

Wisconsin Medicaid update and BadgerCare

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Wisconsin Medicaid and BadgerCare Information for Providers

To:

Hospices

Personal Care
Providers

HMOs and Other
Managed Care
Programs

Billing personal care for hospice recipients

This *Update* explains Wisconsin Medicaid's reimbursement policy when a recipient receiving personal care services elects the Medicaid hospice benefit.

Recipients receiving personal care through Wisconsin Medicaid who elect the hospice benefit may be eligible to continue receiving personal care services from the personal care agency in addition to hospice services. The recipient may continue to receive personal care services as well as hospice services if personal care services are not directly related to the terminal illness.

Prior authorization

If the above criteria are met, the agency providing personal care services will have already received prior authorization (PA) for the recipient. The personal care agency is required to submit a Prior Authorization Amendment Request and attach a copy of the hospice Plan of Care (POC) that identifies the need for continued personal care services as well as the specific services provided directly by the hospice. The POC must also indicate any aide services to be provided by the hospice. This must be done within one week of the recipient's election of hospice care.

When the personal care PA needs to be renewed, a current hospice POC must be included. Additional personal care needs resulting from the terminal illness are the responsibility of the hospice.

Reimbursement

Personal care agencies should continue to bill for services the same way they did before the recipient began hospice care.

For example, a recipient is a quadriplegic as a result of an automobile accident and has been receiving personal care services. The recipient is then diagnosed with terminal cancer and elects the hospice benefit. Wisconsin Medicaid will continue to reimburse the personal care provider for the personal care required in connection with the recipient's quadriplegia with an amended PA, including a hospice POC, identifying the continued need for that service. When the recipient requires additional personal care due to the terminal illness, the hospice is responsible for those additional services.

This *Update* applies to fee-for-service Medicaid providers only. If you are a Medicaid HMO network provider, contact your managed care organization for more information about its billing procedures. Wisconsin Medicaid HMOs are required to provide at least the same benefits for enrollees as those provided under fee-for-service arrangements.

If you have any questions, please call Provider Services at (800) 947-9627 or (608) 221-9883.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at www.dhfs.state.wi.us/medicaid/.