



Michigan Department of Community Health

Bulletin:MSA 10-10Distribution:Hospice, Private Duty Nursing (PDN)Issued:April 1, 2010Subject:Hospice Services for Beneficiary Receiving PDNEffective:May 1, 2010Programs Affected:Medicaid

A beneficiary receiving PDN services may become eligible for the Medicaid hospice benefit. Hospice is a covered benefit under Michigan Medicaid when the beneficiary has been diagnosed with a terminal illness. As required in the Medicare Conditions of Participation (42 Code of Federal Regulations [CFR] § 418), the hospice medical director and the beneficiary's attending physician must certify that the beneficiary has a life expectancy of six months or less if the terminal illness runs its normal course. Michigan Medicaid hospice providers must comply with the Conditions of Participation.

When a beneficiary receiving PDN becomes eligible for hospice, the hospice is required to notify the Michigan Department of Community Health (MDCH) Program Review Division (PRD) before a claim is submitted for the services. (Refer to the Directory Appendix, under Prior Authorization – Fee-for-Service [FFS] Medicaid & Children's Special Health Care Services [CSHCS], for contact information).

The hospice must provide the following information on agency letterhead to the PRD:

- 1. beneficiary name and Medicaid identification number;
- 2. a request for a case review and approval of hospice services;
- 3. a statement confirming that the beneficiary has been certified terminally ill with six months or less to live, signed by the hospice medical director and the beneficiary's attending physician; and
- 4. name, e-mail address, and telephone number of the contact person.

The PRD staff may request medical record documentation for their review.

If services are approved, the hospice must work with the PDN agency to develop a coordinated plan of care. Both the hospice and PDN staff must ensure that duplication of services does not occur. While hospice maintains the lead in coordinating the services, the PDN agency must continue to obtain prior authorization from MDCH for the PDN services.

This bulletin does not apply to beneficiaries receiving PDN services under the Children's Waiver Program (CWP), the Habilitation Supports Waiver (HSW), or the MI Choice Waiver. For beneficiaries under the CWP or HSW, providers should contact the beneficiary's case manager to inform them of hospice eligibility. If the beneficiary is under the MI Choice Waiver, providers should contact the MI Choice Waiver Supports Coordinator.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at <u>ProviderSupport@michigan.gov</u>. When you submit an e-mail, include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

APPROVED

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