



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

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**TO:** Hospice Services Agencies

**SUBJECT:** Hospice Services Claims Processing for General Assistance (GA) Beneficiaries

**EFFECTIVE:** Immediately

**BACKGROUND:** Claims for certain hospice services when provided to General Assistance (GA) beneficiaries will be processed by the Division of Medical Assistance and Health Service's fiscal agent, Unisys. GA beneficiaries' claims will be processed by Unisys only for services provided in the home setting and **NOT** for services provided in institutional settings, such as hospitals or nursing facilities.

**PURPOSE:** To specify which hospice services provided to a GA beneficiary are processed by Unisys.

**ACTION:** The hospice agency must follow all of the procedures required for any Medicaid fee-for-service or NJ KidCare - Plan A fee-for-service beneficiary to be eligible for hospice services, **EXCEPT** there is no requirement to prepare or submit the "Hospice Eligibility Form (FD-383)". Also, when submitting a HCFA 1500 claim for services to GA beneficiaries, claims will be processed and reimbursed only if hospice services are provided outside of a nursing facility or a hospital setting. **VALUE CODE 34** in **FIELD 24B (PLACE OF SERVICE)** on the HCFA 1500 claim form should be used when submitting claims for GA-reimbursable services provided outside of a nursing facility or a hospital setting.

**INSTRUCTIONS FOR CLAIMS SUBMISSION :**

The following HCPCS codes may be considered for payment when a hospice agency provides these hospice services to a General Assistance beneficiary.

- Y6333      Routine Home Care Rate
- Y6334      Continuous Home Care Rate
- Y6343      Drugs and Biologicals Co-Payment

The following HCPCS codes **will be denied** by Unisys when a hospice agency provides these hospice services to a General Assistance beneficiary:

- Y6335      Inpatient Respite Care Rate
- Y6336      General Inpatient Care Rate
- Y6337      Therapeutic Leave Days Rate
- Y6338      Bed Hold Days Rate
- Y6339      Hospice Respite Co-Payment
- Z2015      Room and Board Rate

If the GA beneficiary subsequently converts from GA eligibility to Medicaid fee-for-service or NJ KidCare - Plan A fee-for-service eligibility, all NJ KidCare - Plan A or Medicaid hospice program policies, rules and HCPCS procedure codes are applicable.

For further information or questions, please contact the Division of Medical Assistance and Health Services, Bureau of Home and Community Services, Judith Johnston, at (609) 588-2733.

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(BLUE TAB MARKED "5")**