

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

STATE OF NEBRASKA

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED

LIMITATION ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED AS FOLLOWS.

Medical and Remedial Care and Services-Item 18

Citation

1905(o) of the Social
Security Act

42 CFR Part 418

Hospice Care

The Nebraska Medical Assistance Program will provide reimbursement for hospice care for Medicaid clients that are terminally ill. Terminally ill means that the client is diagnosed with a medical prognosis that his/her life expectancy is six months or less if the illness runs its normal course.

Hospice services are provided in accordance with the guidance specified in sections 4305-4308 of the State Medicaid Manual.

Election Statement

An election statement must be filed with a specific hospice for the client who meets the requirements. An election to receive hospice care will be considered to continue through the initial certification period and the subsequent election periods without a break in care as long as the client remains in the care of the hospice and does not revoke the election.

Dually eligible (Medicare and Medicaid) clients must elect and revoke hospice care simultaneously under both the Medicare and the Medicaid program.

Election Period

A client may elect to receive hospice care during one or more of following election periods;

1. an initial 90-day period;
2. a subsequent 90-day period;
3. an initial 60-day period;
4. a subsequent 60-day period;
5. a third 60-day period.

Additional 60-day benefit periods must be approved as an exception under the Prior Authorization provision.

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Certification of Terminal Illness

The client must be certified as terminally ill with a six-month life expectancy by the Hospice medical director and the attending physician at the beginning of the first benefit period and by the Hospice medical director for all subsequent benefit periods. The hospice provider must obtain written certification of the terminal illness for each certification period even when a single election continues in effect for two or more periods.

Plan of Care

A written plan of care must be established and maintained for each client admitted to a hospice program. The care provided to a client must be consistent with the plan and be reasonable and necessary for the palliation or management of the terminal illness as well as related conditions. The plan of care must be established before services are provided.

Waiver of Payment for Other Services

A client waives all rights to Medicaid payments for the duration of the election of hospice care for the following services:

Hospice care provided by a hospice other than the hospice designated by the client; and

For adult clients, any Medicaid services that are related to the treatment of the terminal condition for which hospice care elected or a related condition or that are equivalent to hospice care except for services provided:

by the designated hospice; or

the client's attending physician if that physician is not an employee of the designated hospice or receiving compensation from the hospice for those services.

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