

# Maryland Medicaid Hospice Billing Guide

*Prepared for*

**myUnity Essentials Financial**



**Netsmart**

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## Overview

Maryland Medicaid Hospice is billed in the UB04 Institutional format. Following the CMS payment method, Routine Home Care is reimbursed at a higher rate for the first 60 days of hospice care and a lower rate for days 61 and after. Service Intensity Add-On (SIA) payments are made for services provided by an RN or Social Worker during the last seven days of a patient's life. The payment applies to services provided under Routine Care (not Continuous, Inpatient or Respite) and for a maximum of four hours per day, billed in 15-minute increments. This document provides the setup steps needed in myUnity Essentials Financial to meet these requirements. For detailed billing instructions and regulatory compliance information, visit the Maryland Department of Health website:

<https://mmcp.health.maryland.gov/longtermcare/Pages/Hospice-Services.aspx>

<https://mmcp.health.maryland.gov/docs/UB04-HOSPICE-INSTRUCTIONS.pdf>

<https://mmcp.health.maryland.gov/longtermcare/SiteAssets/SitePages/Hospice%20Services/FY2016%20Memo%20with%20Attachments.pdf>

## One Time Setup

### Create SIA Revenue Code

Go to **File>File Maintenance>Category**. Press the **Change Type** button and set to **Revenue Code**.

Press **Add** to add the 0654 SIA revenue code.

**Code:** 0654

**Description:** Service Intensity Add-On

**CPT/HCPCS:** leave blank

**Other Code:** leave blank

Category Maintenance: Revenue Code - Browse

Category

Code: 0654 Active: ☒

Description: Service Intensity Add On

CPT/HCPCS:

Other Code:

Change Type

Category Type:

- ☐ Acuity
- ☐ County
- ☐ Denial Reason
- ☐ Diagnosis Grp
- ☐ Disch Reason
- ☐ Disch Condition
- ☐ Document Type
- ☐ Insurance Class
- ☐ Insurance Type
- ☐ Language
- ☐ Level Of Care
- ☐ Marital Status
- ☐ Municipality
- ☐ Optional
- ☐ Payment Type
- ☐ PayRate Type
- ☐ Priority
- ☐ Program
- ☐ Race
- ☐ Referral Type
- ☐ Religion
- ☐ Renewal Type
- ☒ Revenue Code
- ☐ Schedule Group
- ☐ Schedule Match
- ☐ Schedule Zone
- ☐ Team Group
- ☐ Unmade Visit
- ☐ Work Shift

End Save Cancel Print Add Delete ?

## Create 0653 Early Routine Revenue Code

Go to **File>File Maintenance>Category**. Press the **Change Type** button and set to **Revenue Code**.

Press **Add** to add the Early Routine revenue code.

**Code:** 0653

**Description:** Routine Early (1-60 Days)

**CPT/HCPCS:** leave blank

**Other Code:** leave blank

The 0651 Routine Revenue code for the late Routine (61+ days) is automatically populated to the claims at the time of the electronic claim file generation. Revenue codes for Continuous, Inpatient and Respite are pre-loaded in the database

Category Maintenance: Revenue Code - Browse

Category

Code: 0653 Active: ☒

Description: Routine Early (1-60 Days)

CPT/HCPCS:

Other Code:

Category Type:

- ☐ Acuity
- ☐ County
- ☐ Denial Reason
- ☐ Diagnosis Grp
- ☐ Disch Reason
- ☐ Disch Condition
- ☐ Document Type
- ☐ Insurance Class
- ☐ Insurance Type
- ☐ Language
- ☐ Level Of Care
- ☐ Marital Status
- ☐ Municipality
- ☐ Optional
- ☐ Payment Type
- ☐ PayRate Type
- ☐ Priority
- ☐ Program
- ☐ Race
- ☐ Referral Type
- ☐ Religion
- ☐ Renewal Type
- ☒ Revenue Code
- ☐ Schedule Group
- ☐ Schedule Match
- ☐ Schedule Zone
- ☐ Team Group
- ☐ Unmade Visit
- ☐ Work Shift

Change Type

Find Save Cancel Print Add Delete

## SIA Charge Code Setup

Go to **File>File Maintenance>Charge Code**. Press Find and search for the Service Intensity Add-On charge code.

