

## Hospice care

Hospice programs provide medical, psychological, social and spiritual services to terminally ill patients and their families. Hospice care emphasizes pain control and emotional support and typically doesn't include extraordinary measures to prolong life.

## **Original Medicare**

Hospice care is a benefit under the hospital insurance program. Medicare beneficiaries entitled to hospital insurance under Part A, who have terminal illnesses and a life expectancy of six months or less, have the option of electing hospice benefits in lieu of standard Medicare coverage for treatment and management of their terminal condition.

An individual is considered to be terminally ill if the medical prognosis is that the individual's life expectancy is six months or less if the illness runs its normal course. An individual (or their authorized representative) must file an election statement with a particular hospice to receive care. Only care provided by a Medicare certified hospice is covered under the hospice benefit provision.

Medicare covers two levels of inpatient care: respite for the patient's caregivers, and general inpatient care which is for pain control and symptom management. Inpatient respite care may be furnished to provide a reprieve for the individual's family or other persons caring for the individual at home. Payment for hospice respite care may not be provided for more than five consecutive days at a time.

## BCN Advantage enhanced benefit

BCN Advantage is a Medicare Advantage plan that provides at least the same level of benefit coverage as Original Medicare (Part A and Part B) and may provide enhanced benefits beyond the scope of Original Medicare within a single health care plan. This flexibility allows Blue Care Network to offer enriched plans by using Original Medicare as the base program and adding desired benefit options.

Coverage for the member's coinsurance is offered as an enhanced hospice care benefit for members of BCN Advantage individual and select BCN Advantage group plans that include this benefit. Reimbursement is provided to the member since Medicare provides payment for hospice claims to fee-for-service contractors.

Federal regulations require that Medicare fee-for-service contractors (Medicare Administrative Contractors, Carriers, Fiscal Intermediaries, Regional Home Health Intermediaries, DMERC, etc.) maintain payment responsibility for individual BCN Advantage members who elect hospice care.

No payment is made to Blue Care Network on behalf of a BCN Advantage member who has elected hospice care.

Payment guidelines for providers are stated in the CMS Medicare Managed Care Manual, Chapter 8 § 70.3.1 - CMS' Payments to Hospice Programs.

# Blue Care Network of Michigan

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 Medicare hospices should bill the Regional Home Health Intermediaries for individual members who have coverage through managed care just as they do for beneficiaries with fee-for-service coverage. Original Medicare, rather than BCN Advantage, will also process claims for services provided by physicians, providers and suppliers for other Medicare covered services furnished to BCN Advantage members who have elected hospice. "Other services" refer to non-hospice Part A and B services that aren't related to the terminal illness.

### Member cost share

For hospice services that are covered under Original Medicare, the member has the following coinsurance responsibilities.

#### Drugs and biologicals and respite care

- The member is liable to pay 5% of the Medicare-approved amount for inpatient respite care.
- The member is liable to pay a copayment of up to \$5 per prescription for outpatient prescription drugs for pain and symptom management.
- Note: Once Medicare pays for the hospice respite care and prescription drugs related to hospice care, receipts should be submitted for the member cost share to our plan for reimbursement. BCN Advantage will cover the 5% coinsurance for hospice respite care and the coinsurance/copayment for prescription drugs related to hospice care.
- Drugs unrelated to the member's terminal condition may be covered by your prescription drug coverage. Please refer the member to their Evidence of Coverage for more information. The hospice care benefit doesn't cover the coinsurance/copayments for these drugs, and Blue Care Network will not reimburse the member for the copay/coinsurance.
- For members of the University of Michigan BCN Advantage Group, **respite care** is covered at 100% with no deducible and no coinsurance.

To verify benefits and cost sharing, providers may utilize our provider portal or call 1-800-344-8525.

#### Member reimbursement

The member or his or her authorized representative must submit the request for reimbursement of the coinsurance responsibilities along with the following information to the address below:

- Member name
- Member BCN Advantage contract and group number
- Member address
- Legible copy of the Medicare Summary Notice from Original Medicare and/or receipts that verify the 5% coinsurance amount.

Member Reimbursements – G804 Blue Care Network P.O. Box 68753 Grand Rapids, MI 49516-8753

#### **Revision history**

Policy number: BCNA Effective 01/01/2024 Reviewed: Revised: