Summary of Revision

https://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/hospice-and-altsa-programs

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:

Hospice and ALTSA Long-term Services and Supports (LTSS) programs

Revised May 2, 2011
ALTSALTSS Programs (HCS and DDA HCB Waivers)

- LTSS Waiver programs such as CFC, HCS COPES, PACE, New Freedom, and DDA Waiver programs take precedence over Hospice. ACES is coded under the primary HCB Waiver service and participation is applied toward the Waiver program first; the hospice service is added to the HCBS screen. It is important that services are coordinated between the Hospice provider and the DSHS agency providing services so there is no duplication of services.

- Indicate the Hospice agency on the AREP for the L21/L22 waiver program (such as COPES that is already active).

- Indicate the hospice service on the INST screen along with the COPES service. Report to the case manager of the HCB Waiver service the client has elected Hospice. Send a copy of the DSHS/Hospice Notification form to the Social Worker/case manager of record so they have information on the Hospice Provider to coordinate services. It is important that services are coordinated between the Hospice provider and the DSHS agency providing an HCB waiver or medicaid personal care (MPC) service so there is no duplication of services.

- For clients who elect hospice while in a Nursing Facility, ACES is coded as Hospice in a Nursing Facility on the INST screen institutional care screen under facilities. And add the hospice service information in the HCBS field on the INST screen. This will add the hospice indicator to the STAT screen case; the case and the case will remain an "L" track case and will trickle to a L231/L322.

- Use the short stay screen for a hospice election in a NF when the client is already on Medicaid and the election and end of hospice service is under 30 days. (see example #1 below).

- Use the short stay screen for a hospice election when a client is active on a medicaid program and is admitted into a hospice care center or hospice NF admission 30 days or less.

See ACES instructions

Example: Active client on L02 in nursing home elects Hospice on 10/2/201708 and dies or revokes hospice on 10/15/201709.
This case does not need to be changed in order to issue an hospice award letter. Use the short stay screen to issue an hospice award letter from 10/2/2017 to 10/15/2017.

Example: Active CFCMPC client on L52G03 elects hospice

In this example, the client remains in the ALF under the CFCMPC program. The hospice agency will bill the medicaid agency with hospice as a service. The CFCMPC program remains the priority program. Code the hospice service on the INST screen. The hospice service should be updated in ACES on the institutional care screen.

Example: Active MPC client on a G03 elects hospice and enters a hospice care center

In this example, client was receiving MPC in an ALF and is active on the G03 program. On 10/10/08 the client is discharged from the ALF into a Hospice Care Center. On 10/20/08 the client dies.

The financial worker is doing the work on 10/21.

Use the short stay screen on the active G03 to issue the hospice award letter. If the client were at a home setting or in an ALF receiving an HCS service, the Hospice agency does not need an award letter to bill. The LTSS takes precedence.

Once the client goes into a hospice care center or a nursing home under Hospice, an award letter is needed to bill. The short stay screen can be used for those admissions into a medical institution under the Hospice program and it is under 30 days.

Example: Active L22 COPES client electing hospice: the client resides in their own home.

In this example, the hospice service should be updated in ACES on the institutional care screen. Hospice is coded on the INST screen along with the COPES service. The COPES Waiver is the priority program and any participation would go to the COPES provider. A hospice award letter is not issued or needed, the hospice provider bills the department as a hospice service.

See LTC manual instructions for short stays