Charge Code tab:

**Modality:** set to Non-Billable

**Non-Billable:** uncheck this box.

(Note: this will not adversely affect Medicare hospice claims because they are not set to include Non-Billable modality charges).

Charge: HOSPICESIA - Service Intensity Add-on - Browse

Charge Bill-Rate Pay-Rate Revenue-Codes

Code: HOSPICESIA Active: ☒

Description: Service Intensity Add-on

Modality: Non-Billable

Non-Billable: ☐

Find Save Cancel Print Add Delete

Revenue-Codes tab:

Press **Add** to add a row and enter the following information:

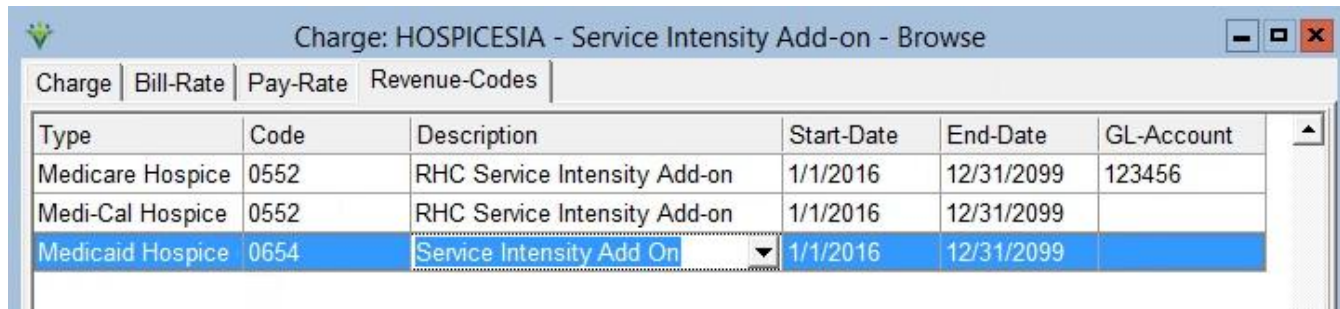
**Type:** Medicaid Hospice Rev Type

**Code:** 0654

**Start Date:** enter 1/1/2016 (or the earliest date for which SIA amounts will be billed)

**End Date:** enter 12/31/2099

Press **Save** when done.



Type	Code	Description	Start-Date	End-Date	GL-Account
Medicare Hospice	0552	RHC Service Intensity Add-on	1/1/2016	12/31/2099	123456
Medi-Cal Hospice	0552	RHC Service Intensity Add-on	1/1/2016	12/31/2099	
Medicaid Hospice	0654	Service Intensity Add On	1/1/2016	12/31/2099	

## Routine Charge Code Setup

Go back to the **Charge** tab and **Find** and select the **Routine** charge code. Go to the **Revenue-Code** tab and press **Add** to add a row.

**Type:** Medicaid Hospice Rev Type

**Code:** set to 0653

**Start Date:** enter 1/1/2016 (or the earliest date for which Routine Care will be billed)

**End Date:** enter 12/31/2099

Press **Save** when done.

(The Routine Home Care for days 61+ revenue code will be generated at the time of claim creation so there is no need to set it up here; only the revenue code for Routine days 1-60 is setup here).

## Continuous Charge Code Setup

Go back to the **Charge** tab and **Find** and select the **Continuous** charge code. Go to the **Revenue-Code** tab and press **Add** to add a row.

**Type:** Medicaid Hospice Rev Type

**Code:** set to 0652

**Start Date:** enter 1/1/2016 (or the earliest date for which Continuous Care will be billed)

**End Date:** enter 12/31/2099

Press **Save** when done.

## Respite Code Setup

Go back to the **Charge** tab and **Find** and select the **Respite** charge code. Go to the **Revenue-Code** tab and press **Add** to add a row.

**Type:** Medicaid Hospice Rev Type

**Code:** set to 0655

**Start Date:** enter 1/1/2016 (or the earliest date for which Respite Care will be billed)

**End Date:** enter 12/31/2099

Press **Save** when done.

## Inpatient Charge Code Setup

Go back to the **Charge** tab and **Find** and select the **Inpatient** charge code. Go to the **Revenue-Code** tab and press **Add** to add a row.

