Hopeful Waiver (Pediatric Hospice) Service Descriptions and Guide

All services available under the Pediatric Hospice Waiver are only those services not otherwise available under Medicaid EPSDT coverage, Medicaid State Plan benefits, third party liability coverage, or other state funded programs, services or supports.

Palliative/Supportive Care (Skilled RN/LPN)

T2042 — ***1 unit = 1Hour (up to 4 hours)***
S9126 — ***1 unit = 1 Day***

Palliative/Supportive Care means hospice-like care provided to manage, control, and alleviate symptoms such as pain, nausea, discomfort and anxiety related to a life-limiting diagnosis that may be provided at the same time as curative treatments within the state plan benefit.

Variation in child's condition will be the deciding factor in determining which procedure code and units will be utilized.

Respite Care

T1005* (Skilled)** — ***1 unit = 15 minutes (up to 4 hours)
S9125 (Skilled) — ***1 Unit = 1Day***
(limited to 30 days unique dates of service per 365 days)

S5150 (Unskilled) — ***1 unit = 15 minutes (up to 4 hours)***
S5151 (Unskilled) — ***1 Unit = 1Day***
(limited to 30 days unique dates of service per 365 days)

Respite Care means services provided to an eligible client who is unable to care for himself/herself on a short term basis because of the absence or the need for relief of those persons normally providing care. Respite Care is provided in the client's residence and may be provided by different levels of providers depending upon the needs of the client. Skilled versus unskilled care are dependent upon the needs of the client and the physician's order. Skilled Respite care must be provided by an RN or LPN.

Respite care may be provided for **up to a maximum of 30 days per year**. Respite care and State Benefit Plan nursing, home health aide or private duty nursing **shall NOT** be duplicated on the same date of service nor shall Palliative/Supportive care services be on the same date of service.

Counseling — ***1 unit = 1 Hour***
(limited to 98 hours total per 365 days across all H0004 codes)

Individual Counseling
H004

Family Counseling
H004HR

Group Counseling
H004HQ

Client/Family/Caregiver Counseling means grief/loss or anticipatory grief counseling and bereavement counseling that assist the client, family or caregiver to decrease emotional suffering due to the client's health status, to decrease feelings of isolation or to cope with the client's life-limiting diagnosis.

Please Note: Bereavement services are those counseling services that are provided following the participant's death. These services are included in the reimbursement rate for the 98 hours per year of counseling provided prior to the participant's death. Providers are required to continue to provide up to one year of bereavement counseling following the death of the waiver participant.

Expressive Therapy

G0176 ***1 unit = 1 Hour***

(limited to 39 hours total per 365 days)

Expressive Therapy means creative art, music or play therapy which provides children the ability to creatively and kinesthetically express their medical situation for the purpose of allowing the client to express feelings of isolation, to improve communication skills, to decrease emotional suffering due to health status, and to develop coping skills.