

Ordering/Referring Physician Checklist for Home Health Agencies

To receive Medicare reimbursement for home health services, the physician that ordered/referred the patient for home health care must be enrolled in the Medicare program, and have an enrollment record in the Provider Enrollment, Chain, and Ownership System (PECOS). Fiscal Intermediary Standard System (FISS) edits are in place to ensure that the attending and certifying physician information reported on a home health claim meets this requirement. To avoid claim denials, follow the steps below.

Step 1: Verify the physician's NPI, last name, and first name using the "Medicare Ordering and Referring File" available at <https://data.cms.gov/>

NOTE: This file is updated by CMS twice a week, so it is important to verify the physician information prior to submitting each billing transaction.

Step 2: Home health services must be ordered or referred by a Doctor of Medicine (MD), Doctor of Osteopathy (DO) or Doctor of Podiatric Medicine (DPM). To verify the credentials of the ordering/referring physician, search the physician's NPI using the NPES website, <https://npiregistry.cms.hhs.gov/>. Refer to Page 3 of this tool for a list of valid home health ordering/referring specialty codes.

Step 3: Prior to submitting the Request for Anticipated Payment (RAP) and claim, verify the following information matches the Ordering/Referring File exactly.

- The NPI of the physician.
- The first four letters of the physician's last name
- The first letter of the physician's first name

NOTE: Do not use nicknames, or enter credentials (Dr.) or suffixes (Jr., M.D).

Did Your Claim Deny with Reason Code 37236 or 37237?

When a claim is submitted to Medicare, FISS edits will verify the above information. If the information submitted on the claim does not match the Ordering/Referring file, the claim will be denied with reason code 37236 or 37237.

If a claim is denied with 37236 or 37237, a home health agency can research the potential cause by reviewing the SC field on FISS Page 03 of the denied claim.

ESRD	HOURS	00	ADJUSTMENT	REASON	CODE	REJECT	CODE	NONPAY	CODE
ATT	PHYS		NPI	XXXXXXXXXX	L	SMITH		F HAPPY	M SC 08
OPR	PHYS		NPI		L			F	M SC
OTH	OPR		NPI		L			F	M SC
REN	PHYS		NPI		L			F	M SC
REF	PHYS		NPI	XXXXXXXXXX	L	JONES		F BARNEY	M SC

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SC Field Value	Meaning	Action Required
99	NPI is not present in PECOS	<p>Verify the NPI entered on the claim against the ordering/referring file.</p> <ol style="list-style-type: none"> 1. If the NPI was entered incorrectly, you must request a reopening (see 'Request a Reopening' below). 2. If the NPI was entered correctly, review the ordering/referring file to determine if the NPI has been added or updated. If so, submit a reopening request. 3. If the NPI was entered correctly, and matches the ordering/referring file, no provider action may be taken.
'Blank'	NPI is present in PECOS, but the name on the claim does not match the name in PECOS	<p>Verify the name entered on the claim matches the name on the ordering/referring file.</p> <ol style="list-style-type: none"> 1. If the name was entered incorrectly, you must request a reopening. 2. If the name on the ordering/referring file is incorrect, the physician must take action to correct the information in PECOS.
Any numeric value (except 99)	Physician NPI and name matches the Ordering/Referring file. This value reflects the physician's specialty code.	<ol style="list-style-type: none"> 1. If the physician is of a specialty type that can order/refer home health, the claim will pay. 2. If the physician is not of a specialty type to order/refer home health, the claim will be denied. Refer to Page 3 of this tool for a list of valid home health ordering/referring specialty codes. <p>* Home health agencies may choose to contact the physician and encourage them to verify that the appropriate specialty is designated in PECOS to avoid claim processing delays and possible rejections.</p>

IMPORTANT CLAIMS FILING TIPS

- #1 – Do not use nicknames.**
- #2 – Do not enter credentials (Dr.) or suffixes (Jr., M.D).**
- #3 – Verify the physician's NPI, last name and first name is entered exactly as it appears on the ordering/referring list. This list is used by FISS to compare the NPI, first letter of the first name, and the first four letters of the last name.**

Requesting a Reopening

If you determine a keying error was made with the physician's NPI and/or name, you must request a reopening to correct the physician information reported on the claim.

NOTE: An appeal request (redetermination) cannot be submitted for claims denied with reason code 37236 or 37237.

To request a reopening, follow the steps below.

Step 1: Complete the *HHH Reopening Adjustment Request Form*, available at http://www.cgsmedicare.com/hhh/appeals/pdf/hhh_reopening_form.pdf.

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Step 2: Submit an adjustment claim (XX7) on a hardcopy UB-04 with the corrected physician NPI and name, in addition to the original claim information. Ensure that you also include the necessary adjustment coding (condition code, DCN, remarks). For more information on submitting an adjustment claim, refer to the Adjustments/Cancel Web page, http://www.cgsmedicare.com/hhh/education/materials/Adjustments_Cancel.html

Step 3: Mail the HHH Reopening Adjustment Request Form and adjustment claim to:

HHH Claims, J15 — HHH Claims
CGS Administrators, LLC
PO Box 20019
Nashville, TN 37202

For detailed information about submitting a reopening request, see the Reopenings Web page, <http://www.cgsmedicare.com/hhh/appeals/Reopenings.html>

Valid Home Health Ordering/Referring Physician Specialty Codes

Code	Physician Specialty	Code	Physician Specialty
02	General Surgery	37	Pediatric Medicine
03	Allergy/Immunology	38	Geriatric Medicine
04	Otolaryngology	39	Nephrology
05	Anesthesiology	40	Hand Surgery
06	Cardiology	44	Infectious Disease
07	Dermatology	46	Endocrinology
08	Family Practice	48	Podiatry
09	Interventional Pain Management	66	Rheumatology
10	Gastroenterology	72	Pain Management
11	Internal Medicine	76	Peripheral Vascular Disease
12	Osteopathic Manipulative Therapy	77	Vascular Surgery
13	Neurology	78	Cardiac Surgery
14	Neurosurgery	79	Addiction Medicine
16	Obstetrics/Gynecology	81	Critical Care (intensivists)
17	Hospice and Palliative Care	82	Hematology
20	Orthopedic Surgery	83	Hematology/Oncology
22	Pathology	84	Preventive Medicine
24	Plastic and Reconstructive Surgery	85	Maxillofacial Surgery
25	Physical medicine and Rehabilitation	86	Neuropsychiatry
26	Psychiatry	90	Medical Oncology
27	Geriatric Psychiatry	91	Surgical Oncology
28	Colorectal Surgery (formerly Proctology)	92	Radiation Oncology
29	Pulmonary Disease	93	Emergency Medicine
30	Diagnostic Radiology	94	Interventional Radiology
33	Thoracic Surgery	98	Gynecological/Oncology
34	Urology	C6	Hospitalist
36	Nuclear Medicine		