
Post Mortem Guidance

April 2, 2026

Purpose

This document is to help guide case managers (CMs) with actions that may need to be taken if an individual requesting services passes away before eligibility is determined.

Assessments

A post mortem assessment is when an individual requesting services passes away before an in-person assessment is completed. Post mortem assessments are usually completed to ensure an individual meets Service Priority Level (SPL) to allow payment to Medicaid providers for expenses such as past medical bills or facility costs.

CMs may complete the CA/PS assessment to determine service eligibility for Long-Term Services and Supports (LTSS) or Oregon Project Independence-Medicaid (OPI-M) if the following criteria were completed:

- Date of Request (DOR) established
- Financial eligibility met

CMs should use collateral contacts, care notes, and other medical documentation to complete the assessment. CMs must use their best judgement when writing comments and making selections.

Start dates

Per [OAR 461-180-0070 \(3\)\(a\)\(b\)](#), the service start date is whichever occurs first; the date the consumer requested services, if they were eligible as of that date; or the date all eligibility requirements were met.

CMs may also work with an individual's representative and the providers involved to determine the appropriate start date.

Note: In-home services cannot be backdated. APD will not retroactively pay for in-home services regardless of a previous service request date.

Additional actions

Intake module- if the DOR came in prior to the individual passing away, staff must still follow through with the Intake using the information provided to help determine an eligibility decision. If it is not assigned to a CM, ensure it becomes assigned to a CM so they can follow through and send the appropriate notice(s).

Follow the [Death Checklist for Case Management](#) after services have been authorized. Ensure a manual task in ONE is created to alert an eligibility worker of an individual's death, review the guide [Case Manager Tasks in ONE](#).

Scenario examples

Example one: Individual requests services due to running out of resources while living in an Assisted Living Facility and is terminally ill. Intake was completed on 1/28/26 and a DOR for services was established. They end up meeting financial eligibility on 2/10/26. Family calls office to report the individual passed away on 2/16/26. CM completed assessment on 2/19/26 and individual

met SPL 1-13. The CM determines the service start date should be back to the DOR of 1/28/26.

Example two: Individual's family member requests in-home services on 1/15/26 and an intake was completed the same day with the individual. Individual meets financial eligibility on 1/30/26 due their simple income and limited resources. They have a trusted neighbor in mind to be their caregiver who is a homecare worker with an active provider number. The family member calls into the office to report the individual passed away on 2/6/26 before the CM could complete the assessment. CM completes the assessment on 2/11/26 and determines the individual met SPL 1-13. A family member reports the neighbor started to provide care for the individual on 2/1/26 and would like them to get paid.

If the individual was privately paying for in-home services or decided to hire a caregiver without prior authorization, remember that APD will not retroactively pay for these services. HCWs or an In-Home Care Agency should not accept a job and start working for an individual without prior authorization.

The CM would approve the benefit back to the DOR to authorize the medical benefit only. This does not mean the HCW would have been authorized to work any hours retroactively, but this would allow for payment of unpaid medical expenses.

Resources

For questions contact policy: apd.medicaidpolicy@odhs.oregon.gov

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