



APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision #	051
Chapter / Section	Long-term Care, Hospice, Hospice special circumstances
Issued Date	02/01/2018
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Summary of Revision

<https://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/hospice-special-circumstances>

No change in policy regarding hospice, but clarifying the language in the AH manual. Update to program codes.

Apple Health (Medicaid) Manual revision via track changes:

Hospice special circumstances

Revised ~~June 16, 2011~~

Purpose: Some cases require processing alternatives or fall outside of these instructions. ~~Listed below are a few circumstances to be aware of:~~

~~• In cases which involve an SSI/S01 client with earnings who maintains CNP eligibility under 1619B criteria, do not change to the L22 program. Retain the S01 program.~~

• If a single client elects hospice ~~In cases which involve a sand ingle client~~ receives non-institutional Medicaid in an Alternative Living Facility (ALF), maintain eligibility under the G03/G95 series as these clients are paying their income toward the cost of care on this program. The hospice service can be added to the case. (see WAC 182-513-1305, Non Institutional Medical in an Alternate Living Facility).

~~• When both Hospice and COPES, or another HCB Waiver Program have been approved in the same month, and no award letter has gone out showing participation for either program, always assign the participation to the HCB Waiver program first as it is the priority program.~~

~~• **Example:** Hospice election on 4/3, COPES service approval on 4/10, financial worker processing application on 4/15. Indicate COPES as the service under HCB on INST screen and assign any participation to the COPES provider.~~

~~• If Hospice/L22 has been opened with an award letter issued showing participation assigned to a Hospice provider and COPES, or another Waiver Program is opened in the same month but at a later date, participation will start with the COPES/Waiver program on the first of the following month. Indicate the change from Hospice to Waiver Program on the INST screen under the HCB field.~~

~~• Active MN Medicaid client entering a nursing facility.~~

• Active MN Medicaid clients who have met spenddown and are placed in a nursing home would be allowed the following deductions to determine the amount of the client's participation in the cost of care:

○ Allow the MNIL if the client is at home the first day of the month he or she is admitted to the facility, or the appropriate personal needs allowance (PNA) based on the client's living arrangements if not at home on the first day of the month. Client's monthly spenddown liability that has been met for each month through the certification period

○ Note: The spenddown liability deduction is coded on the institutional INST screen in ACES with notation in remarks. The determination of the MNIL/PNA is based on the information coded on the INST screen and DEM1 screen in ACES.

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- The \$20.00 disregard used as a deduction for MN non-institutional spenddown is counted towards the client's monthly nursing home participation in the post eligibility process.

Example: Single client on Medicaid MN program with base period 1/~~201706~~-3/~~062017~~. Spenddown was met in February and case was certified effective 2/1/~~201706~~. Client has monthly income of \$825 per month. He enters the nursing home from home on 3/5/~~201706~~.

His MN spenddown was computed as follows:

- \$825.00 monthly income
- -\$20.00
- ~~-735603.00~~ MNIL
- \$~~70202.00~~ per month available for spenddown use as a deduction

Nursing Home Participation for 3/~~201706~~ is computed as follows:

- \$825.00 monthly income
- ~~-735603.00~~ MNIL (at home 3/1/~~2017006~~)
- ~~-\$70202.00~~ spenddown liability
- \$20.00 participation to the nursing facility.

The spenddown base period ended in March. This deduction can only be used through the last month of the original MN base period.:-

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