Coding



Home IV Therapy Discharge Disposition

A DISCREPANCY RESOLVED

by Monica Leisch, RHIA, CDIP, CCS

During a recent CHIA Coding and Data Quality (CDQ) Committee meeting, a discrepancy was brought to light regarding the home intravenous (IV) therapy disposition reporting standards between the Office of Statewide Health Planning and Development (OSHPD) and the Centers for Medicare and Medicaid Services (CMS). As part of the CHIA CDQ Committee's dedication to excellence, this discrepancy was researched and reported, which resulted in a change.

OSHPD instructs the reporting of home IV therapy disposition to code 06, providing the description: Home with IV therapy or infusion therapy under organized home health services. CMS's Medicare Claims Processing Manual instructs to code 06: Home care – in anticipation of covered skilled care – includes home IV beginning October 1, 2005 – includes home attendants and aides – includes home oxygen if supplied by home care agency.

It initially appears that the two entities are aligned with the understanding of the discharge disposition; however, the National Uniform Billing Committee (NUBC) gave direction to code home IV therapy as 01: Home in the frequently

asked questions (FAQ) section of the Official UB-04 Data Specifications Manual.

This instruction conflict was brought to the attention of the OSHPD representative on the CHIA CDQ Committee. The NUBC was contacted for clarification. The problem resulted from the discontinuation of 08: Home IV, in October 2005, and after which the appropriate patient status code for these types of situations was simply listed as code 01: Discharged to home.

To provide a clearer understanding of the assignment of the discharge disposition when the patient returns home with IV therapy, the NUBC agreed with OSHPD and provided the following statement:

"We believe that anytime the patient receives IV services at home from a licensed home health provider, the acute care facility should use discharge disposition of 06 for home health. Alternatively, if the IV service is provided by a private nurse, then 01 should be used."

NUBC will update the FAQ to clarify the home IV therapy discharge disposition effective July 1, 2019. NUBC agrees

that FAQ 34 is unclear, so it will be deleted. Notes will be added to 01: Discharged to home or self-care (routine discharge), to include home IV services from a home IV provider. Home IV is already listed under the usage notes for 06.

The new FAQ 50 will be added as a replacement to address the code to be assigned for a patient discharged for home IV services. The answer for FAQ 50 will include both possibilities:

- If the IV service is provided by a home IV provider (private nurse), 01 is the proper disposition;
- If the patient is discharged with a written plan of care under an organized home health services organization in anticipation of covered skilled care, the disposition code should be assigned as 06.

If a health information professional should find another coding discrepancy, please bring it to the attention of the CHIA CDQ Committee and/or your local OSHPD representative.

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