**Type:** Medicaid Hospice Rev Type

**Code:** set to 0656

**Start Date:** enter 1/1/2016 (or the earliest date for which Inpatient Care will be billed)

**End Date:** enter 12/31/2099

Press **Save** when done.

## SN and MSW Charge Code Setup

For all Skilled Nursing and Medical Social Worker charge codes, add the Medicaid Hospice Revenue Type to the Revenue-Codes tab if not currently present. These are needed for proper SIA charge generation even if they are not included on claim output.

## Insurance Setup

Go to **File > File Maintenance > Entity**, press **Change Type** and set to **Insurance**.

Press the **Find** button to locate the Medicaid Hospice insurance.

Go to the Insurance Tab.

**Insurance Type:** Medicaid Hospice Rev Type

**Financial Class:** Medicaid Hospice

**Bill Type:** UB04

**Payor/Submitter#:** enter the 5-digit payer ID for electronic claims (provided by the payer or clearinghouse).

**Bill Method:** Hospice

**Payor Type:** 3-Medicaid (Fee for Service).

**Billing Unit Overrides:** Set the Non-Billable modality to "¼ hrs" (for SIA charges). Set the

Continuous Care modality to “Hours.”

Entity Maintenance: Insurance MDCDHO - Medicaid Hospice: Browse

Name/Address Insurance **Ins-Rate** Contact Notes

Insurance Type: Paid Hospice Rev Type

Financial Class: Medicaid Hospice Clas

Bill Type: UB04

Provider #:

Submitter #: payerid

GL A/R Acct #:

GL Revenue Acct #:

GL Discount Acct #:

PPS Billing: ☐ Bill Method: Hospice

Payor Type: 3-Medicaid (Fee for Service)

EWV Required: ☐ Timely Filing: 0

Billing Unit Overrides:

#	Modality	Units
9	Non-Billable	1/4 Hrs
10	Room and Board	N/A
11	Routine	N/A
12	Chaplain	N/A

\* Revenue Based on Calculated Time/Units

Clearing House Info:

Type: None Show Payor IDs: ☐

Claims:

Eligibility:

Billing Requirements:

- ☐ Plan of Care
- ☐ Authorization
- ☐ HIPPS Code
- ☐ VBP PPS Adjust

Find Save Cancel Print ?

On the **Ins-Rate** tab, add the Per Diem and SIA charges with the appropriate percentage amount for Maryland Medicaid and include the 2% sequestration amount if in effect. A Blanket Rate for zero dollars covered should be present. Ex:

Entity Maintenance: Insurance MDCDHO - Medicaid Hospice - Browse

Name/Address Insurance **Ins-Rate** Contact Notes

Charge-Description	Charge-Code	Start-Date	End-Date	Type	Rate	Allow
Blanket Proration	BLANKETRATE	1/1/2015		F	0.00	<input checked="" type="checkbox"/>
Blanket Proration R&B	BLANKET10	1/1/2015		F	0.00	<input checked="" type="checkbox"/>
Continuous Home Care	CONTINUOUS	1/1/2015		P	98.00	<input checked="" type="checkbox"/>
Hospice Service Intensity Adj	HOSPICESIA	1/1/2015		P	98.00	<input checked="" type="checkbox"/>
Inpatient Home Care	INPATIENT	1/1/2015		P	98.00	<input checked="" type="checkbox"/>
Respite	RESP	1/1/2015		P	98.00	<input checked="" type="checkbox"/>
Routine Home Care	ROUTINE	1/1/2015		P	98.00	<input checked="" type="checkbox"/>

## Configure the Billing Option Sets

Go to **Billing > Electronic Claims** and in the **Option Set Selection** drop-down, select the **Maryland Medicaid Hospice UB04 (837I)** option set.



Click **Options** and using the Locator dropdown, select the following:

**2390.12 Charge Itemized Consolidation Options:** Set to 'Hospice LOC Detailed LOC No-Q-Codes'.

**2390.15 Charge Itemizations:** set the Non-Billable modality to 'Use Modality' and Itemizations to 'Visit'

## Billing Process

### Create Level of Care and SIA Charges

Go to **Charge > Hospice LOC Report** (or File > Report Groups if setup).

