



Release Notes- Fiscal Year 2014

VA-DoD Resource Sharing Inpatient Institutional Billing- Modified TRICARE MS-DRG Payment Calculator

For Patients Discharged in FY14

Two versions of the VA-DoD Inpatient Institutional Calculator and Inpatient Billing Guide

For MTFs with **standard** direct care resource sharing agreements (i.e., charge TRICARE CMAC rates less 10% discount), use the “Standard_Modified_VA-DoD_Inp Inst Calculator_FY14” version.

For MTFs that have negotiated discounts **other than the standard 10% discount** or have specific negotiated reimbursement amounts, use the “Variable_Rate_Modified_VA-DoD_Inp Inst Calculator_FY14_” version.

CHANGES TO BOTH VERSIONS:

Addition of the inpatient professional services CHCS menu path

The following language has been added to both versions of the VA-DoD Inpatient Billing Guide, as well as to the VA-DoD Inpatient Calculator User Guide: *To identify inpatient professional services, use the following menu path in CHCS: FM\IFE\KG ADC DATA\PATIENT NAME\SELECT APPOINTMENT\STANDARD OUTPAT? FM\IFE\YES//CR. If you are not currently authorized to use the menu in CHCS, contact your system administrator to request access.*

Addition of the “+” feature to the Inpatient Billing Guide worksheet

The VA-DoD Inpatient Billing Calculator package has been condensed from three to two worksheets: the Inpatient Institutional Calculator (IIC) and Inpatient Billing Guide (IBG) worksheets. They are designed to aid MTFs that provide VA-DoD resource sharing agreement care in keeping track of all charges, institutional and non-institutional (e.g., professional services, pharmaceutical), related to an inpatient episode of care. The “+” feature on the IBG allows users to enter multiple services/supplies/pharmaceuticals for each non-institutional component of an inpatient episode of care on additional lines on the same worksheet. This feature replaces the third *Prof Services-DME-Rx-Pass Thru* worksheet in the FY13 IBG that has been removed from the FY14 version.

Updated business process for calculating Durable Medical Equipment (DME) charges

In the FY13 IBG, the link to the CMS DME website was included in the *Billing Criteria* column of the IBG to calculate the charge for DME. The guidance in the national VA-DoD resource sharing agreement is to bill DME at cost. Thus, for discharges in FY14, follow your MTF’s local sharing agreement regarding DME



charges. If it is silent on DME charges, follow the national sharing agreement's guidance, and bill DME at cost. If this cannot be determined, bill DME per the CMS DME Fee Schedule which is available as a resource for VA-DoD billing at: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSFeeSched/DMEPOS-Fee-Schedule.html#>.

Please contact the DHA UBO Helpdesk if you have any questions at 571-733-5935 or UBO.Helpdesk@altarum.org.