denied by Medicare

AHCCCS Authorization Requests

- The authorization request will be returned to the provider when the request does not contain enough information to determine that Medicare should not be the primary payer for the requested service.

Consolidated Billing Resources

CMS Website For General Billing Information:

<https://www.cms.gov/Medicare/Billing/SNFConsolidatedBilling/Index.html>

Link to CMS Competitive Bidding Information:

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid/index.html?redirect=/DMEPOScompetitivebid/>

Link to Competitive Bidding Contractor Listing:

<https://www.medicare.gov/supplierdirectory/search.html>

Link to Medicare Administrative Contractor Listing:

<https://www.cms.gov/Medicare/Medicare-Contracting/Medicare-Administrative-Contractors/Who-are-the-MACs.html>

Questions?



Thank You.

