Sec. 17b-262-836. Election of hospice

- (a) A client who meets the eligibility requirement of 42 CFR 418.20 may file an election statement with a particular hospice. If the individual is physically or mentally incapacitated, his or her legal representative may file the election statement. The election statement must indicate;
- (1) that the individual is electing a hospice benefit and identify which hospice he has chosen;
 - (2) the effective date of the election;
- (3) that the individual understands that hospice services are palliative rather than curative and waives all rights to Medicaid payment for services to cure the terminal illness and related condition. Medicaid shall continue to pay for covered benefits that are not related to the terminal illness; and
- (4) that the individual is eligible to receive hospice services only through the provider he has designated.
 - (b) The election statement shall include the following information:
 - (1) name of client;
 - (2) address and telephone number of client;
 - (3) client's Medicaid number and Medicare number, if applicable;
 - (4) primary terminal diagnosis;
 - (5) client's date of birth;
 - (6) name of parent, guardian or legal representative, if applicable;
 - (7) sex of client;
 - (8) name, telephone number and Medicaid number of provider;
 - (9) name and Medicaid number of attending physician;
 - (10) date of physician's certification of terminal illness;
 - (11) date the diagnosis is terminal; and
 - (12) name and Medicaid number of the nursing facility or ICF/MR, if applicable.
- (c) A client may revoke election of hospice services at any time during the election period by signing and dating a statement to this effect. The revocation shall be in writing and shall not be retroactive. When a client revokes the hospice benefit, he resumes coverage for any services waived when he elected hospice. The client may re-elect hospice at any time for the next 60 or 90 day election period.
- (d) A client may change hospice agencies once during any election period by signing and dating a statement to this effect.
- (e) A client who is eligible for Medicare in addition to Medicaid shall elect the hospice benefit in both the Medicare and Medicaid programs simultaneously.

(Adopted effective July 7, 2009)