Effective Date: July 1, 2011

18. Hospice

A. Benefits

The Kentucky Medicaid Hospice Program follows the amount, duration, and scope of services specified in the Medicare Hospice Program.

Any terminally ill Medicaid recipient may elect hospice coverage (where hospice care is provided by a participating hospice program in his service area) Each recipient will be required to make his voluntary selection in writing, and must present a statement from a physician (or such statement must be available) to show that the recipient's illness is terminal and that death is expected to occur within six (6) months. In doing so, the recipient waives rights to other Medicaid services that are related to the treatment of his or her terminal illness(es) with the exception of individuals less than 21 years of age. Individuals less than 21 years of age may receive concurrent hospice and acute care treatment. The recipient has the right to cancel the election at any time without forfeiting additional Medicaid hereic coverage at a later time. The recipient does not waive rights to Medicaid services for conditions not related to the terminal condition.

Medicaid beneficiaries under the age of 21 may receive hospice benefits, including curative treatment without foregoing any other service to which the child is entitled under the Medicaid program, pursuant to Section 2302 of the Patient Protection and Affordable Care Act of 2010.

B. Limitations

Dually eligible (Medicare and Medicaid) recipients must participate in the Medicare and Medicaid hospice programs simultaneously in order to receive Medicaid hospice services.

TN # <u>11-007</u> Supersedes TN # <u>89-1</u>

Approved Date: 10-13-11

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Approved Date 10-13-11

Effective Date: July 1, 2011

State Kentucky

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- F. The state assures that the provision of case management services will not unlawfully restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the providers of case management services.
 - 2. Eligible recipients will have free choice of the available providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for the same purpose.

TN No. <u>00-11</u> Supersedes TN No. <u>None</u>

Approval Date: Dec 18, 2000

Effective Date 07-01-2000

 State:
 Kentucky
 Revised

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State Kentucky

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State Kentucky

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