



Department of Medical Assistance Services
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Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID PROVIDER MANUAL UPDATE

TO: All Hospice providers participating in the Virginia Medical Assistance Program, Managed Care Organizations, and holders of the Hospice Provider Manual

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services (DMAS)

MEMO: Update

DATE: July 6, 2009

SUBJECT: Removal of 21 Hours Requirement Under the EDCD Waiver for Personal Care Services & Changes to the Payment Rates for Hospice Services – Effective July 1, 2009

The purpose of this memorandum is to notify you of changes to the Hospice program for certain Elderly and Disabled with Consumer Directed Services (EDCD) Medicaid waiver recipients and the requirement that the Hospice provide the first 21 hours of personal care services to EDCD waiver recipients. The memo also informs you of changes in the payment rates for hospice services, effective for dates of service on or after October 1, 2008, through September 30, 2009.

Removal of the 21 Hour Requirement Under the EDCD Waiver

Pursuant to the 2009 Appropriations Act, the Department of Medical Assistance Services (DMAS) will eliminate the requirement for Hospice providers to give the first 21 hours of personal care services to EDCD waiver recipients only, effective 07/01/09. The EDCD waiver providers will now be able to provide all personal care hours in coordination with Hospice providers. Hospice Manual updates have been completed and are available on the DMAS Website.

This change does not affect Hospice services provided to those recipients who are not simultaneously receiving EDCD and Hospice services. Hospice providers are required by federal Regulations to provide standard and customary personal care services as part of the Hospice benefit.

Hospice Payment

With regard to amended payment rates for Hospice services, included in the **American Recovery and Reinvestment Act (ARRA)** was a change to the wage index used for Medicare and Medicaid hospice rates for fiscal year (FY) 2009. Therefore, we are posting a revised copy of the FY 2009 Wage Index which includes a full (unreduced) budget neutrality adjustment factor (BNAF).

In accordance with the Act, the following Hospice rates are effective retroactive to October 1, 2008, through September 30, 2009:

Revenue Code	651	652	652	655	653
Rate Component	Routine Home Care - Daily Rate	Continuous Home Care - Daily Rate	Continuous Home Care - Hourly Rate	Inpatient Respite Care - Daily Rate	General Inpatient Care - Daily Rate
Base Rate	\$140.15	\$817.26	\$34.06	\$152.41	\$622.66
Wage Component of Base Rate	\$96.30	\$561.54	\$23.40	\$82.50	\$398.56
Non-Wage Component of Base Rate	\$43.85	\$255.72	\$10.66	\$69.91	\$224.10

Revenue Code				651	652	652	655	653
Reg. Code	CBSA Code	Area	Wage Index	Routine Home Care - Daily Rate	Continuous Home Care - Daily Rate	Continuous Home Care - Hourly Rate*	Inpatient Respite Care - Daily Rate	General Inpatient Care - Daily Rate
0001	28700	Bristol	0.8165	\$122.48	\$714.22	\$29.77	\$137.27	\$549.52
0002	40220	Roanoke	0.9267	\$133.09	\$776.10	\$32.34	\$146.36	\$593.45
0003	31340	Lynchburg	0.9311	\$133.51	\$778.57	\$32.45	\$146.73	\$595.20
0004	47894	Northern VA	1.1574	\$155.31	\$905.65	\$37.74	\$165.40	\$685.39
0005	19260	Danville	0.8786	\$128.46	\$749.09	\$31.22	\$142.39	\$574.27
0006	16820	Charlottesville	0.9892	\$139.11	\$811.20	\$33.81	\$151.52	\$618.36
0007	40060	Richmond	1.0049	\$140.62	\$820.01	\$34.17	\$152.81	\$624.61
0008	47260	VA Beach	0.9402	\$134.39	\$783.68	\$32.66	\$147.48	\$598.83
0009	00049	Rural	0.8419	\$124.92	\$728.48	\$30.36	\$139.37	\$559.65
0010	13980	Blacksburg	0.8735	\$127.97	\$746.23	\$31.10	\$141.97	\$572.24
0011	25500	Harrisonburg	0.9454	\$134.89	\$786.60	\$32.78	\$147.91	\$600.90
0012	49020	Winchester	1.0570	\$145.64	\$849.27	\$35.39	\$157.11	\$645.38

DMAS will reprocess all paid Hospice claims, with dates of service on or after October 1, 2008, in accordance with the new reimbursement guidelines.

Please review these changes carefully.

REQUESTS FOR DUPLICATE REMITTANCE ADVICES

In an effort to reduce operating expenditures, requests for duplicate provider remittance advices will no longer be printed and mailed free of charge. Duplicate remittance advices will be processed and sent via secure email. A processing fee for generating duplicate paper remittance advices will be applied to paper requests, effective July 1, 2009.

ELIGIBILITY VENDORS

DMAS has contracts with the following eligibility verification vendors offering internet real-time, batch and/or integrated platforms. Eligibility details such as eligibility status, third party liability, and service limits for many service types and procedures are available. For more information on the services that are offered contact the vendors:

Passport Health Communications, Inc.
www.passporthealth.com
sales@passporthealth.com
Telephone #: (888) 661-5657

SIEMENS Medical Solutions – Health Services
Foundation Enterprise Systems/HDX
www.hdx.com
Telephone #: (610) 219-2322

Emdeon
www.emdeon.com
Telephone #: (877) 363-3666

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option (ARS) to access information regarding Medicaid or FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov. Refer to the “DMAS Content Menu” column on the left-hand side of the DMAS web page for the “Provider Services” link, which takes you to the “Manuals, Memos and Communications” link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates that are requested.

“HELPLINE”

The “HELPLINE” is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The “HELPLINE” numbers are:

1-804-786-6273 Richmond area and out-of-state long distance
1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the “HELPLINE” is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

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PROVIDER E-NEWSLETTER SIGN-UP

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at www.dmas.virginia.gov/pr-enewsletter.asp.

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

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HOSPICE PROVIDER MANUAL

REVISION CHART

July 6, 2009

SUMMARY OF REVISIONS

MANUAL SECTION	MATERIAL REVISED	NEW PAGE NUMBER(S)	REVISED PAGE(S)	REVISION DATE
Chapter IV	Chapter IV		Entire Chapter	7/6/2009
Chapter VI	Chapter VI		Entire Chapter	7/6/2009

FILING INSTRUCTIONS

MANUAL SECTION	DISCARD	INSERT	OTHER INSTRUCTIONS
Chapter IV	Old Chapter IV	New Chapter IV	
Chapter VI	Old Chapter VI	New Chapter VI	