



WPS - Medicare

Computer Based Training on Lifetime Reserve Days

Agenda

- **What are Lifetime Reserve Days?**
- **When to use Lifetime Reserve Days**
 - **Short Stay Acute Hospital**
 - **Long Term Care Hospital**
- **“Deemed” use of Lifetime Reserve Days**
- **Election to not use Lifetime Reserve Days**
- **Revocation of Election**
- **References**

Objectives

- **To better understand when Lifetime Reserve Days can and should be used**
- **To know what rights a Medicare beneficiary has regarding the use of their Lifetime Reserve Days**

Lifetime Reserve Days

- **60 days of inpatient hospital care**
 - **After initial 90 days in a Benefit Period exhausted**
- **Never renewed**
 - **Beneficiary does not get new days with a new Benefit Period**
 - **“Lifetime”**
- **Considered “coinsurance” days**

Lifetime Reserve Days

- **Use of LTR days**
 - **Available after beneficiary exhausts 90 days in Benefit Period**
 - **60 full hospital days**
 - **30 co-insurance days**
 - **Hospitals required to notify patients they may elect not to use their LTR days**
 - **Notice should be given when the patient has 5 coinsurance days left and is expected to be hospitalized beyond that period**
 - **Notification and choice should be retained in the medical record**

Not Utilizing LTR Days

- **Short Stay Acute Hospital**
 - **Beneficiary has one or more regular days left in Benefit Period on admission**
 - Medicare will pay entire PPS amount for non-outlier days
 - No benefit for patient to use LTR days
 - LTR days not used until the high-cost outlier threshold is exceeded
 - “70” span code for days during the period covered by DRG
 - Days in 70 span code counted as “non-covered” days, but charges are covered

Short Stay Acute Hospital

SC UB92 CLAIM ENTRY SV:
HIC 999999999A TOB 111 S/LOC S B0100 PROVIDER 999999 UB-FORM
TRANSFERING HOSPICE PROVIDER PROCESS NEW HIC
PATIENT CONTROL NBR 888888888M FED.TAX NO. TAX SUB:
STMT DATES FROM 070107 TO 072207 DAYS COV 1 N-C 20 CO 1 LTR
LAST BAKER FIRST ROMNEY MI 20 DOB 08211908
ADDR 1 5500 MAIN STREET 2 APT. #94
3 ORANGEVALE, CA 4
5 6
ZIP 95662 SEX M MS W ADMIT DATE 070105 HR TYPE SRC 1 D HM STAT 01
COND CODES 01 02 03 04 05 06 07 08 09 10
OCC CDS/DATE 01 02 03 04 05
06 07 08 09 10
SPAN CODES/DATES 01 70 070207 072107 02 03
04 05 06 07
08 09 10
DCN
09 248.00 VALUE CODES - AMOUNTS - ANSI MSP APP IND
04 05 06
07 08 09
PLEASE ENTER DATA
PRESS PF3-EXIT PF5-SCROLL BKWD PF6-SCROLL FWD PF7-PREV PF8-NEXT

Short Stay Acute Hospital

SC

UB92 CLAIM ENTRY

REV CD PAGE 01

HIC 999999999A

TOB 131

S/LOC S B9000

PROVIDER 999999

CL	REV	HCPC MODIFS	RATE	TOT UNIT	COV UNIT	TOT CHARGE	NCOV CHARGE	SERV DT
1	0120		500.00	00021	00021	10500.00		
2	0250			00001	00001	475.00		
3	0300			00001	00001	210.75		
4	0420			00015	00015	1500.00		
5	0440			00010	00010	800.00		
6	0001					13485.75		

PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF2-171D PF3-EXIT PF5-UP PF6-DOWN PF7-PREV PF8-NEXT PF9-UPDT PF11-RIGHT

Not Utilizing LTR Days

- **Long Term Care Hospital**

- Beneficiary has enough regular days left in Benefit Period on admission to exceed 5/6 average length of stay

- Medicare will pay entire PPS amount for non-outlier days
- No benefit for patient to use LTR days
- LTR days not used until the high-cost outlier threshold is exceeded
- “70” span code for days during the period covered by LTC-DRG
 - Days in 70 span code counted as “non-covered” days, but charges are covered

