



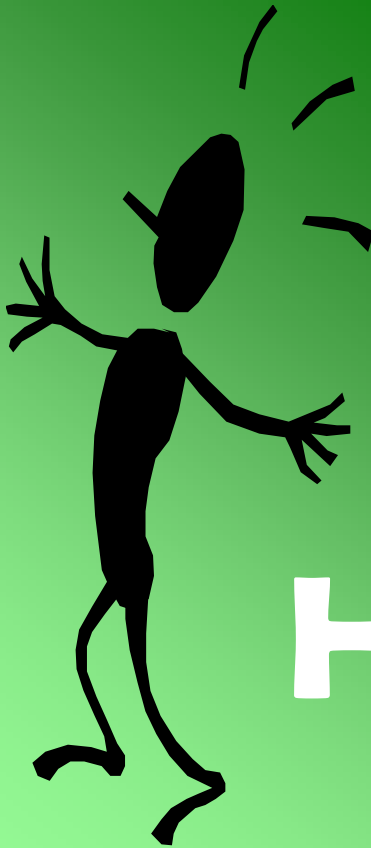
Long Term Care Division

Alabama Medicaid Agency
Long Term Care Division
Revised: January 2014

PRESENTS

An Overview of

HOSPICE CARE



HOSPICE CARE

- **Hospice care is defined as services which are necessary for the palliation or management of the terminal illness and related conditions.**

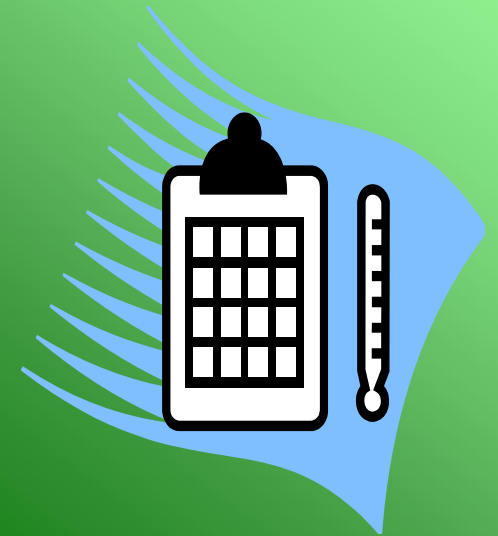


LEVEL OF CARE DETERMINATION

- **The attending physician or hospice medical director certifies the recipient has a terminal illness and requires services that are medically necessary for palliative care.**
- **Certification of the terminal illness of an individual who elects the hospice benefit shall be based on the physician's clinical judgment regarding the normal course of the individual's illness.**

LEVEL OF CARE DETERMINATION

- **Certification of terminal illness must include specific findings and medical documentation including, but not limited to: Medical records, lab, x-rays, pathology reports, etc.**



HOSPICE ELECTION AND CERTIFICATION

- Rule 560-X-51-.05 states that medical certification is required by the individual's attending physician; however, if the recipient does not have a primary attending physician, certification may be given by the Hospice Team physician or the hospice medical director.
- If an individual is eligible for Medicare as well as Medicaid, the Medicare election form will serve as election for both hospice programs.
- Each record must have the following: Complete and accurate HP Hospice Cover Sheet, required medical documentation , Hospice Election Form 165 (Revised & Effective September 1, 2013) and Form 165A Hospice Program Cover Sheet.



HOSPICE ELECTION AND CERTIFICATION

- **The Hospice Election Form 165 (Revised & Effective September 1, 2013) should indicate if the individual is a Medicare recipient and if the recipient is in a nursing facility.**
- **The Hospice Election Form 165 must be signed and dated by the recipient or the recipient's representative.**



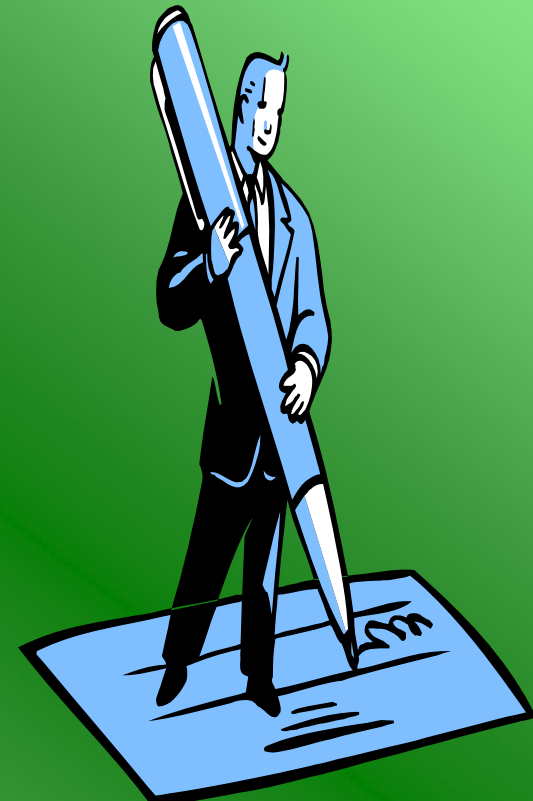
HOSPICE ELECTION AND CERTIFICATION

- **The signature or mark of the patient or the patient's representative signature should be witnessed and dated by the hospice provider representative obtaining the signatures.**
- **The physician must sign and date the form with the date the signature is obtained.**



