APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision # 046
Chapter / Section Long-term Care, Hospice, Electing hospice services – DSHS agency and client
Issued Date 02/01/2018
Revision Author Jennifer Ferguson
Division ALTSA
Phone 360.725.3406
Email Jennifer.Ferguson@dshs.wa.gov

Summary of Revision

https://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/dshs-agency-and-individuals-electing-hospice

No change in policy regarding hospice, but clarifying the language in the AH manual. Update to program codes.

Apple Health (Medicaid) Manual revision via track changes:

DSHS agency and individuals electing hospice services – DSHS agency and client
How will my DSHS agency know I have elected hospice services? Notification to the DSHS agency of hospice election

When a client elects hospice services, the hospice agency provides notification to the Health Care Authority (HCA) within five days of the election date using the HCA 13-746 hospice notification form. The form includes the client’s name, the effective date the client elected hospice services, the type of hospice (Medicare or Medicaid), the name of the hospice provider, and the name of the facility if the client lives in a facility, including the admission date. This also includes the daily rate.

The hospice agency checks for eligibility using the ProviderOne system. If the client is not active on medicaid assistance, the hospice provider will assist the client in submitting an application (HCA 18-001 or 18-005) application for assistance with the HCA Hospice notification form and release of information (DSHS 14-532). The HCS or DDA financial worker can release the eligibility determination, the award letter(s), participation, and/or other information that the hospice agency needs to bill correctly.

The hospice agency will provide a signed release of information for the client in order to facilitate the coordination of services between the agency and DSHS. The hospice agency checks for eligibility using the ProviderOne system. If the client is not on assistance, the provider will assist the client in submitting an application for assistance with the HCA Hospice notification and release of information.

A hospice agency is responsible to verify a client’s eligibility with the client or with the appropriate HCS office or the DDA Hospice specialty unit. Once eligibility for medical coverage has been approved or denied, the approving office completes the DSHS section of the HCA 13-746 form and faxes it back to the hospice agency.

When a client’s hospice status changes, the hospice agency faxes a hospice notification form with the updated information HCA to be scanned into the client’s electronic record and indexed to the appropriate office. Examples include: the client revokes hospice services, the client discharges from a hospice facility or the clients dies. If a client transfers to a different hospice agency, both the old and the new providers are responsible to provide notification to HCA. Once clients do elect Hospice, covered drugs and items are limited under the Hospice program. Certain items are covered in the Hospice daily rate. (WAC 182-551-1210).
Revocation of services. (WAC 182-551-1360) The Hospice provider is responsible to notify HCA of the revocation by completing and faxing a copy of the HCA 13-746 hospice notification form. The Hospice provider is responsible to give the client a copy of the revocation statement and inform the client that the revocation statement must be presented with the client’s current medical identification card when obtaining Medicaid covered services, supplies or both. Client’s need to use this procedure until the department can remove Hospice coding out of the ProviderOne claims payment system.