

Eli's Hospice Insider

Industry News

- **Hospital patients at end of life need to have better communication** with their physicians about issues like intensive treatments, according to a new study in the Archives of Internal Medicine.

Even after 48 hours in the Intensive Care Unit or on the ventilator, more than half of patients had no medical record documentation about goals of care or an attempt to pursue the topic, says the study.

Another new study shows that doctors' orders help end-of-life patients get the care they want. Nursing home residents with Physicians Orders for Life Sustaining Treatment (POLST) forms who said they wished to receive care primarily for pain relief were 59 percent less likely to receive unwanted treatments than those with only a "Do Not Resuscitate" order, according to the study in the July 2 Journal of the American Geriatrics Society. POLST forms address things like antibiotics, feeding tubes, and other interventions.

- **When RAC reviews hit home health agencies and hospices**, you'd better keep your appeals skills sharpened. Recovery Audit Contractors made overpayment determinations on nearly 600,000 claims in the three-year RAC demonstration, says an updated report about RAC appeals that CMS released in June. As of March 2009, providers had appealed 12.7 of those determinations -- more than 76,000.

More than 64 percent of the appeals were successful, the report notes. That means that of all the RAC overpayment determinations, more than 8 percent were overturned on appeal.

"While RACs have not announced review of home health or hospice claims, RAC actions and appeals remain of utmost concern to the home care industry," urges the **National Association for Home Care & Hospice**.

Providers' success in getting RAC overpayments overturned is even better than the report indicates, NAHC says. "These data do not include reversals made by contractors when additional documentation was submitted, which the program characterized as clerical reopenings."

Difference: In the demo, RACs received their contingency fee based on the overpayment amount as long as the appeal didn't succeed at the first level, NAHC adds. Under the permanent program, their fee is taken back no matter what level of appeal a provider succeeds at.

The report is online at <http://www.cms.gov/RAC/Downloads/DemoAppealsUpdate61410.pdf>.

- **Nine out of 10 Medicare beneficiaries' deaths are associated** with chronic illness, and most people with chronic illnesses say they want to die at home, according to the **Dartmouth Atlas Project**. But those wishes appear to be going unheeded, with 55 percent of those who express a preference for dying at home actually dying in the hospital. "Americans increasingly are treated to death, spending more time in hospitals in their final days, trying last-ditch treatments that often buy only weeks of time, and racking up bills that have made medical care a leading cause of bankruptcies," says the Associated Press. "The average time spent in hospice and palliative care, which stresses comfort and quality of life once an illness is incurable, is falling because people are starting it too late."

- **When Recovery Audit Contractor reviews hit home health agencies and hospices**, they'll know it thanks to a new Type of Bill indicator, says regional home health intermediary **Palmetto GBA**.

"Claims ... with TOBs of __H are related to Recovery Audit Contractor (RAC) adjustments," explains Palmetto in a new RAC frequently asked question set on its website. "For instance, if a provider has a RA and the claim is listed with a TOB 11H, the provider knows this claim is related to RAC."

RACs already have secured CMS approval to review dozens of durable medical equipment topics, some relating to HHA and hospice.