HOSPICE ELECTION AND CERTIFICATION

- **The physician's signature must be an original (white-out or CRNP signatures are not acceptable).**
- **The date of the physician's signature must be within 2 calendar days of the election date unless there is a verbal order received for initiation of care.**



HOSPICE ELECTION AND CERTIFICATION



- **If there is a verbal order, the physician's signature and date must occur within 30 days of the election date.**
- **All subsequent benefit periods must be certified in writing within 2 calendar days.**
- **If the recipient has Medicare Part A, Medicare would be the payor for hospice benefits in the community and in the nursing home.**

TRANSFERS

- **An individual or representative may change the designation of the particular hospice that provides hospice care one time per election period. The change of the designated hospice is not a revocation of the election for the period in which it is made.**

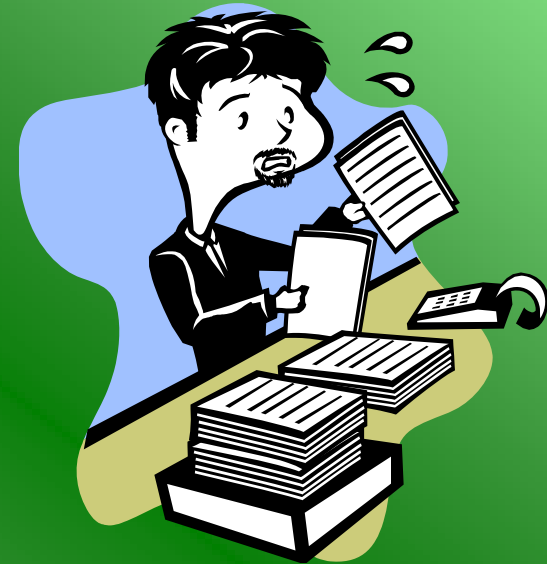


TRANSFERS

- **To change the designated hospice provider, the individual or representative must file a signed statement that includes the following information:**
 - 1. The name of the hospice from which care has been received.**
 - 2. The name of the hospice from which the individual plans to receive care.**
 - 3. The effective date of the hospice change.**
 - 4. The hospice provider transferring the recipient should submit a Hospice Recipient Status Change Form 165B indicating transfer of the recipient**
 - 5. The accepting hospice provider should submit documentation to the Alabama Medicaid Agency, or its designee, for review and processing to the LTC file**

TRANSFERS

- **The previous hospice provider would submit a Form 165B to the contractor indicating the date of revocation or discharge.**
- **The new hospice provider would complete the Medicaid Hospice Election Form 165.**



REVOCAATION

- **Notices of revocation or death should be submitted on the Hospice Recipient Status Change Form 165B to the AMA or its designee within 48 hours.**
- **If the recipient is certified by the Medicaid District Office (DO), the DO must be notified of permanent changes such as revocations with no intent to return, or the death of the individual.**



