Analysis of Part B Physician Services by Hospice Beneficiaries (TH306-B)

Michael Plotzke, PhD, Abt Associates, Des Peres, MO
Alyssa Pozniak, PhD, Abt Associates, Cambridge, MA

Objectives

- Inform the hospice and palliative community about beneficiaries’ use of Medicare Part B physician services while on hospice.
- Better understand the procedures and timing of physician services received by hospice beneficiaries and billed under Part B.

Original Research Background: Beneficiaries waive all rights to Part B payments for services related to the terminal illness and related conditions during hospice benefit election period. However, hospice beneficiaries may still receive care under Part B for care unrelated to the terminal illness and related conditions as well as care related to the terminal illness and related conditions when provided by their nonhospice employee attending physician. There is limited research that examines the use of Medicare physician services by hospice beneficiaries.

Research Objectives: To use Medicare claims data to examine the use of physician services by hospice beneficiaries that are billed under Medicare Part B.

Methods: We used 2011-2012 Centers for Medicare and Medicaid Services (CMS) physician carrier (“Part B”) and hospice claims to present descriptive analysis on Part B utilization by hospice beneficiaries.

Results: Of the 2.2 million beneficiaries with a hospice claim in 2011-2012, approximately 34% had a Part B claim during their hospice period. There were over 6.4 million Part B claim line items for hospice patients that accounted for over $372 million, the majority of which was for physician services unrelated to the terminal diagnosis ($260 million). Of the 4,550 unique Healthcare Procedure Coding System (HCPCS) codes on the Part B claims, five appeared on 25% of all claims, and 20 appeared on 53% of all claims. Among the top five HCPCS, about one-quarter were billed within the first 2 weeks of the hospice period, and 60% were billed within the first 90 days.

Conclusion: A sizable minority of hospice beneficiaries receive physician services under Part B while on hospice, with most of the services for care unrelated to their terminal diagnosis. HCPCS are highly concentrated, with 20 appearing on over half of all Part B claims.

Implications for Research, Policy, or Practice: Ongoing analyses seek to better understand hospice level of care, site of service, and provider characteristics when billing under Part B.