Attention Provider Types 64 (Hospice) and 65 (Hospice, Long Term Care):
Reminder Regarding Medical Necessity Criteria

The Division of Health Care Financing and Policy (DHCFP) would like to remind all Hospice provider types 64 (Hospice) and 65 (Hospice, Long Term Care) that all Medicaid recipients electing Hospice services, including those with primary insurance such as Medicare or a private insurance, must meet all Nevada Hospice program medical necessity criteria outlined in Medicaid Services Manual (MSM) Chapter 3200. Medicaid hospice benefits are intended for terminally ill recipients. The clinician’s Certification of Terminal Illness (CTI) must include specific clinical findings supporting a life expectancy of 6 months or less if the terminal illness were to run its normal course.