**Report Detail:** Check all options.

**Billing Period:** Select billing month/year

**Hospice Insurance Type:** Select the Medicaid Hospice Rev type

**Report Type:** All Records

**Create/Fix LOC Charges:** Check this option.

**Hospice LOC Report**

General Options | More Options

**Report Sequence:**  
☒ Patient  
☐ LOC

**Selection Type:**  
☒ All ☐ Insurance  
☐ Patient ☐ Fin-Class  
☐ Unit

**Report Detail:**  
☒ Patient Detail  
☒ Diag/Cert Detail  
☒ Location Detail  
☒ Charge Detail

**Billing Period:**  
 September 2025

**Custom Date Selection:**  
 From: 9/1/2025 To: 9/30/2025

**Hospice Insurance Type:**  
 All: ☐ Medicaid Hospice Rev Type

**Level of Care:**  
 All: ☒

**Financial Class:**  
 All: ☒

**Report Type:**  
☒ All Records  
☐ Exceptions Found  
☐ Ready To Bill

☐ Export Report  
☒ Create/Fix LOC Charges

Preview Print Bill Audit ?

**Preview** the report and scroll or jump to the last page to generate the Per Diem and SIA charges.



After the charges have been created/updated, run for **Exceptions Found** and make necessary corrections. If changes are made that affect LOC days or SIA charges, run the report for All Records with Create/Fix LOC Charges checked.

**Note:** Only 0653 Routine Charges will be generated but the high/low routine rates will be calculated correctly. The 0651 charges will be populated to the claim at the time of creating the electronic claim file.

After all exceptions have been corrected, run the report for **Ready to Bill**. After previewing the report, use the **Bill Audit** button to jump to and preview the **Billing Audit Report**.

Run, review and post the Billing Audit and generate electronic claims using the Maryland Medicaid Hospice Electronic Claim option set and submit per that payer's guidelines. Transmit the claim file to the payer's website or your clearinghouse.

## Example of Electronic Claim Submission Report:

**Note:** Hard copy UB04 claims are not supported for Maryland Medicaid hospice claims at this time.

5/14/2020 9:20:46 AM

**Electronic Claim Submission**

Institutional

Page 1

0920 - MD Medicaid Hospice 5010

Billed From: 3/31/2020 - 3/31/2020

Home &amp; Hospice Care Services

\\tsclient\C\Users\Kristin\Desktop\0920 hospice detailed no qcodes.x12

Patient #	Patient Name	Admit Date	Bill Date	Bill Type	Payor		
256	Land, Mary Hospice	2/5/2020	3/31/2020	NonPPS	Maryland Medicaid Hospice		
Adm-Src: 1 Status: 40				Contract: r43543q5			
TOB: 814 Unit: 02		Statement From: 03/01/2020 To: 03/27/2020					
Diagnosis: 1:G20							
Values: 1:12580 2:12580 Occurrences: 1:27*02/05/2020							
Order/Refer-Doctor: Igor Abdick 1194783829							
Rev	Description	Code	Date	Units	Hours	Amount	Other
0653	Routine Home Care	Routine	03/01/20	1	0.00	240.00	
0653	Routine Home Care	Routine	03/02/20	1	0.00	240.00	
0653	Routine Home Care	Routine	03/03/20	1	0.00	240.00	
0653	Routine Home Care	Routine	03/04/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/05/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/06/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/07/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/08/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/09/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/10/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/11/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/12/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/13/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/14/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/15/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/16/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/17/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/18/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/19/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/20/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/21/20	1	0.00	240.00	
0654	Hospice Service Intensity	Hospicesia	03/21/20	4	1.00	54.24	
0651	Routine Home Care	Routine	03/22/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/23/20	1	0.00	240.00	
0654	Hospice Service Intensity	Hospicesia	03/23/20	8	1.00	108.48	
0651	Routine Home Care	Routine	03/24/20	1	0.00	240.00	
0654	Hospice Service Intensity	Hospicesia	03/24/20	8	1.00	108.48	
0651	Routine Home Care	Routine	03/25/20	1	0.00	240.00	
0651	Routine Home Care	Routine	03/26/20	1	0.00	240.00	
0654	Hospice Service Intensity	Hospicesia	03/26/20	8	1.00	108.48	
0651	Routine Home Care	Routine	03/27/20	1	0.00	240.00	
0001	Total Charges			55		6859.68	