

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201626 MAY 17, 2016

IHCP clarifies coverage of hospice and home health services in HIP

The Indiana Health Coverage Programs (IHCP) covers hospice services and home health services under the Healthy Indiana Plan (HIP) 2.0 program. These services are part of the managed care capitation and are reimbursed through the managed care entities (MCEs). HIP members receiving hospice services will remain enrolled in managed care with their health plan.

Hospice benefits for HIP members

HIP Plus and *HIP Basic* members have access to hospice benefits, as documented in the Alternative Benefit Plan (ABP). *HIP State Plan – Plus* and *HIP State Plan – Basic* members have hospice benefits that mirror those of members in Traditional Medicaid, as documented in the IHCP [Medical Policy Manual](#). Coverage details are outlined in the following sections.



HIP Plus and HIP Basic

HIP Plus and *HIP Basic* hospice benefits mirror the covered services and reimbursement methodology of the Medicare hospice program. Hospice care is provided if the member has a terminal illness, in accordance with a plan of care (POC) established before admission. IHCP reimbursement is not available for hospice services furnished without prior authorization (PA) from the MCE with which the member is enrolled. PA requires a justification of services to be rendered, based on the medical needs of the member, along with a planned course of treatment related to the number of services to be provided and the duration of treatment. The POC must include a statement from a physician that life expectancy is six months or less. Covered services include a semiprivate room; a private room is provided when medically necessary. Concurrent curative care is covered for HIP members who are 19 and 20 years of age. Room-and-board services are not covered when temporary leave days are permitted.

HIP State Plan – Plus and HIP State Plan – Basic

HIP State Plan – Plus and *HIP State Plan – Basic* hospice benefits mirror those of Traditional Medicaid. Covered benefits include the core hospice services covered under the Medicaid hospice *per diem*. Services included in the *per diem* that are not considered core services are noncovered for *HIP State Plan* members. The following core services are included in the Medicaid hospice *per diem*:

- Nursing care provided by or under the supervision of a registered nurse (RN)
- Medical social work services provided by a social worker with at least a bachelor's degree, working under the supervision of a physician

- Physician services provided by the medical director or physician as part of the interdisciplinary team including:
 - General supervising services
 - Establishing, supervising, and periodic review of the POC
 - Establishing governing policies
 - Providing direct care to members
- Counseling services provided to the member, member's family, and other people caring for the member
- Short-term inpatient care provided in a hospice inpatient unit, participating hospital, or nursing home setting
- Medical equipment and supplies, including palliative drugs, related to the palliation or management of the member's terminal illness
- Home health aide services furnished by certified home health aides
- Homemaker services that assist in providing a safe and healthy environment
- Physical therapy, occupational therapy, and speech-language pathology services provided for the purpose of symptom control
- Inpatient hospice care, such as inpatient hospice respite or general inpatient care
- Room and board for Medicaid-eligible members residing in long-term care (LTC) facilities
- Any other item or service specified in the member's POC, if the item or service is a covered service under the Medicaid program and is required to treat the terminal illness or related conditions



Home health benefits for HIP members

HIP Plus and *HIP Basic* offer home health benefits for services prescribed by a physician as medically necessary in lieu of inpatient hospital care or convalescent nursing home care; the services must be provided under a physician's care. *HIP State Plan – Plus* and *HIP State Plan – Basic* offer home health benefits that mirror those of members in Traditional Medicaid. Coverage details are outlined in the following sections.

HIP Plus and HIP Basic

HIP Plus and *HIP Basic* benefits provide coverage for home health services only if the services are not considered custodial care and are prescribed in writing by a participating physician as medically necessary, in place of inpatient hospital care or convalescent nursing home. The services must be provided under a physician's care. The benefit is limited to **100 visits per year**.

Covered services include the following:

- Skilled medical services
- Nursing care given or supervised by an RN
- Nutritional counseling furnished or supervised by a registered dietician (RD)
- Home hospice services
- Home health aides
- Laboratory services, drugs, and medicines prescribed by a physician in connection with home health care
- Medical social services



Please note that home hospice services are considered a separate home health service with respect to billing and benefit limits.

MCEs may require PA for home health services. PA requirements may include justification of services rendered based on the medical needs of the member and a planned course of treatment related to the number of services to be provided and the duration of treatment. Providers should contact the MCE with which the member is enrolled for specific PA requirements.

HIP State Plan – Plus and HIP State Plan – Basic

HIP State Plan – Plus and *HIP State Plan – Basic* home health coverage mirrors that of Traditional Medicaid. Covered services include:

- Skilled nursing services provided by an RN or a licensed practical nurse (LPN)
- Home health aide services
- Physical, occupational, and speech therapy services
- Respiratory therapy services
- Renal dialysis

Noncovered services include:

- Transportation to and from grocery stores, drug stores, banks, and so forth
- Homemaker services, including shopping, laundry, cleaning, meal preparation, and so forth
- Companion or sitter services, including escorting member to appointments and on other trips, activity planning, and so forth
- Chores, including picking up prescriptions, household supplies and/or groceries, and so forth
- Respite care

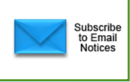
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