


## Eli's Hospice Insider

### Compliance: Heed These 10 Tips To Ace Addendum Before It Decimates Your Claims

**Pointer: Don't lose election form updates in the addendum shuffle.**

A lot is on the line when the the election statement addendum requirement hits Oct. 1. Follow this expert advice to maximize your change of success under the new burden:

1. **Educate yourself.** With the stakes so high, make sure you completely understand the requirements and forms, including the sample election statement and addendum forms updated in late July and the guidance offered in the Aug. 4 Federal Register final rule. "Start ... with being familiar with the sample provided by CMS," offers consultant **Lynn Stange** with Weatherbee Resources in Headland, Alabama. Links to the forms and final rule are at [www.cms.gov/medicare/medicare-fee-service-payment/hospice/hospice-regulations-and-notices/cms-1733-f](http://www.cms.gov/medicare/medicare-fee-service-payment/hospice/hospice-regulations-and-notices/cms-1733-f).
2. **Take stock.** If you haven't done so yet, see where you are on your current policies and procedures surrounding the areas addressed by the new addendum - determining relatedness and communicating that information to patients. Examine your "internal policies and procedures and then go from there," Stange counsels.
3. **Update your election statement form.** Don't let the important changes to the election statement form get lost in your efforts to comply with the new addendum. "Hospices will need to update their election statement form," advises attorney **Andrew Brenton** with Husch Blackwell in Madison, Wisconsin. Whether you want to adopt CMS' sample form wholesale or make modifications for your agency, make sure you've got your new form ready to go well in advance of Oct. 1.
4. **Adopt your new addendum form.** While updating the election statement form will likely just require some tweaks for many hospices, everyone will have to adopt an entirely new addendum form. Many hospices are using the sample format provided by CMS, Stange relates. Preparing forms includes getting any updates from electronic medical record vendors, points out **Katie Wehri** with the National Association for Home Care & Hospice.  

5. **Update and generate new P&Ps.** Finalizing the new forms is only the start. You'll also need to update relevant policies and procedures and implement entirely new ones, experts emphasize. Making sure you have clear, comprehensive P&Ps in place will head off confusion and resulting mistakes during the implementation process. **Timeline:** Consultant **Chris Acevedo** with Hospice Fundamentals in Delray Beach, Florida, recommends having all forms and P&Ps finalized by the week of Sept. 8. If you haven't yet, "start now," Acevedo exhorts. "It is the time to get the 'paper portion' done now."
6. **Check your P&Ps for pitfalls.** Make sure your written policies and procedures address areas likely to trip up your staff (see story, p. 1). **For example:** Address "the scenario where a patient requests the addendum, but then refuses to sign the addendum to acknowledge its receipt," Brenton advises.
7. **Pin down relatedness.** Hospices often struggle with determining whether items and services are related to the terminal diagnosis, and that struggle is reflected in poor documentation. "Agencies will want to work on improving their own processes for expediting the decisions on related/not related so this information can be used for the Patient Notification forms," Acevedo recommends.
8. **Schedule staff training.** The key to compliance with this complex requirement will be robust training for staff, experts agree. "The weeks of 9/14 and 9/21 should have planned trainings for staff on the Notification, the regulations and how to

develop the information needed to fill the form out if requested," Acevedo advises.

"Staff training on the new requirements, forms, and processes will ... be critical for hospices to undertake prior to Oct. 1," Brenton emphasizes.

Don't wait until the eleventh hour to train, Griffin counsels. "Get the process down before the requirement date ... to work the kinks out," she exhorts.

9. **Continue monitoring and training.** Once Oct. 1 hits, your training job isn't over. "This is all new for hospice, so ... education and quality assurance will be important for success," Griffin observes. Expect it to take time to learn to do it correctly, she says.

After Oct. 1, "consider having the field staff work with leadership on these forms until you 'check off' the clinician as being competent in the new process," Acevedo suggests.

10. **Stay tuned for updates.** As with any untried process, expect the addendums to be a work in progress for some time. "Be ready for new questions to arise as the new requirements are implemented," Wehri advises. And that may mean you need "to adjust as the answers to those questions are learned or as new hurdles are identified," she says. Flexibility will be critical to securing - and maintaining - compliance.