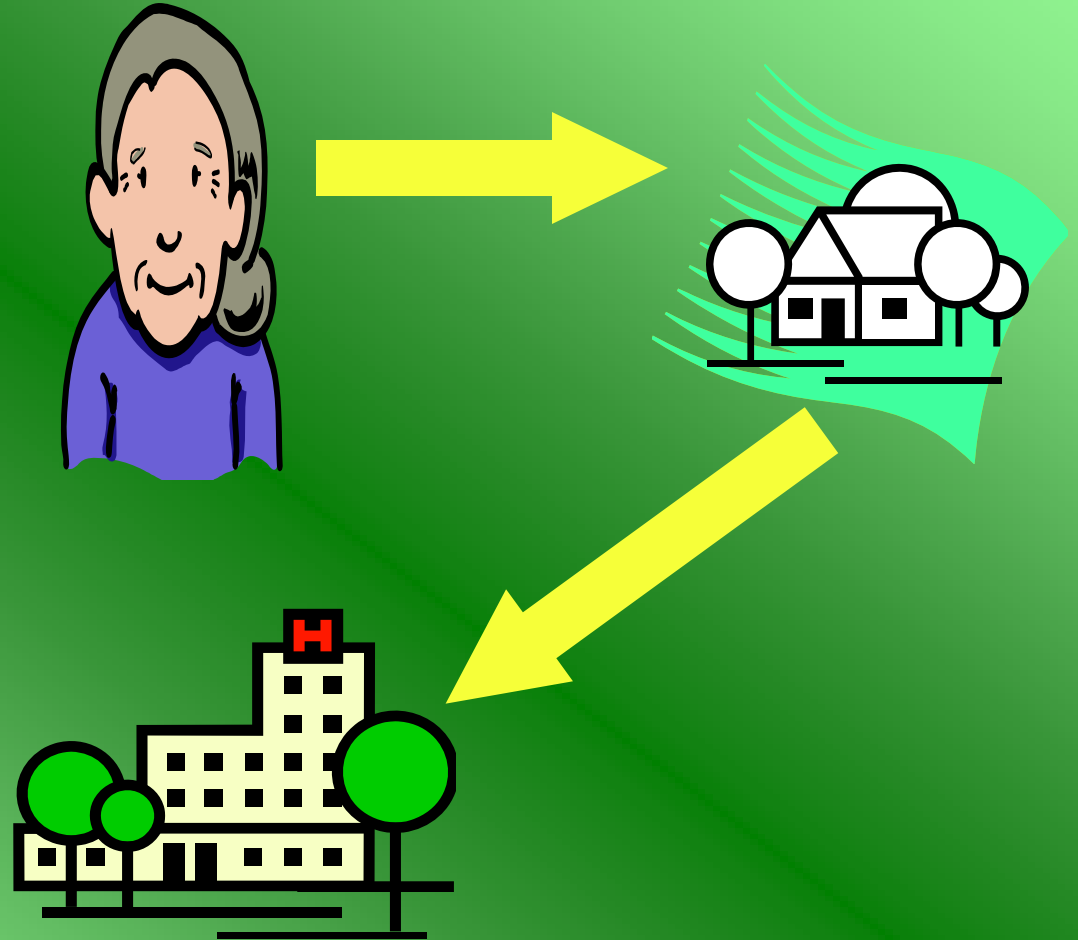
HOSPICE IN A NURSING FACILITY

- **Hospice providers may send the Medicaid Hospice Election Form 165 (Revised & Effective September 1, 2013) to the DO, when applying for financial eligibility.**
- **This form indicates to the DO that the client meets the level of care criteria.**



SSI Recipients Transitioning from Home to Institution

- If the recipient receives hospice in the home and transitions to a nursing home, SSA must be notified by the provider or sponsor regarding the individual's change of residence. The individual's income must be adjusted accordingly by SSA.



Hospice Review Process

PROSPECTIVE REVIEW POLICY OF HOSPICE ADMISSIONS

- **To ensure that state and federal rules and guidelines are adhered to by hospice providers, the Alabama Medicaid Agency (AMA) implemented a 100 percent review of medical records for hospice admissions and recertifications, effective 2/1/2006.**

CONCURRENT REVIEW PROCESS

- **The AMA professional nursing and medical staff or its designee, will conduct concurrent reviews of hospice providers.**
- **Each provider will mail to HP a complete and accurate HP Hospice Cover Sheet, Form 165A Cover Sheet, and the medical record for every hospice admission or recertification for Medicaid only recipients.**
- **The AMA or its designee will not be responsible for any cost associated with the copying or mailing of requested documents.**

CONCURRENT REVIEW PROCESS...CONTINUED


- **The AMA professional staff or its designee, will review documents to ensure compliance with federal and state guidelines governing the Hospice Program and to ensure the medical necessity of the services rendered to each recipient.**
- **The review will be completed by the AMA or its designee within 30 days from receipt of the documentation from the hospice provider.**

CONCURRENT REVIEW PROCESS...CONTINUED

- **Upon review of the documents, the provider will be notified in writing within 30 days as to whether the admission or recertification has been approved or denied.**
- **AMA or its designee will submit the dates to the LTC file for approved admission or recertifications.**

PROSPECTIVE REVIEW PROCESS...CONTINUED

- **Upon completion of the initial review of hospice which results in a denial, the AMA or its designee will send a letter to the provider which sets forth the appeal rights.**
- **Providers will be notified of their appeal rights including the informal reconsideration, as well as the fair hearing process.**



Hospice in the
Nursing Home

HOSPICE IN THE NURSING HOME

- **Medicaid will not restrict hospice services based on a patient's place of residence.**
- **A nursing facility resident may elect to receive hospice benefits if he or she meets the requirements for hospice care under the Medicaid Program.**

HOSPICE IN NURSING HOMES

- **If the resident elects to receive hospice benefits, the nursing home should submit the application to discharge the resident from the nursing home and admit to hospice.**
- **The hospice provider is responsible for completion of Form 165 (Hospice Election Form, Revised and Effective September 1, 2013) and submission of medical record if the resident does not have Medicare Part A. If the resident has Medicare Part A, the hospice provider must send Form 165B (Hospice Recipient Status Change) to AMA or its designee.**



HOSPICE TRANSFERS

- **If the individual transfers from hospice to a nursing home or nursing home to hospice, federal guidelines indicate that hospice should be paid for each day of service.**

- **Applications for nursing home to hospice should be processed as a transfer to allow for an overlap of dates.**

NOTE: Same date of discharge from the nursing home = admit date to hospice.

- **Applications for hospice to nursing home should be processed as a new admission for the nursing home.**

NOTE: Hospice discharge date from nursing home: Next calendar day = admit date to hospice.



HOSPICE IN THE NURSING HOME

- **The level of care determination and admissions process would be the same as in the community.**



CONTACT INFORMATION

Policy Questions

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Billing Questions

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Admission Questions

Medical & Quality Review Unit

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The End

