

Division of Medical ServicesProgram Development & Quality Assurance



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TO: Arkansas Medicaid Health Care Providers – Hospice

DATE: January 1, 2013

SUBJECT: Provider Manual Update Transmittal HOSPICE-2-11

<u>REMOVE</u>		<u>INSERT</u>	
Section	Date	Section	Date
210.100	10-13-03	210.100	1-1-13
214.000	11-1-06	214.000	1-1-13

Explanation of Updates

Sections 210.100 and 214.000 are updated to comply with a CMS mandate that individuals under the age of 21 may receive treatment for a terminal illness in addition to hospice services. Section 214.000 is also updated to clarify language.

The paper version of this update transmittal includes revised pages that may be filed in your provider manual. See Section I for instructions on updating the paper version of the manual. For electronic versions, these changes have already been incorporated.

If you have questions regarding this transmittal, please contact the HP Enterprise Services Provider Assistance Center at 1-800-457-4454 (Toll-Free) within Arkansas or locally and Out-of-State at (501) 376-2211.

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at 501-682-6453 (Local); 1-800-482-5850, extension 2-6453 (Toll-Free) or to obtain access to these numbers through voice relay, 1-800-877-8973 (TTY Hearing Impaired).

Arkansas Medicaid provider manuals (including update transmittals), official notices, notices of rule making and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: www.medicaid.state.ar.us.

Thank you for your participation in the Arkansas Medicaid Program.

Hospice Section II

TOC not required

210.100 Program Purpose

1-1-13

Hospice is a continuum of care, directed by professionals, designed to optimize the comfort and functionality of terminally ill patients for whom curative medicine has exhausted its possibilities. Hospice emphasizes relief from distress for the patient without actively shortening or prolonging life. Relief from distress includes palliation of physical, psychological and psychosocial symptoms of distress and a regular regime for alleviation of physical pain. All efforts are directed to the enrichment of living during the final days of life and to the provision of ongoing opportunities for the patient to be involved in life.

Hospice services are defined as reasonable and medically necessary services, palliative and supportive in nature, provided to the terminally ill for the management of the terminal illness and related conditions.

Individuals under the age of 21 may receive treatment for a terminal illness in addition to hospice services.

214.000 Election 1-1-13

- A. A patient electing hospice care must file an election statement with the designated hospice.
 - 1. The provider must furnish a printed statement that meets all the conditions of this section.
 - 2. The patient must sign and date the election statement.
- B. An election to receive hospice care continues through the initial election period and through any subsequent election periods without a break in care as long as the patient remains in the care of the hospice.
- C. A patient must designate an effective date for the election period.
 - 1. The effective date may be the first day of hospice care or any subsequent day of hospice care.
 - 2. A patient may not designate an effective date that is earlier than the date on which the election is made.
- D. A patient must waive all rights to Medicaid coverage of the following services for the duration of the election of hospice care:
 - 1. Hospice care provided by a hospice other than the hospice designated by the patient, unless provided under arrangements made by the designated hospice
 - 2. Any Medicaid services that are related to treatment of the terminal condition for which hospice care was elected or of a related condition; or that are equivalent to hospice care except for:
 - a. Services provided (either directly or under arrangement) by the designated hospice
 - b. Services provided as room and board by a nursing facility or ICF/MR if the individual is a resident
 - c. Services provided by the patient's attending physician if that physician is not an employee of the designated hospice or receiving compensation from the hospice for those services
 - d. Treatment of the terminal illness for Medicaid eligible individuals under the age of 21
 - 3. Home Health Program services and drugs and biologicals obtained through the Arkansas Medicaid Pharmacy Program for the palliation and management of symptoms related to the patient's terminal illness

Hospice Section II

E. Individuals under the age of 21 electing hospice and receiving treatment for a terminal illness must meet all program criteria and guidelines established for both hospice and the treatment of the terminal illness.

- F. When an election period ends, the patient's waiver of other Medicaid benefits expires and regular Medicaid coverage is possible if the patient revokes hospice care for the subsequent election period.
- G. An individual eligible for both Medicare and Medicaid must elect the hospice benefit simultaneously under both programs.
- When a hospice discharges a patient because the patient's condition is no longer considered terminal, the patient's waiver of other Medicaid benefits expires immediately and regular Medicaid coverage is possible.

Revision: HCFA – Region VI **ATTACHMENT 3.1-A** Page 7

November 1990

Revised: January 1, 2013

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

15.	Services in an intermediate care facility for the mentally retarded, as defined in Section 1905(d), (other than in an institution for mental diseases) for individuals who are determined, in accordance with Section 1902(a)(31)(A), to be in need of such care.
	□ Not provided. PA*
16.	Inpatient psychiatric facility services for individuals under 22 years of age.
	□ Provided: □ No limitations
	☐ Not provided. PA*
17.	Nurse-midwife services.
	□ Provided: □ No limitations
	☐ Not provided.
18.	Hospice care (in accordance with section 1905(o) of the Act).
	□ Provided: □ No limitations □ With limitations*
	☐ Not provided. ☐ Provided in accordance with section 2302 of the Affordable Care Act

*Description provided on attachment.

Revision: HCFA – Region VI November 1990 **ATTACHMENT 3.1-B** Page 6

Revised: January 1, 2013

State/Territory: <u>ARKANSAS</u>

AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED MEDICALLY NEEDY GROUP(S): <u>All</u>

16.	Services in an intermediate care facility for the mentally retarded, as defined in Section 1905(d), (other than in an institution for mental diseases) for individuals who are determined, in accordance with Section 1902(a)(31)(A), to be in need of such care.				
	☐ Provided: ☐ No limitations	☐ With limitations*			
16.	Inpatient psychiatric facility services for individuals under 22 years of age.				
	Provided: No limitations	With limitations*			
	PA*				
17.	Nurse-midwife services.				
	Provided: No limitations	With limitations*			
18.	Hospice care (in accordance with sec	etion 1905(o) of the Act).			
		With limitations*			
	□ Provided in accordance with secondary	ection 2302 of the Affordable Care Act			

*Description provided on attachment.