



SENIOR & LONG TERM CARE DIVISION COMMUNITY SERVICES BUREAU

COMMUNITY FIRST CHOICE Policy Manual

Section: SERVICE REQUIREMENTS

**Subject: Home Health and Hospice Benefit
and Third Party Programs**

PURPOSE

This policy outlines the role of the Community First Choice/Personal Assistance Services (CFC/PAS) program when a member is receiving Hospice or Home Health services or other services through a third party. Since Medicaid is the payer of last resort (except for tribal health services) the Medicare Hospice and Home Health benefit and third party payer programs should be provided prior to the assessment and authorization of need for the Medicaid CFC/PAS program.

PROCEDURE

1. At times a member may be receiving home health aide services or hospice attendant services under the Medicare or Medicaid benefit and/or personal assistance services through a third party payer and still require Medicaid CFC/PAS to fulfill their needs. Under these programs, aides and attendants are limited in their abilities to provide support. These programs may be combined with the CFC/PAS program to serve the member. This is an acceptable situation so long as the following occurs:
 - a. The Medicare/Medicaid certified Home Health or Hospice agency or the third party payer agency provides an aide or assistant based upon that specific program's assessment and program parameters and the service is assessed prior to the evaluation of CFC/PAS. Medicare and third party programs must pay for services first.
 - b. The Medicaid CFC/PAS program does not duplicate the service, but rather provides supplemental services to the member. As the payer of last resort, Medicaid would not cover those services provided or available under other benefits.
2. Provider agencies should work closely with the Home Health, Hospice or third party payer agency when this situation arises.
3. This policy applies to new admissions to the CFC/PAS program. When a member is already receiving CFC/PAS services and becomes eligible for additional benefits, it is permissible to continue to provide CFC/PAS to maintain continuity of care. In this circumstance the requirements outlined in 1.b. above apply.