Long Term Care Hospital

SC UB92 CLAIM ENTRY SV:
 HIC 999999999A TOB 111 S/LOC S B0100 PROVIDER 999999 UB-FORM
 TRANSFERING HOSPICE PROVIDER PROCESS NEW HIC
 PATIENT CONTROL NBR 888888888M FED.TAX NO. TAX SUB:
 STMT DATES FROM 070107 TO 072207 DAYS COV 14 N-C 7 CO 14 LTR
 LAST BAKER FIRST ROMNEY MI DOB 08211908
 ADDR 1 5500 MAIN STREET 2 APT. #94
 3 ORANGEVALE, CA 4
 5 6
 ZIP 95662 SEX M MS W ADMIT DATE 070105 HR TYPE SRC 1 D HM STAT 01
 COND CODES 01 02 03 04 05 06 07 08 09 10
 OCC CDS/DATE 01 02 03 04 05 06 07 08 09 10
 SPAN CODES/DATES 01 70 071507 072107 02 03
 04 05 06 07
 08 09 10
 DCN VALUE CODES - AMOUNTS - ANSI MSP APP IND
 01 09 3472.00 02 03
 04 05 06
 07 08 09

PLEASE ENTER DATA

PRESS PF3-EXIT PF5-SCROLL BKWD PF6-SCROLL FWD PF7-PREV PF8-NEXT

ALOS = 15 days
5/6 = 12.5 days

Long Term Care Hospital

SC

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PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF2-171D PF3-EXIT PF5-UP PF6-DOWN PF7-PREV PF8-NEXT PF9-UPDT PF11-RIGHT

Using LTR Days

- **Beneficiary has one or more regular days left in Benefit Period on admission (or enough to exceed 5/6 ALOS for LTCH) but claim goes into outlier status**
 - Regular days pay full DRG until outlier threshold is met
 - LTR days start the day the threshold is exceeded
 - LTR days continue until end of stay or benefits exhaust

High-Cost Outlier

SC UB92 CLAIM ENTRY SV:
 HIC 999999999A TOB 111 S/LOC S B0100 PROVIDER 999999 UB-FORM
 TRANSFERING HOSPICE PROVIDER PROCESS NEW HIC
 PATIENT CONTROL NBR 888888888M FED.TAX NO. TAX SUB:
 STMT DATES FROM 070107 TO 072207 DAYS COV 18 N-C 3 CO 14 LTR 4
 LAST BAKER FIRST ROMEY MI DOB 08211908
 ADDR 1 5500 MAIN STREET 2 APT. #94
 3 ORANGEVALE, CA 4
 5 6
 ZIP 95662 SEX M MS W ADMIT DATE 070105 HR TYPE SRC 1 D HM STAT 01
 COND CODES 01 02 03 04 05 06 07 08 09 10
 OCC CDS/DATE 01 47 071807 02 03 04 05 06 07 08 09 10
 06 07 08 09 10
 SPAN CODES/DATES 01 70 071507 071707 02 03 04 05 06 07
 04 05 06 07
 08 09 10
 DCN VALUE CODES - AMOUNTS - ANSI MSP APP IND
 01 08 1984.00 02 09 3472.00 03
 04 05 06
 07 08 09
 PLEASE ENTER DATA
 PRESS PF3-EXIT PF5-SCROLL BKWD PF6-SCROLL FWD PF7-PREV PF8-NEXT

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High-Cost Outlier

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PROCESS COMPLETED --- PLEASE CONTINUE
PRESS PF2-171D PF3-EXIT PF5-UP PF6-DOWN PF7-PREV PF8-NEXT PF9-UPDT PF11-RIGHT

Using LTR Days

- **Beneficiary has no regular days left on admission***
 - Available LTR days will be automatically used for each day of the stay
 - Unless patient elects not to use days
 - An election by a beneficiary not to use LTR days must apply to the entire hospital stay
 - If the beneficiary elects not to use LTR days, Medicare will not pay for any portion of the stay

** Both Short-Stay Acute and Long-Term Care Hospitals*

No Full/Co-Insurance Days Remaining on Admission

SC UB92 CLAIM ENTRY SV:
 HIC 999999999A TOB 111 S/LOC S B0100 PROVIDER 999999 UB-FORM
 TRANSFERING HOSPICE PROVIDER PROCESS NEW HIC
 PATIENT CONTROL NBR 888888888M FED.TAX NO. TAX SUB:
 STMT DATES FROM 070107 TO 072207 DAYS COV 21 N-C CO LTR 21
 LAST BAKER FIRST ROMNEY MI DOB 08211908
 ADDR 1 5500 MAIN STREET 2 APT. #94
 3 ORANGEVALE, CA 4
 5 6
 ZIP 95662 SEX M MS W ADMIT DATE 070105 HR TYPE SRC 1 D HM STAT 01
 COND CODES 01 02 03 04 05 06 07 08 09 10
 OCC CDS/DATE 01 02 03 04 05 06 07 08 09 10
 SPAN CODES/DATES 01 02 03 04 05 06 07
 DCN VALUE CODES - AMOUNTS - ANSI MSP APP IND
 01 08 10416.00 02 03
 04 05 06
 07 08 09
 PLEASE ENTER DATA
 PRESS PF3-EXIT PF5-SCROLL BKWD PF6-SCROLL FWD PF7-PREV PF8-NEXT

