

Iowa Department of Human Services

For Human Services use only:

General Letter No. 8-AP-81
Employees' Manual, Title 8
Medicaid Appendix

September 7, 1998

HOSPICE SERVICES MANUAL TRANSMITTAL NO. 98-1

ISSUED BY: Division of Medical Services, Iowa Department of Human Services

SUBJECT: *Hospice Services Manual*, Table of Contents (pages 4 and 5), revised; Chapter F, *Billing and Payment*, pages 1 through 29, revised; and pages 30 through 50, new.

Chapter F is revised to update billing and payment instructions.

Date Effective

Upon receipt.

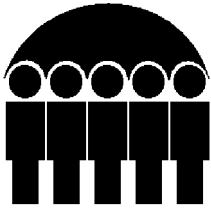
Material Superseded

Remove the following pages from the *Hospice Services Manual* and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pages 4 and 5)	April 1, 1991
Chapter F	
1	January 1, 1990
2	1/90
3, 4	July 1, 1991
5, 6	January 1, 1990
7	1/90
8, 9	January 1, 1990
10	Undated
11-23	January 1, 1990
24	Undated
25-27	05/30/84
28, 29	January 1, 1990

Additional Information

If any portion of this manual is not clear, please direct your inquiries to Consultec, fiscal agent for the Department of Human Services.



Iowa Department of Human Services

For Human Services use only:
General Letter No. 8-AP-101
Employees' Manual, Title 8
Medicaid Appendix

February 5, 1999

HOSPICE SERVICES MANUAL TRANSMITTAL NO. 99-1

ISSUED BY: Division of Medical Services, Iowa Department of Human Services

SUBJECT: *Hospice Services Manual*, Table of Contents (page 4), revised; Chapter E, *Coverage and Limitations*, pages 1 through 3, 4, 5 through 9, 14 through 16, revised; and Chapter F, *Billing and Payment*, page 16, revised.

Chapters E and F are revised to reflect changes as a result of the Balanced Budget Act of 1997. These revisions:

- ◆ Update the definition of terminal illness.
- ◆ Move physician services from core services to supplemental services.
- ◆ Add the Medicare waiver provision for therapy providers.
- ◆ Remove the section regarding Medicare coinsurance.
- ◆ Update the billing form to the UB-92 (HCFA-1450).
- ◆ Define the new election period for hospice benefits.
- ◆ Add the requirement for claims to identify the geographic location at which the service is provided for routine and continuous home care.

Date Effective

December 1, 1998

Material Superseded

Remove the following pages from the *Hospice Services Manual* and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 4)	September 1, 1998
Chapter E	
1, 2	January 1, 1990
3, 4, 4a	April 1, 1991
5-9	January 1, 1990
14	April 1, 1991
15	January 1, 1990
16	April 1, 1991
Chapter F	
16	September 1, 1998

Additional Information

If any portion of this manual is not clear, please direct your inquiries to Consultec, fiscal agent for the Department of Human Services.



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

For Human Services use only:

General Letter No. 8-AP-395

Employees' Manual, Title 8
Medicaid Appendix

July 3, 2014

HOSPICE MANUAL TRANSMITTAL NO. 14-1

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: **HOSPICE MANUAL**, Title page, revised; Table of Contents (page 1), new; Chapter III, *Provider-Specific Policies*, Title page, new; Table of Contents (pages 1 and 2), new; pages 1 through 25, new; and the following forms:

470-2618 *Election of Medicaid Hospice Benefit*, unchanged
470-0042 *Case Activity Report*, new
470-2619 *Revocation of Medicaid Hospice Benefit*, revised

Summary

The **HOSPICE MANUAL** is revised to:

- ◆ Reformat and revise the chapters on coverage and limitations and billing and payment to reflect the implementation of the Iowa Medicaid Enterprise and the reorganization of the Medicaid "All Providers" manual chapters. This includes:
 - Removing Chapter E. Information on coverage and limitations is now included in Chapter III. *Provider-Specific Policies*.
 - Removing Chapter F. Billing and payment information and forms are now included in Chapter IV. *Billing Iowa Medicaid*.
- ◆ Align with current policies, procedures, and terminology.
- ◆ Ensure that current contact information is provided.
- ◆ Within the manual, the form samples have been removed from the numbered pages and connected to the on-line manual through hypertext links. This will make sure that the most recent version of the form is accessible.

Date Effective

Upon receipt.

Material Superseded

This material replaces the entire Chapter E and Chapter F from the **HOSPICE SERVICES MANUAL**, which includes the following:

<u>Page</u>	<u>Date</u>
Title Page	Undated
Contents (page 4)	December 1, 1998
Contents (page 5)	September 1, 1998
Chapter E	
1-9	December 1, 1998
10	January 1, 1990
11	April 1, 1991
11a, 12	August 1, 1990
13	April 1, 1990
14-16	December 1, 1998
Chapter F	
1, 2	September 1, 1998
3 (470-2618)	1/90
5, 6	September 1, 1998
7 (470-2619)	1/90
9-15	September 1, 1998
16	December 1, 1998
17-42	September 1, 1998
43, 44 (UB-92, HCFA-1450)	Undated
45, 46	September 1, 1998
47 (Remittance Advice)	6/12/97
49, 50	September 1, 1998

Additional Information

The updated provider manual containing the revised pages can be found at:
<http://dhs.iowa.gov/sites/default/files/hospice.pdf>

If any portion of this manual is not clear, please contact the Iowa Medicaid Enterprise Provider Services Unit at 800-338-7909 or locally (in Des Moines) at 515-256-4609, or email at imeproviderservices@dhs.state.ia.us.



