



Community Physician Billing Guide for Good Shepherd Hospice Patients

(not applicable to employed, contracted or volunteer hospice physicians)

Hospice or Related Diagnosis*

Non-Hospice or Unrelated Diagnosis

Community Physician Status	Attending Physician The attending physician is designated by the patient to have the most significant role in the determination and delivery of patient medical care.		Consulting Physician*** Any community physician, except for the attending, who provides patient care to a hospice patient.		Attending or Consulting Physician
	Professional office, home, ALF, nursing home or hospital	Technical** lab, X-rays, prescription medications	Professional office, home, ALF, nursing home or hospital	Technical** lab, X-rays, prescription medications	Professional or Technical
Medicare	Physician bills Part B Use Modifier GV , Box 24d CMS 1500	Physician bills hospice Electronic Payer ID 76923	Physician bills hospice per contract E&M code for professional Electronic Payer ID 76923	Physician bills hospice Technical Service CPT code with modifier Electronic Payer ID 76923	Physician bills Part B Use modifier GW , Box 24d CMS 1500
Medicaid	Physician bills Medicaid	Physician bills hospice Electronic Payer ID 76923	Physician bills hospice per contract E&M code or test interpretation (<i>with modifier 26, only if billed separately</i>) Electronic Payer ID 76923	Physician bills hospice Technical Service CPT code (<i>with modifier TC, only if billed separately</i>) Electronic Payer ID 76923	Physician bills Medicaid
Private Insurance	Physician bills private insurance carrier	Physician calls hospice to determine contractual agreement	Physician bills private insurance carrier	Physician calls hospice to determine contractual agreement	Physician bills private insurance company
Private Pay	Physician bills patient directly	Physician bills hospice with prior authorization only	Physician bills hospice according to contractual terms	Physician bills hospice with prior authorization only	Physician bills patient directly

Community Physician Billing Guide for Good Shepherd Hospice Patients – Footnotes and Disclaimers

*This guide applies **only** to services **related to the hospice patient's terminal illness**. It is the attending or consulting physician's sole responsibility to seek reimbursement from the patient or his/her third-party payers for any services rendered to a hospice patient that are unrelated to the patient's terminal illness

**All treatment(s) or diagnostic services must be documented as part of the Hospice Plan of Care prior to delivery. Hospice must pre-authorize all technical services.

GV: Modifier indicates – Attending not employed or paid under agreement by the patient's hospice provider. Relates to hospice terminal illness.

GW: Modifier indicates – Service not related to the hospice patient's terminal illness.

ARNP Serving as Attending – If an ARNP is designated as the attending, follow the same guidelines as for attending physician.

Note: ARNPs may not serve as a consulting physician.

*****Consulting Physician Contract Required** – Any physician other than the patient's designated attending who provides services related to the hospice patient's terminal illness must have a contract with hospice and will not be reimbursed for services rendered without a contract. Contracts are available through Chapters Health System, Contracting Department.

Physicians shall not provide influenza, pneumococcal, or hepatitis B vaccinations to hospice patients. All such vaccinations must be provided and billed for by hospice. No claims for such vaccination services provided to hospice patients will be accepted by Medicare from non-hospice providers. In the event a non-hospice provider administers an influenza, pneumococcal, or hepatitis B vaccination to a hospice patient, provider will be fully responsible for the cost of such vaccination and shall not bill hospice or the hospice patient for such vaccination.

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