Hospice - Continuous Care Billing

Continuous home care is to be provided only during periods of crisis to maintain the beneficiary at home. See more tips below.

$\Box\Box$ Tips on Billing for Continuous Home Care

- Hospice continuous home care (CHC) is billed when a patient experiences a crisis requiring more intensive nursing care, typically at least 8 hours in a 24-hour period, to manage symptoms.
- A minimum of 8 hours of nursing care must be provided within a 24-hour period (midnight to midnight).
- The majority of the care hours (over 50%) must be provided by a registered nurse (RN), licensed practical nurse (LPN), or licensed vocational nurse (LVN).
- The need for CHC and the specific care provided must be documented in the patient's medical record.
- Revenue code 0652 is used when billing for continuous home care.
- Hours are billed in 15-minute increments, and a minimum of 32 units (8 hours) must be billed to receive the CHC rate.
- If the minimum 8 hours of CHC are not met, the day is billed as routine home care.

Medicare and Medicaid

- Medicare and Medicaid may have specific guidelines and coverage for CHC. Contact payer for guidance.
- Medicaid coverage for CHC can vary by state. Contact Medicaid for guidance.

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Knowledgebase

http://kb.barnestorm.biz/KnowledgebaseArticle50603.aspx