

## Eli's Hospice Insider

### Regulations: Medicare Explores Provision Of Hospice, Curative Care Concurrently

**Proposed NOE deadline, CAHPS requirements also raised in Open Door Forum.**

The answer to whether Medicare will cover hospice and curative care services at the same time may be one step closer.

Last month, hospices had to submit their applications to participate in Medicare's first test of the concept of concurrent care between hospice and curative care. The **Centers for Medicare & Medicaid Services** took applications for its Medicare Care Choices Model — a three-year demonstration project that will test the concurrent provision of hospice care and fee for service curative care.

The demo will focus on patients with advanced cancers, COPD, obstructive heart failure, and HIV/AIDS, noted CMS's **Cindy Massuda** in the May 28 Open Door Forum for home care providers. "These beneficiaries are hospice-eligible, but are not currently in the Medicare hospice benefit," Massuda noted.

The demo will pay hospices \$400 per beneficiary, per month to provide palliative care services. That will include routine home care and respite care levels of service, Massuda detailed.

"We see this model very much as an integrated health care model, where the hospices are highly integrated with the curative providers and coordinating the services and case managing with the curative providers," Massuda explained.

CMS wants at least 30 hospices of all sizes in diverse areas of the country to participate, Massuda noted.

More information on the demo is at <http://innovation.cms.gov/initiatives/Medicare-Care-Choices>.

Other hospice issues raised in the forum were:

- **NOE and NOTR submission.** In the FY 2015 proposed rule, CMS proposes to require hospices to file both the notice of election (NOE) and the new notice of termination/revocation (NOTR) within three calendar days of admission/discharge. This deadline will be challenging given that the forms have to be manually entered via DDE, said **Jennifer Handel** with **Hospice of Michigan** in the question-and-answer portion of the forum.

While clinical care is 24/7, "administrative staff are not working 24/7, 365," Handel told CMS. "It's administrative staff who would have to manually enter this."

Due to numerous regulatory changes over the past few years, "we've had to continually improve our systems to provide data to CMS," Handel said. "So hopefully CMS can make some minor adjustments to allow for things to be submitted in a more efficient and electronic manner."

- **CAHPS.** If you qualify for a hospice CAHPS exemption based on small size, you don't have to participate in a dry run of the patient satisfaction survey during the first quarter of 2015, confirmed CMS's **Debra Dean-Whitaker** in the forum.

CMS hasn't set a deadline for the exemption forms yet, Dean-Whitaker added in response to a question. But the hospice CAHPS website should go up in July, so hospices will likely be able to start submitting exemption forms then, she estimated.

- **Quality measures.** CMS is proposing no new quality measures for 2015, CMS pointed out in an overview of the fiscal year 2015 proposed hospice payment rule.

