

## DEPARTMENT OF SOCIAL SERVICES

### NOTICE OF PROPOSED MEDICAID STATE PLAN AMENDMENT

#### HOSPICE SERVICES FOR CLIENTS IN NURSING FACILITIES (SPA # 13-015)

The State of Connecticut Department of Social Services (the “Department”) proposes to submit an amendment to the Medicaid State Plan to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services. The proposed Medicaid State Plan Amendment (SPA) will reduce rates paid for hospice services provided to clients living in nursing facilities.

#### Changes to Medicaid State Plan

In accordance with Connecticut Public Act 12-1, December Special Session, Section 9, effective March 1, 2013, the Department will reduce the payment for hospice services provided to clients living in nursing facilities to 95% of the nursing facility’s per diem rate. The reason for this change is to account for overlap between the services provided by the nursing facility and the hospice agency.

#### Fiscal Information – Estimated Annual Change to Medicaid Expenditures

The Department estimates that this change will result in aggregate savings of \$333,000 for State Fiscal Year 2013. Savings have not yet been determined for State Fiscal Year 2014.

#### Additional Information

In accordance with federal requirements governing the Medicaid program, upon request, the Department will provide copies of the proposed amendment to the Medicaid State Plan. In addition, copies of the proposed amendment may be obtained at each of the Department’s regional offices and on the Department’s web site: <http://www.ct.gov/dss>. Go to “Publications” and then to “Updates”.

Written, phone, and e-mail requests should be directed to: Ginny Mahoney, Department of Social Services, Medical Policy Unit, 25 Sigourney Street, 11th Floor, Hartford, CT 06106-5033, Telephone: (860) 424-5145, Fax: (860) 424-5799, Email: [ginny.mahoney@ct.gov](mailto:ginny.mahoney@ct.gov). Please reference the appropriate SPA heading listed above (*e.g.*, SPA 13-015, Hospice Services for Clients in Nursing Facilities).

Members of the public may also submit written comments on the SPA, by mail, fax, or email. Written comments must be received by the Department at the above contact information no later than March 12, 2013.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Connecticut

---

---

- (17) Nurse-mid wife services - are paid off of the physician fee schedule at 90% of physician fees. The agency's physician fee schedule was set as of July 1, 2011 and is effective for services provided on or after that date, except that fees may be deleted or added and priced in order to remain compliant with HIPAA. The physician fee schedule can be accessed and downloaded by going to the Connecticut Medical Assistance Program website: [www.ctdssmap.com](http://www.ctdssmap.com). From this web page go to "Provider Services" then to "Fee Schedule Download". All governmental and private providers are reimbursed according to the same fee schedule.
- (18) Hospice services – fees will equal Medicare fees for the same services in accordance with §1902(a)(13)(B) of the Social Security Act. The rate setting methodology is in compliance with State Medicaid Manual 4306. Total payments to a hospice are limited by the cap amount specified in 42CFR 418.309. Payment to the hospice for inpatient care is limited in accordance with 42CFR 418.302(f). For clients living in a nursing facility, the per diem nursing facility rate will equal 95% of the rate for that nursing home under the Medicaid program.

TN # 13-015  
Supersedes  
TN # 11-018

Approval Date \_\_\_\_\_

Effective Date 03-01-2013