

## Eli's Hospice Insider

### Nursing Home Partnerships: Share this Test: Are these Statements about Hospice on or Off the Mark?

#### Must you synch care plans for nursing home residents on the Medicare hospice benefit?

The hospice/nursing home partnership can work smoothly, but with conflicting regulations, there is plenty of room for confusion. Offer the following test to your nursing home partners as a way to help them bone up on some of the intricacies involved with residents who elect the hospice benefit

Instructions: Categorize each of the following statements as being accurate or not. Then check out the expert's answers below each question.

1. A patient has to have a do-not-resuscitate (DNR) order in place in order to be admitted to hospice.

Answer: There are hospices in the U.S. that require a DNR order as their informal policy, says **Beth Carpenter**, a hospice consultant in Lake Barrington, Ill. "But, in fact, the regulations are silent on that issue. You are not required to have a DNR order in place in order to be admitted to hospice."

2. You cannot authorize palliative radiation for hospice patients.

**Answer:** "A person can get palliative radiation to shrink a mass and thus allow them to swallow, as an example, or even palliative chemotherapy, although you don't see much of the latter," relays Carpenter.

3. The hospice covers only prescription medications and not over-the-counter ones related to the hospice diagnosis.

Answer: "Hospices are required to cover all medications related to the hospice diagnosis," says Carpenter.

4. Regulations require the hospice and nursing home to have a single care plan for each patient residing in the facility who is on the Medicare hospice benefit.

Answer: "While the hospice and facility need to develop a coordinated plan of care, it does not need to be in a single document," says attorney **Meg Pekarse**, with **Reinhart Boerner Van Deuren** in Madison, Wis. "CMS has provided guidance indicating that the plan of care can be separated into different sections -- one maintained by the facility and the other maintained by the hospice. Each party is required to update their portion of the care plan in accordance with their applicable legal requirements."

The hospice and nursing home should review and share their care plan updates with one another, Pekarske adds. "If done correctly, it should be clear to any one reviewing the documents, such as surveyors, the role and responsibilities" of the hospice and nursing home.

Tip: Given that the hospice rules require a comprehensive assessment within five days of admission to hospice, **Cherry Meier, RN, MSN**, instructs hospice nurses at her organization to meet with the MDS coordinator upon the patient's admission and talk about the care plan. "That way, the hospice [and nursing facility] are on the same page from the beginning," says Meier, with **VITAS Healthcare Corp.** in Flat Rock, N.C.