

# Hospice Recertification

April 2015

Home Health VNA  
Merrimack Valley Hospice  
HomeCare, Inc.



The Leaders in Home Health and Hospice Care

# Objectives

- ▶ The participant will be able to discuss Hospice recertification regulations and procedure

# 418.22

## Certification/Recertification

- ▶ Certification and recertification must be based on the physician's clinical judgment
- ▶ Supporting clinical documentation must be present in the medical record
- ▶ The physician must include a brief narrative explanation of the clinical findings that support a life expectancy of 6 months or less and the physician must attest that he/she composed the narrative

# 418.22

## Certification/Recertification

- ▶ 418.22 (a) Timing:
- ▶ If written certification cannot be obtained within 2 calendar days than an oral (verbal) certification must be obtained
- ▶ Written certification must be on file before submitting the claim
- ▶ Recertification may not be completed more than 15 days prior to start of next benefit period.

# 418.22 –

## Certification/Recertification

- ▶ For the initial benefit period, the certification of the terminal illness (oral and written) must be obtained from the medical director and the attending (if any)
- ▶ For subsequent periods – certification by only one of the physicians is required (this is usually the Medical Director)

# Hospice Recertification

- ▶ All Hospice patients will be evaluated by the Interdisciplinary Team (IDT) for continued Hospice appropriateness prior to the recertification date

# Hospice Recertification

- ▶ Staff are alerted to the upcoming recertification date via the electronic clinical record
- ▶ The RN case manager or designee makes a recert visit to the patient
- ▶ To assist with determining if the patient remains eligible for Hospice care, the Unipolicy (Local Coverage Determinations – LCDs) specific to the patient's diagnosis is completed.

# Hospice Recertification

- ▶ The primary nurse facilitates a thorough discussion of the patient's current status and eligibility for recertification for Hospice with input from members of IDT and Medical Director
- ▶ This discussion, including findings, is thoroughly documented in the clinical record



# Hospice Recertification– F2F

- ▶ For patients with Medicare coverage, who are entering the third or later certification period, a face to face visit by the Medical Director or Nurse Practitioner or Hospice Physician is required to determine continued eligibility for Hospice care
  - The visit must be done no more than 30 days prior to recertification
  - An attestation that the visit was done must be signed by the clinician making the visit
  - The clinical findings must be reported to the certifying physician

# Hospice Recertification

- ▶ If necessary, to determine eligibility for recertification, the Medical Director or NP may make and document a patient visit in any benefit period.
- ▶ Recertification is permitted only with documented, continued clinical decline

# Hospice Recertification

- ▶ If the patient is recertified, a new/revised Plan of Care is sent to the attending physician.
- ▶ The Hospice Aide Care Plan is revised as needed.

# Clinical Factors to Consider During Recertification Fact Sheet

- ▶ Review “Clinical Factors to Consider During Recertification” fact sheet