



**CHAPCA**

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President and CEO

Changes Since we last Talked.

Hospice Election Statement-Addendum and Relatedness

Federal-Hospice ACT

California Bills-Specific to Hospice

# Changes-Hospice Election Statement

**Effective October 1, 2020 (FY 2021)**

Hospice election statement will be amended to include:

Information about the **holistic, comprehensive** nature of the Medicare hospice benefit

A statement that, although it would be rare, there **could be some necessary items, drugs, or services that will not be covered by the hospice**

Because the hospice has determined that these items, drugs, or services are to treat a condition that is **unrelated to the terminal illness and related conditions**

Information about **beneficiary cost-sharing** for hospice service

# Addendum details

<b>Effective date</b>	<b>October 1, 2020 (FY2021)</b>
<b>Addendum requirement</b>	<b>Required to issue the addendum detailing non-covered items, services upon request</b>
<b>If requested at admission</b>	<b>Within 5 days after admission</b>
<b>If requested after the start of care</b>	<b>Within 72 hours</b>
<b>Acknowledgement</b>	<b>Signature required – but representative does not have to agree with hospice determination</b>

# Items to be covered on addendum

## **Required components**

Name of the hospice;

Beneficiary's name and hospice medical record identifier;

Identification of the beneficiary's terminal illness and related conditions;

A list of the beneficiary's current diagnoses/conditions present on hospice admission (or upon plan of care update, as applicable) and the associated items, services, and drugs, not covered by the hospice because they have been determined by the hospice to be unrelated to the terminal illness and related conditions;

# Items to be covered on addendum (cont.)

A written clinical explanation, in language the beneficiary and his or her representative can understand, as to why the identified conditions, items, services, and drugs are considered unrelated to the terminal illness and related conditions and not needed for pain or symptom management.

Accompanied by a general statement that the decision as to whether or not conditions, items, services, and drugs is related is made for each patient and

The beneficiary should share this clinical explanation with other health care providers from which they seek services unrelated to their terminal illness and related conditions;

References to any relevant clinical practice, policy, or coverage guidelines.

# Items to be covered on addendum (cont.)

Information on the following areas:

*Purpose of Addendum*

*Right to Immediate Advocacy*

Name and signature of Medicare hospice beneficiary (or representative)

Date signed

Statement that signing this addendum (or its updates) is only acknowledgement of receipt of the addendum (or its updates) and not necessarily the beneficiary's agreement with the hospice's determinations.

# Federal-Hospice ACT

In late December, Congress passed a \$2.3 trillion spending bill known as the Consolidated Appropriations Act.

This legislation, which was signed by President Trump on December 27, 2020 and adopted portions of a previous bill called the Beneficiary Enrollment Notification and Eligibility Simplification Act of 2019.

# Focus on hospices

## **Survey frequency:**

The legislation, as finally adopted and signed into law, retains the frequency of regular survey intervals at 36 months rather than 24 months as proposed by the House.

## **Special Focus Program for poor performing providers:**

The bill also requires the Department of HHS to establish a targeted program designed to better enforce requirements for hospices that fail to meet program requirements. These focused surveys will be conducted at least every six months for hospices in the Special Focus Program.

# Focus on hospices

## **Hospice Payments to federally qualified health centers (FQHCs) and rural health clinics (RHCs)**

The Act provides for FQHCs and RHCs to be able to receive hospice payments for attending physicians who are affiliated with the FQHC or RHC and extends to providers who are employed as well as those who contract with these entities for services.

# Focus on hospices

## **Reporting of survey data from accrediting organizations:**

Based on recommendations made by the Office of the Inspector General(OIG), data from accreditation organizations such as The Joint Commission (TJC), the Accreditation Commission for Health Care(ACHC) and Community Health Accreditation Program (CHAP) will be brought into alignment with measures reported by the State Agencies and included on Hospice Compare.

The bill directs CMS to create programs that will measure and eliminate inconsistencies among surveys.

Accrediting organizations' data must be posted beginning on October 1, 2022.

# Focus on hospices

## **Surveyor training and qualifications**

As a response to longstanding complaints about survey inconsistencies from state to state, the bill requires development of a comprehensive training program for surveyors along with minimum qualifications for members of the survey team. Training will be a prerequisite to participating in a survey. These provisions become effective on October 1, 2021.

# Focus on hospices

**Civil monetary penalties:** In addition to its other recommendations, the OIG asked that Congress instruct the Secretary of HHS to develop and implement a series of remedies, including civil monetary penalties, and appeal procedures by October 1, 2022.

**Quality reporting penalty:** Historically, the payment penalty for failure to meet the Hospice Quality Reporting Program (HQRP) requirements has been set at 2%; however, under the new legislation, the penalty will double to 4% as of October 1, 2023.

# Focus on hospices

## **Aggregate cap calculations**

Since 2017, the annual aggregate cap has been updated based on the hospice market basket. The calculation change would have expired at the end of fiscal year 2025; however, the Act extends the life of the calculation basis through September 2030.

# California-Spot Bills that would impact hospice

SB 664-Licensure (Allen)

AB 1280-Referrals (Irwin)

AB 1186 (Friedman)

SB 380 (Eggman)

SB 353 (Roth) CHAPCA sponsor to extend SB 294

# CHAPCA Resources for Seniors

[www.calhospice.org](http://www.calhospice.org)

916-925-3770 Monday-Friday  
8:30 am to 4:30 pm

# Thank You | Any Questions

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