

Dr. G's H.O.S.P.I.C.E. Pocket Guide: 7 Things Hospice Physicians Need to Know to be Ready for Work

* Medicare regulatory compliance is outside the scope of this publication. (Page 6 Disclaimer Addition)

Errata

1. Page 11-Chapter 1 What physicians H.O.S.P.I.C.E. do: HOME VISITS Types of Home Visits clarification and correction of after-Recertification F2F within 30 days before the 3rd benefit period and Q60 days 04/01/2023
2. Page 19- Chapter 5 What physicians H.O.S.P.I.C.E. do: IDT: addition of closing sentence. The hospice physician's role is to stay engaged with the discussion, review medications, educate on disease processes, provide new treatment plans for symptoms reported.
3. Page 21- Chapter 6 What physicians H.O.S.P.I.C.E. do: CTIs: addition of 2nd sentence for clarification "Your hospice agency's administration will provide regulatory deadlines and/or timeframes to submit your CTI."
4. Page 22- Chapter 6 What physicians H.O.S.P.I.C.E. do: CTIs Recertification clarification The recertification CTIs must also be completed timely, 15 days before the end of each benefit period. This provides time to discharge for extended prognosis, if the patient is no longer terminally ill (no decline in clinical status). Duration of benefit periods are as follows: 1st/90 days, 2nd/90 days, 60 days/3rd and higher (requires F2F visit, see Chapter 1 Home Visits). Adhere to regulatory requirements conveyed by your hospice agency administrator. Consider these questions: - Is the patient still declining? Documentation is the same as initial CTI with additional pertinent interventions from plan of care and detailed narrative of continued decline in clinical status. 04/01/2023
5. Page 27- Quick start-FAQ: What is a F2F? When does it have to occur?Face-to-face visit occurs **before** 3rd benefit period and

beyond. Can be performed by NP. Clinical visits can be performed by a PA. 04/21/2023