Using LTR Days

- **LTCH patient does not have enough regular days left on admission to exceed 5/6 of the ALOS**
 - **Available LTR days will be automatically used for each day of the stay following the last coinsurance day**
 - **Unless patient elects not to use days**
 - **An election by a beneficiary not to use LTR days must apply to the entire hospital stay**
 - **The beneficiary may not use just enough LTR days to exceed 5/6 of the ALOS and then elect not to use them**
 - **If the beneficiary elects not to use LTR days, Medicare will not pay for any portion of the stay beyond the last coinsurance day**

Not Enough Days Remaining on Admission to Exceed 5/6 ALOS

SC UB92 CLAIM ENTRY SV:
 HIC 999999999A TOB 111 S/LOC S B0100 PROVIDER 999999 UB-FORM
 TRANSFERING HOSPICE PROVIDER PROCESS NEW HIC
 PATIENT CONTROL NBR 888888888M FED.TAX NO. TAX SUB:
 STMT DATES FROM 070107 TO 072207 DAYS COV 21 N-C CO 10 LTR 11
 LAST BAKER FIRST ROMNEY MI DOB 08211908
 ADDR 1 5500 MAIN STREET 2 APT. #94
 3 ORANGEVALE, CA 4
 5 6
 ZIP 95662 SEX M MS W ADMIT DATE 070105 HR TYPE SRC 1 D HM STAT 01
 COND CODES 01 02 03 04 05 06 07 08 09 10
 OCC CDS/DATE 01 02 03 04 05 06 07 08 09 10
 SPAN CODES/DATES 01 02 03 04 05 06 07
 DCN VALUE CODES - AMOUNTS - ANSI MSP APP IND
 01 08 5456.00 02 09 2480.00 03
 04 05 06
 07 08 09
 PLEASE ENTER DATA
 PRESS PF3-EXIT PF5-SCROLL BKWD PF6-SCROLL FWD PF7-PREV PF8-NEXT

ALOS = 15 days
5/6 = 12.5 days

Election to Use or Not Use Lifetime Reserve Days

Election

- **Patient can refuse to use LTR days**
 - **Save them for future hospitalization**
 - **If average daily cost of hospital care is less than or equal to coinsurance rate, patient is deemed to have chosen not to use days**
 - **Once patient elects to use LTR days for a hospital stay, LTR days will continue to be utilized until discharge or benefits exhaust**

Election

- **Election not to utilize LTR days**
 - **Beneficiary must notify facility in writing of their choice not to use them**
 - **Covered Part B services billed to FI**
 - **Election may be made prior to hospitalization**
 - **Election may be made at any other time if:**
 - **Beneficiary or some other source offers to pay for services not covered by Medicare Part B;**
 - or*
 - **Hospital agrees to accept retroactive election**

Election

- **Election not to use LTR days**
 - **Retroactive election must be made within 90 days of discharge unless;**
 - **Benefits are available from a third-party payer to cover the services not payable under Part B**
 - **The hospital agrees to the retroactive election**

Election

- Beneficiary is **deemed** to have elected not to use LTR days:
 - If average daily cost of hospital care is less than or equal to coinsurance rate and LTR days are needed to pay for all or part of the outlier days
 - For the non-outlier portion of a stay in the hospital
 - If the patient has one or more regular days remaining upon admission; **or**
 - Enough regular days remain to exceed 5/6 of the ALOS for Long Term Care Hospitals

Election

- **Beneficiary is deemed to have elected not to use LTR days:**
 - **Beneficiary has no regular days available at the time of admission and total charges for which patient would be liable if LTR days are not used is less than the sum of the coinsurance amounts of the LTR days**

Exception

- **A beneficiary will be deemed to have elected to use LTR days when:**
 - **Benefits are available from a third-party payer to pay some or all of the charges;**
and
 - **The third-party requires that LTR days be used**
- **In such cases, LTR days will be utilized unless the beneficiary specifically elects not to use them**

Election Format

ELECTION NOT TO USE LIFETIME RESERVE DAYS

I do not wish to have Medicare benefits paid on my behalf under the lifetime reserve provisions of section 1812(b) of the Social Security Act for services furnished me by *(name of hospital)* beginning *(date)*.

