MAL 574 / MHTL 3336-11-01 (Rule Changes Affecting Home Health Services and Hospice Services)

Medicaid Handbook Transmittal Letter (MHTL) No. 3336-11-01 Medical Assistance Letter (MAL) 574

January 21, 2011

TO: Director, Ohio Department of Aging

Director, Ohio Department of Mental Retardation and Developmental Disabilities

Director, Ohio Department of Mental Health

Director, Ohio Department of Alcohol and Drug Addiction Services

Providers, ODJFS-Administered Home and Community-Based Services

Providers, Home Health Agencies

Providers, Hospice Agencies

Providers, Otherwise-accredited Agencies

Providers, Independent Private Duty Nursing

Case Managers and Administrators, CareStar

Directors, County Departments of Job and Family Services

Directors, Area Agencies on Aging

Directors, County Boards of Mental Retardation and Developmental Disabilities

Directors, Centers for Independent Living

Ohio Long Term Care Ombudsmen

Director, Brain Injury Association of Ohio

Directors, Members, HOME Choice Planning and Advisory Group

Chairperson, Ohio Olmstead Task Force

Director, Ohio Council for Home Care and Hospice

Director, Ohio Home Care Organization

Director, Ohio Hospice and Palliative Care Organization

Vice-President, SEIU District 1199, WV/KY/OH

President, Ohio State Medical Association

President, Ohio Osteopathic Association

All Eligible General Practice Physicians

Providers, Family Practice Physician

Providers, Pediatrician

Providers, Internal Medicine Practitioner

Providers, Obstetrician

Providers, Physician Services

Comprehensive Clinics

Public Health Department Clinics

Outpatient Health Facilities

Rural Health Clinics

Federally Qualified Health Centers

Managed Care Plans

FROM: Michael B. Colbert, Interim Director

SUBJECT: Rule Changes Affecting Home Health Services and Hospice Services

The Ohio Department of Job and Family Services (ODJFS) has amended rules 5101:3-56-02, and 5101:3-56-06 of the Administrative Code (OAC). The amendments to these rules will 1) require a face-to-face encounter (between the consumer and the consumer's physician, advanced practice nurse in collaboration with the qualifying treating physician, or physician assistant under the supervision of the qualifying treating physician), prior to the supervising physician certifying medical necessity for home health services in order to align these rules with the implementation of Section 6407(d) of the federal Patient Protection and Affordable Care Act (PPACA) of 2010 and 2) specify that a child under age twenty-one who completes a hospice election form does not waive any rights to be provided with, or to have payment made for, services that are related to the treatment of the child's condition for which a diagnosis of terminal illness has been made in order to align these rules with the implementation of Section 2302 of the federal Patient Protection and Affordable Care Act (PPACA) of 2010. A description of these rules follows below.

<u>Specification</u>, explains the services available through the home health benefit for Medicaid consumers and providers. The proposed amendment to this rule set forth the following: 1) a requirement for a face-to-face encounter as described above must occur within ninety days prior to the start of home health services start of care date, or within thirty days following the start of care date inclusive of the start of care date, preceding certification of medical necessity of home health services in order to align this rule with the implementation of Section 6407(d) of the federal Patient Protection and Affordable Care Act (PPACA) of 2010, 2) a change from the Ohio Department of Mental Retardation and Developmental Disabilities to the Ohio Department of Developmental Disabilities and 3) correction of citations.

OAC rule 5101:3-56-02, Hospice services: eligibility and election requirements, explains hospice eligibility requirements for consumers. The proposed amendment to this rule sets forth that when a child voluntarily elects hospice, he or she does not waive the right to be provided with, or have payment made for, services that are related to the treatment of the child's condition for which a diagnosis of terminal illness has been made in order to align this rule with the implementation of Section 2302 of the federal Patient Protection and Affordable Care Act (PPACA) of 2010.

OAC rule 5101:3-56-04, Hospice services: provider requirements, explains responsibilities of hospice providers. The proposed amendment to this rule sets forth the following additional requirements: 1) facilitation of concurrent care for children under age twenty-one with other Medicaid providers, 2) documentation about how services are coordinated between the hospice provider and other Medicaid providers, 3) provision of a copy of the consumer's advance directive and hospice election form to other Medicaid providers, 4) notification to consumers of their responsibilities to report to the hospice provider the names of their other Medicaid providers and 5) correction of citations. These amendments are part of the implementation of Section 2302 of the federal Patient Protection and Affordable Care Act (PPACA) of 2010, and provide for the assurance of continuity of care and coordination to avoid duplication of equivalent services.

OAC rule 5101:3-56-06, Hospice services: reimbursement, explains the requirements for the reimbursement of hospice providers. The proposed amendment to this rule sets forth the following: 1) specification that the Ohio Department of Job and Family Services will reimburse only non-hospice providers for curative treatments delivered to consumers under age twenty-one for the consumer's terminal illness, and that Medicaid providers who provide curative treatments for these consumers must comply with all the requirements for Medicaid providers in Chapter 5101:3-1 of the Administrative Code and not bill hospice organizations and 2) correction of citations.

Instructions:

Remove and File as Obsolete	Insert Replacement

5101:3-12-01 (effective 11/8/2007) <u>5101:3-12-01</u> (effective 2/1/2	2011)
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Instructions:

Remove and File as Obsolete	Insert Replacement
5101:3-56-02 (effective 3/2/2008)	5101:3-56-02 (effective 2/1/2011)
5101:3-56-04 (effective 3/2/2008)	5101:3-56-04 (effective 2/1/2011)
5101:3-56-06 (effective 3/2/2008)	5101:3-56-06 (effective 2/1/2011)

Web Pages:

ODJFS maintains an "electronic manuals" web page for the department's rules, manuals and handbooks. The URL is as follows:

http://emanuals.odifs.state.oh.us/emanuals/

This transmittal letter and attachments may be viewed as follows:

- (1) Select "Ohio Health Plans Provider" (right column).
- (2) Select "Physician Services" (right column).
- (3) Select "Medicaid Handbook Transmittal Letters (in the "Physician Services Table of Contents" dropdown).

It may also be viewed as follows:

- (1) Select "Ohio Health Plans Provider" (right column).
- (2) Select "Hospice Services" (right column).
- (3) Select "Medical Assistance Letters", "Hospice Rules" (in the "Hospice Services Table of Contents" dropdown).

Questions:

Questions about this MAL and MHTL should be addressed to:

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