Iowa Department of Human Services

Terry E. Branstad
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For Human Services use only:

General Letter No. 8-AP-414

Employees' Manual, Title 8
Medicaid Appendix

May 1, 2015

HOSPICE MANUAL TRANSMITTAL NO. 15-1

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: **HOSPICE MANUAL**, Chapter III, *Provider-Specific Policies*, Contents (pages 1 and 2), revised; pages 3, 4, 5, and 8 through 25, revised; and page 26, new.

Summary

The **HOSPICE MANUAL** is revised to:

- ◆ Align with current policies, procedures, and terminology.
- ◆ Update links due to the Department's new website.

Date Effective

Immediately.

Material Superseded

This material replaces the following pages from the **HOSPICE MANUAL**, which includes the following:

<u>Page</u>	<u>Date</u>
Chapter III	
Contents (pages 1 and 2)	July 1, 2014
3-5, 8-25	July 1, 2014

Additional Information

The updated provider manual containing the revised pages can be found at:

<http://dhs.iowa.gov/sites/default/files/Hospice.pdf>

If any portion of this manual is not clear, please contact the Iowa Medicaid Enterprise Provider Services Unit at 800-338-7909 or locally (in Des Moines) at 515-256-4609, or email at imeproviderservices@dhs.state.ia.us.



Iowa Department of Human Services

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For Human Services use only:

General Letter No. 8-AP-430

Employees' Manual, Title 8
Medicaid Appendix

November 13, 2015

HOSPICE MANUAL TRANSMITTAL NO. 15-2

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: **HOSPICE MANUAL**, Chapter III, *Provider-Specific Policies*, pages 8, 9, and 10, revised; and page 8a, new.

Summary

The **HOSPICE MANUAL** is revised to align with current ICD-10 policies, procedures, and terminology.

Effective Date

October 1, 2015

Material Superseded

This material replaces the following pages from the **HOSPICE MANUAL**:

<u>Page</u>	<u>Date</u>
Chapter III 8-10	May 1, 2015

Additional Information

The updated provider manual containing the revised pages can be found at:

<http://dhs.iowa.gov/sites/default/files/Hospice.pdf>

If any portion of this manual is not clear, please contact the Iowa Medicaid Enterprise Provider Services Unit at 800-338-7909 or locally (in Des Moines) at 515-256-4609, or email at imeproviderservices@dhs.state.ia.us.



Iowa Department of Human Services

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For Human Services use only:

General Letter No. 8-AP-440
Employees' Manual, Title 8
Medicaid Appendix

May 6, 2016

HOSPICE MANUAL TRANSMITTAL NO. 16-1

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: **HOSPICE MANUAL**, Chapter III, *Provider-Specific Policies*, Contents (pages 1 and 2); revised; and pages 1 through 26, revised; and pages 27 and 28, new.

Summary

The **HOSPICE MANUAL** is revised to align with current IA Health Link policies, procedures, and terminology.

Effective Date

January 1, 2016

Material Superseded

This material replaces the following pages from the **HOSPICE MANUAL**:

<u>Page</u>	<u>Date</u>
Chapter III	
Contents (pages 1 and 2)	May 1, 2015
1, 2	July 1, 2014
3-5	May 1, 2015
6, 7	July 1, 2014
8, 8a, 9, 10	October 1, 2015
11-26	May 1, 2015

Additional Information

The updated provider manual containing the revised pages can be found at:

<http://dhs.iowa.gov/sites/default/files/Hospice.pdf>

If any portion of this manual is not clear, please contact the Iowa Medicaid Enterprise Provider Services Unit at 800-338-7909 or locally (in Des Moines) at 515-256-4609, or email at imeproviderservices@dhs.state.ia.us.

For Human Services use only:

General Letter No. 8-AP-492
Employees' Manual, Title 8
Medicaid Appendix

October 2, 2020

Hospice MANUAL TRANSMITTAL NO. 20-1

ISSUED BY: Iowa Medicaid Enterprise

SUBJECT: **Hospice**, Chapter III, **Provider-Specific Policies**, Title pages 1 and 2, Contents Overview page 1, Contents pages 1 and 2, and pages 1-28, revised; page 29, new.

Summary

The Hospice manual is revised to:

- ◆ Revise language.
- ◆ Revise policy and procedure relating to updates to Medicare.
- ◆ Update ICD-9 references to reflect ICD-10.
- ◆ Small changes to make formatting consistent throughout.

Date Effective

Upon receipt.

Material Superseded

This material replaces the following pages from the **Hospice** manual:

<u>Page</u>	<u>Date</u>
Chapter III	
Title Page	
Contents Overview	July 1, 2014
Contents Page 1 and 2	January 1, 2016
1-28	January 1, 2016

Additional Information

The updated provider manual containing the revised pages can be found at:
<http://dhs.iowa.gov/sites/default/files/Hospice.pdf>

If any portion of this manual is not clear, please contact the Iowa Medicaid Enterprise Provider Services Unit at 800-338-7909 or locally (in Des Moines) at 515-256-4609, or email at imeproviderservices@dhs.state.ia.us.