# Alabama Medicaid Agency

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DON SIEGELMAN
Governor

MIKE LEWIS
Commissioner


June 1, 2001

**PROVIDER NOTICE 01-10**

**TO:** Hospice Providers

**SUBJECT:** Hospice Care

Medicaid offers hospice care services to Medicaid-eligible recipients who are terminally ill. Medical certification is required by the individual's attending physician; however, if the individual does not have a primary attending physician, certification may be given by the hospice team physician or the hospice medical director. Certification of the terminal illness of an individual who elects hospice shall be based on the attending physician, hospice team physician, or hospice medical director's clinical judgement regarding the normal course of the individual's illness. Hospice care means services which are necessary for the palliation or management of the terminal illness and related condition.

The hospice provider must obtain physician certification that the individual recipient is terminally ill. Certifications of terminal illness must include specific clinical findings and other medical documentation including, but not limited to, medical records, lab x-rays, pathology reports, etc. Intentional miscertification of patients as terminally ill for chronic debilitating diagnoses or old age debilitation where documentation fails to support the terminal illness will result in referral to Medicaid's Provider Review Unit for a full review and appropriate action. The hospice provider must not recertify a person who reaches a point of stability and is no longer considered terminally ill. These individuals must be discharged to traditional Medicaid services.

Effective June 20, 2001, in addition to the other requirements as identified in Chapter 51 of the Alabama Medicaid Agency's Administrative Code, the hospice provider must comply with the following:

- Submit required hospice election and physician certification documentation to the Alabama Medicaid Agency Long Term Care (LTC) Division within 15 days from the date Medicaid coverage of hospice care is requested. The 15 days will be calculated from the date the required documentation is received and date stamped in the Long Term Care Division. **All requests with a date greater than 15 days old will be assigned an effective date that is 15 days prior to the Long Term Care date stamp. No payment will be made for the days between the requested date and the assigned Long Term Care effective date**. The facility will be informed in writing of the assigned effective date.

- Submit to the Alabama Medicaid Agency Long Term Care Division a monthly census by the fifth of each month for the preceding month listing Medicaid recipients admitted to the hospice program and those who are continuing to receive hospice care. The attached Hospice Admission and Continued Certification Log, Form 313, should be used. The individuals who are receiving continued hospice care should be identified in the continued certification column of the form. Please note that continued certification is defined as any individual, excluding initial admissions, who is certified and continuously receiving hospice services. A sample of at least ten-percent (10%) of medical records from the provider's census report will be requested for review monthly. The medical record documentation must include treatment plans, specific clinical findings and other documentation supporting terminal illness. A determination of whether or not documentation supports the individual's terminal illness for hospice services and the appropriateness of the certification by

the physician of the recipient's terminal illness will be made by Medicaid professional staff. Medicare guidelines, along with criteria developed by Medicaid, will be used in determining hospice appropriateness.

- If the provider has had less than ten (10) admissions or continued certifications for the review period, all records for the preceding month must be submitted along with the census report.

- The Medicaid Hospice Election and Physician's Certification, Form 165, has been revised. The diagnosis for which the patient is certified under hospice must be included on the form. Until the updated Long Term Care software is furnished, send hard copies of the attached Form 165 to the Alabama Medicaid Agency Long Term Care Division. Form 165 and Form 313 can also be found on the website at **www.medicaid.state.al.us**.

If it appears that any of the admissions or continued certifications do not justify the necessity and appropriateness of hospice services, Medicaid professional staff may request additional information.

If additional information is not provided or if the information fails to support the admission or continued certification for hospice care, Medicaid will seek recoupment of all payments made during the non-qualified periods and take any other appropriate action. The hospice provider will be notified in writing of the results of the review and the identified recoupment amount. The hospice provider will discharge those patients to traditional Medicaid services.

Notices will be issued to recipients who are determined to be inappropriately placed on hospice advising of this fact and their eligibility for traditional Medicaid services.

Questions concerning this provider notice should be directed to Long Term Care Provider/Recipient Management at (334) 242-5657.

Mike Lewis
Commissioner

Attachments

**Distribution List:**
Alabama State Medical Association
Medical Association of the State of Alabama
Alabama Hospice Association
Alabama Hospital Association
Alabama Nursing Home Association
Division of Health Care Facilities
Electronic Data Systems (EDS)
Alabama Medicaid Agency Staff

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Reminder: All Medicaid recipients are required to present their Medicaid eligibility card and proper identification to a provider of medical care of services for verification of eligibility when seeking treatment or service under the Medicaid program.