Provider Action: Home health agencies need to ensure that:

- For initial periods of care, the HHA reports on the 0023 revenue code line the date of the first covered visit provided during the period
- For subsequent periods, the HHA reports on the 0023 revenue code the date of the first visit provided during the period, regardless of whether the visit was covered or non-covered

Many of the subsequent period claims are reporting the first day of the period rather than the first visit date, which are being correctly returned to the provider. Providers should correct the date and resubmit the claim. See page 61 of Chapter 10: Home Health Agency Billing for more information.

Some home health claims are being returned for Reason Code 31755. The majority of the claims being returned are provider billing error and need to be corrected with the information provided in the "Provider Action" section of this article. However, Medicare is still receiving claims for January 2022 that used the artificial admit date that have a different 0023 vs first visit date. We are researching what action to take on these claims.

As of January 3, 2023, reason code 31755 has been reactivated per instructions from the Centers for Mediare & Medicaid Services (CMS). This means the revenue code 0023 line-item date of service must match the date of service for the first home health visit on the claim.

No additional provider action is needed at this time. We will provide an update as soon as it is available.

You can find the full PalmettoGBA article (Claims Payment Issues Log) by clicking here.

Medicare Denials due to Reason Code 31755

Knowledgebase
http://kb.barnestorm.biz/KnowledgebaseArticle51660.aspx