WHERE THE ELECTION MAY TERMINATE BEFORE THE END OF THE STAY IN ACCORDANCE WITH SECTION 219.3, THE FOLLOWING MAY BE INCLUDED:

The last day to which this election applies is *(date)*.

I understand that I will be responsible for all of the hospital's charges not reimbursed by Medicare because of this election, except those covered under supplementary medical insurance. Where supplementary medical insurance payments may be made for services furnished during the period covered by the election, I will be responsible for the deductible and 20 percent coinsurance amounts.

 (signature) (date)

 (HI claim number)

Beneficiary Incapacitated

- **Beneficiary physically or mentally unable to file an election not to use LTR days**
 - **Election may be filed by anyone who may sign a Request for Payment on behalf of the beneficiary if:**
 - **Charges paid by other hospital insurance; *or***
 - **Some other person agrees to pay the hospital**
 - **Election must be filed by beneficiary's legal representative if:**
 - **Beneficiary does not have other hospital insurance**
 - **No other person agrees to pay the hospital**

Revocation of Election

- **An election not to use LTR days may be revoked**
 - **In whole or in part**
 - **If a claim has not been submitted for Part B ancillary services**
 - **Must be made within 90 days of discharge**
 - **May be revoked after 90 days if benefits are available from a private insurer to pay the LTR coinsurance amounts and the insurer requires that LTR days be used.**

Revocation of Election Format

REVOCATION OF ELECTION NOT TO USE LIFETIME RESERVE DAYS

I wish to revoke the election previously made by me or on my behalf not to use lifetime reserve days to pay for the inpatient hospital services furnished me by *(name of hospital)* during my stay there beginning *(admission date)*. (If appropriate add: I wish to revoke my election not to use lifetime reserve days for the period from _____ to _____.) I understand that my lifetime reserve days will be used for these services (to the extent that I have such days available) but that I will still be responsible to pay the Medicare coinsurance amounts and any charges for services not covered under the Medicare program.

(signature)(date)

(HI claim number)

Manual References

- **Medicare Benefit Policy Manual (100-2), Chapter 5**
 - **Summary of lifetime reserve days**
 - **Section 10**
 - **When payment will be made for reserve days**
 - **Section 20**
 - **Election not to use reserve days**
 - **Section 30**
 - **Election and Revocation of Election Format**
 - **Sections 40.1 - 40.2**
- **Medicare Claims Processing Manual (100-4), Chapter 3**
 - **Cost Outlier Bills with Benefits Exhausted**
 - **Section 20.7.4**

This presentation is intended to be used for educational purposes only.

Medicare regulations and guidelines are to be used as the final authority.

Thank you, you have completed the
CBT.

Would you like to take a 10 question
knowledge check?

Yes, let's get started.

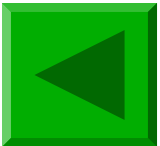
No, please take me back to
WPS Medicare's Provider
Homepage.

A beneficiary has 60 lifetime reserve days available once they have exhausted the initial 90 days in a Benefit Period.

True

False

Sorry, that's not correct. Please try
again.



That's correct, the answer is true.

Lifetime reserve days are regenerated every calendar year.

True

False

That's correct, the answer is false.

The hospital must notify the beneficiary that they may elect to not use their lifetime reserve days.

True

False

That's correct, the answer is true.

If the beneficiary has one or more regular days remaining on admission to a short-stay acute hospital, Medicare will pay the entire PPS amount for the non-outlier days.

True

False

That's correct, the answer is true.

If the beneficiary has one or more regular days left on admission to a long-term care hospital, Medicare will pay the entire PPS amount for the non-outlier days.

True

False

That's correct, the answer is false.

A beneficiary can elect to use lifetime reserve days for only a portion of the stay.

True

False

That's correct, the answer is false.

A beneficiary can elect to save their lifetime reserve days for future hospitalization.

True

False

That's correct, the answer is true.

Lifetime reserve days will not be utilized unless the beneficiary notifies the hospital in writing that they want to use them.

True

False

That's correct, the answer is false.

A beneficiary is deemed to have elected not to utilize lifetime reserve days for the non-outlier portion of the hospital stay.

True

False

That's correct, the answer is true.

An election not to use lifetime reserve days may be revoked at any time.

True

False

That's correct, the answer is false.

Thank you, you have completed the
Knowledge Check.

Would you like to take another CBT?

Yes, let's get started.

No, please take me back to
WPS Medicare's Provider
Homepage.