

Pediatric Palliative Care Coalition

Concurrent Care for Children: A Legislative Brief

The passage of the Affordable Care Act altered the Medicaid hospice benefit as it applies to children (age 0-20). This change holds potential for increased access to community-based supportive services for children with life-limiting illnesses.

The Concurrent Care Requirement is Section 2302 of the federal Patient Protection and Affordable Care Act. The provision is currently operational; it became effective immediately upon the signing of the law on March 23, 2010.

Section 2302 states that a voluntary election of hospice care for a child cannot constitute a waiver of the child's right to be provided with, or to have payment made for, services that are related to the treatment of the child's condition, for which a diagnosis of terminal illness has been made.

This provision affects children who are eligible for Medicaid or the Children's Health Insurance Program (CHIP). It does NOT change the hospice eligibility requirements as they apply to children. A physician must still certify that a child is within the last six months of life, if the disease runs its normal course.

Prior to this provision, curative/life-prolonging treatment usually ceased with the election of the hospice benefit. Through this provision, however, the Centers for Medicare and Medicaid Services (CMS) now expect states to continue to provide and pay for curative/life-prolonging services even after the election of the hospice benefit.

CMS has directed that, under Section 2302, states will continue to pay providers of curative services using the payment methodology approved for those services and to reimburse hospices for services within the hospice benefit. In other words, organizational billing procedures should not require any change or alteration. CMS expects each state to have a process to ensure collaboration with the provider community to take each child's care into account in determining whether a service is curative or palliative.

Hospice is a 1905(a) service, meaning it must be provided to individuals from birth through age 20 when medically necessary. It remains a mandated benefit under Early and Periodic Screening, Diagnosis and Treatment (EPSTD).

Additional information regarding Concurrent Care can be found at: http://www.nhpco.org/childrenspediatricschipps/pediatric-concurrent-care.

PPCC-PA is here to help if you have questions. Please contact Betsy Hawley, Executive Director, at 412.963.8243 or betsy@ppcc-pa.org.

