

MDS Alert

Resident Assessment: Resident Going On Hospice? Be Aware Of RAI Manual Clarification About Doing An SCSA

Nursing homes, hospices should focus on coordinating care.

When deciding whether to do a sig change on a resident who elects hospice care, consider this: The July 2008 RAI user's manual clarification encourages SNFs to do one in that type of scenario.

What it says: The revision combines the previous directive in the RAI manual with new advice (in bold), as follows: "While the need to complete an SCSA will depend upon the resident's status at the time of election of hospice care, and whether or not the resident's condition requires a new assessment, CMS encourages facilities to complete an SCSA due to the importance of ensuring that a coordinated plan of care between the hospice and nursing facility is put into place."

Consultant Ron Orth, RN, NHA, CPC, RAC-CT thinks CMS' clarification makes sense.

"A resident who goes on hospice will likely have a change in the care plan, which will become more focused on palliative care," says Orth, president of **Clinical Reimbursement Solutions LLC** in Milwaukee.

Handwriting on the Wall?

Pointing to more stringent hospice Medicare conditions of participation that go into effect Dec. 2, hospice expert and consultant **Beth Carpenter** thinks the RAI manual clarification may signal that it's imperative that nursing homes understand there must be joint care planning with hospice for hospice patients residing in a nursing home.

"It's expected that there will be changes to the Medicare nursing facility conditions of participation [so they] more closely match the new hospice conditions of participation," although that could take up to three years, says Carpenter, president of **Beth Carpenter and Associates** in Lake Barrington, IL.

Editor's note: See the next MDS Alert for an inside look at how the new hospice conditions of participation affect nursing homes, including care planning.