

Review of a Resident Receiving Hospice Services.

When a facility resident has also elected the Medicare hospice benefit, the hospice and the nursing home must communicate, establish, and agree upon a coordinated plan of care for both providers which reflects the hospice philosophy, and is based on an assessment of the individual's needs and unique living situation in the facility. The plan of care must include directives for managing pain and other uncomfortable symptoms and be revised and updated as necessary to reflect the individual's current status. This coordinated plan of care must identify the care and services which the SNF/NF and hospice will provide in order to be responsive to the unique needs of the patient/resident and his/her expressed desire for hospice care.

The SNF/NF and the hospice are responsible for performing each of their respective functions that have been agreed upon and included in the plan of care. The hospice retains overall professional management responsibility for directing the implementation of the plan of care related to the terminal illness and related conditions.

For a resident receiving hospice benefit care, evaluate if:

- *The facility completed a MDS Significant Change in Status Assessment (SCSA) when the resident elected the hospice benefit;*
- *The facility completed a MDS Significant Change in Status Assessment (SCSA) when the resident revoked the hospice benefit;*
- *The plan of care reflects the participation of the hospice, the facility, and the resident or representative to the extent possible;*
- *The plan of care includes directives for managing pain and other uncomfortable symptoms and is revised and updated as necessary to reflect the resident's current status;*
- *Medications and medical supplies are provided by the hospice as needed for the palliation and management of the terminal illness and related conditions;*
- *The hospice and the facility communicate with each other when any changes are indicated to the plan of care;*
- *The hospice and the facility are aware of the other's responsibilities in implementing the plan of care;*
- *The facility's services are consistent with the plan of care developed in coordination with the hospice, (the hospice patient residing in a SNF/NF should not experience any lack of SNF/NF services or personal care because of his/her status as a hospice patient); and*
- *The SNF/NF offers the same services to its residents who have elected the hospice benefit as it furnishes to its residents who have not elected the hospice benefit. The resident has the right to refuse services in conjunction with the provisions of 42 CFR 483.10(b)(4), F155.*

Note: *If a resident is receiving services from a Medicare certified hospice and the hospice was advised of concerns by the facility and failed to address and/or resolve issues related to coordination of care or implementation of appropriate services, refer the concerns as a complaint to the State Agency responsible for oversight of this hospice, identifying the specific resident(s) involved and the concerns identified.*