

RE: Changes to the Provision of Hospice Services

The purpose of this transmittal is to inform providers of two changes to the Department's policy on the provision of hospice services.

Concurrent Care for Children

Effective March 23, 2010 the Patient Protection and Affordable Care Act (PPACA) amended the definition of "hospice" and provides that election of hospice by a child under the age of 21 shall not constitute a waiver of payment for treatment of the condition for which the terminal diagnosis has been made. This same change was made to the Children's Health Insurance Program and allows children to receive hospice services concurrently with treatment of the child's condition. Note that these changes apply <u>only</u> to children defined as those under the age of 21 for fee for service and HUSKY A clients and under the age of 19 for HUSKY B clients.

The Department has modified edits in its claims processing system to allow payment of claims for children who have elected hospice concurrently with payment of other claims consistent with the PPACA. If the client is a child, the GW modifier does not need to be billed with claims for professional services and condition code "07" does not need to be billed with claims for outpatient services.

Changes to Hospice Election Form

The Department has modified its Hospice Election form to reflect that children do not need to waive their rights to regular Medicaid services for treatment of the terminal condition when electing hospice.

Unrelated to the change in policy for children who elect hospice, the form now identifies which fields must be completed in order for the Department to enter the election. Please note that if any of the required fields are left blank the Department will not process the information. Also, the original Hospice Election Form no longer needs to be mailed to DSS. However, the faxed election form must still be submitted. Providers should keep the original form on file. The page "Instructions for Completion of Hospice Election form (W-406)" has been revised to reflect this change. Continuous Home Care (RCC 652)

Based on CMS guidance (CR778), DSS will mirror the federal policy and not allow continuous hospice (RCC 652) when a client is in a nursing facility.

Posting Instructions: Policy transmittals can be downloaded from the Web site at <u>www.ctdssmap.com</u>

Distribution: This policy transmittal is being distributed to providers enrolled in the Connecticut Medical Assistance Program by HP.

Responsible Unit: DSS, Medical Care Administration, Medical Policy and Regulations, Barbara Fletcher, Supervisor, Medical Policy at (860) 424-5136.

Date Issued: December 2010