

## Eli's Hospice Insider

## **Documentation: Check Your Election Statement Form Against This List**

Tip: Your statement must stress the palliative versus curative option.

Medicare probes with high denial rates have been turning up election statement problems as one of their common pitfalls. Make sure your claims are bulletproof against this reason for denials by consulting a MAC resource.

If your hospice election statement fails to include every single one of these items, it "is considered incomplete, and may result in the claim being denied," warns HHH Medicare Administrative Contractor **CGS** on its election statement webpage. The MAC says the hospice's election statement **must include** the following items of information:

- Identification of the particular hospice that will provide care to the patient;
- The patient's or representative's (as applicable) acknowledgment that the patient has been given a full understanding of hospice care, particularly the palliative rather than curative nature of treatment;
- The patient's or rep's acknowledgment that the patient understands that certain Medicare services are waived by the election;
- The effective date of the election, which can be the first day of hospice care or a later date, but cannot be a retroactive date:
- The patient's or rep's designated attending physician (if they have one).
- Enough detail to clearly identify the attending physician. This may include, but is not limited to, the physician's full name, office address, or National Provider Identifier (NPI).
- The patient's or rep's acknowledgement that the designated attending physician was their choice.
- The signature of the patient or their representative.

## **Attending Physician Form Requirements**

"If the patient/representative wants to change their designated attending physician, they must file a signed statement with the hospice," CGS adds. The statement must include the following information:

- Identification of the new attending physician with the same "enough detail" information;
- The date the change is effective;
- An acknowledgement that the change in attending physician was their choice;
- The patient's or rep's signature; and
- The date the statement was signed.

Note: CGS's webpage is at www.cgsmedicare.com/hhh/coverage/coverage\_guidelines/election\_requirements.html.