



Understanding the 2020 Hospice Final Rule



with

Catherine Dehlin, RN, BSN, CHPN, CHCM, COQS

Director of Hospice and Palliative Services

Fazzi Associates

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About the presenter

Catherine Dehlin

Director of Hospice and Palliative Services

Fazzi Associates

FY 2020 Hospice Rule Timeline

Proposed rule – April 2019

Comment period – through June 18, 2019

Final rule – published August 6, 2019

Available online at <https://federalregister.gov/d/2019-16583> and on [govinfo.gov](https://www.govinfo.gov)

Final Rule Updates/Changes

- Hospice Wage Index
- Rebased Payment Rates
- Cap Amount
- Election Statement Modifications
- Notice of non-covered services, etc. Addendum
- Hospice Quality Reporting Program (HQRP)



Rebasing Background



No payment
structure change
since 1983

No increases,
except for inflation

Rates based on
small set of
hospices

Misalignment
between payments
and costs

Rebasing Payment Rates – *Background Continued*



Organizations reported
variances of payments vs costs

Additional items on claims data
collected

Expansion of cost report

Average Cost/Payment per Day by Level of Care

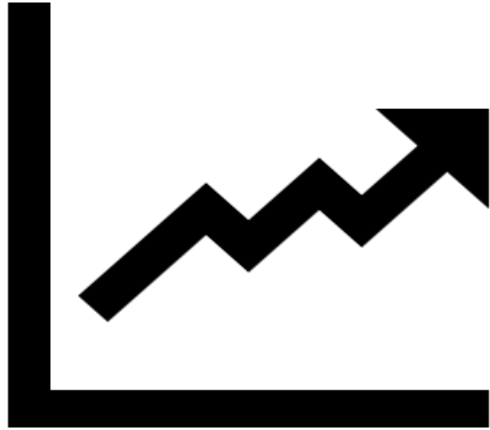
Level of Care	Average Cost per Day 2017	Average Cost per Day Estimated FY 2019	FY 2019 Per Diem Payment Rates	Percent difference between cost and payment	FY 2019 Rebased Payment Rates	FY 2020 Rebased Payment Rates (with 2.6% increase)
Routine Home Care (Days 1-60)	\$154.25	\$160.80	\$196.25	-18.1%	\$190.91	\$194.50
Routine Home Care (Days 61+)	\$119.36	\$124.43	\$154.21	-19.3%	\$150.02	\$153.02
Continuous Home Care (per hour)	\$54.49	\$56.80	\$41.56	+36.6%	\$56.80	\$58.15
Inpatient Respite Care	\$441.03	\$459.75	\$176.01	+161.2%	\$437.86	\$450.10
General Inpatient Care	\$952.56	\$992.99	\$758.07	+31%	\$992.99	\$1,021.25

Rebasing - Summarized



- Routine Home Care payment rates ↓ 2.72%
- Higher levels of care payment rates ↑
- Accurate cost reports essential
- Higher level of care utilization

Hospice Payment Rates



Effective
October 1, 2019
2.6% increase

Level of Care	FY 2020 Rebased Payment Rates (with 2.6% increase)	FY 2020 Rebased Payment Rates (with 0.6% increase)
Routine Home Care (Days 1-60)	\$194.50	\$190.76
Routine Home Care (Days 61+)	\$153.02	\$150.72
Continuous Home Care (per hour)	\$58.15	\$57.02
Inpatient Respite Care	\$450.10	\$441.32
General Inpatient Care	\$1,021.25	\$1,001.35

Hospice Cap Amount

	FY 2020 hospice cap amount = \$29,964.78



Election Statement Content Modification

- Background
 - Effective October 1, 2021
 - Informed choice about whether to receive hospice care
 - What services will be provided
 - Related vs unrelated services, items, and medications
 - Communication and collaboration with health care providers



Election Statement Modification - Context



Increasing amounts of items, services, and drugs provided to beneficiaries by non-hospice providers while under the hospice benefit

Anecdotal evidence from reports to CMS

- Beneficiaries and family concerns
- Non-hospice providers
- Hospice providers

Election Statement Modification Content

Information about the holistic, comprehensive nature of the Medicare hospice benefit

A statement that, although it would be rare, there could be some necessary items, drugs, or services that will not be covered by the hospice because the hospice has determined that these items, drugs, or services are to treat a condition that is unrelated to the terminal illness and related conditions.

Information about beneficiary cost-sharing for hospice services

Notification of the beneficiary's (or representative's) right to request an election statement addendum that includes a written list and a rationale for the conditions, items, drugs, or services that the hospice has determined to be unrelated to the terminal illness and related conditions and that immediate advocacy is available through the BFCC-QIO if the beneficiary (or representative) disagrees with the hospice's determination.

Election Statement Addendum – Patient Notification of Hospice Non-Covered Items, Services, and Drugs

- 1) Name of the hospice
- 2) Beneficiary's name & hospice medical record identifier
- 3) Identification of the beneficiary's terminal illness and related conditions
- 4) A list of the patient's current diagnoses/conditions present on hospice admission (or upon plan of care update, as applicable) and the associated items, services, and drugs not covered by the hospice because they have been determined by the hospice to be unrelated to the terminal illness and related conditions
- 5) A written clinical explanation, in language the beneficiary and his or her representative can understand, as to why the identified conditions, items, services, and drugs are considered unrelated to the terminal illness and related conditions and not needed for pain or symptom management. This clinical explanation would be accompanied by a general statement that the decision as to whether or not conditions, items, services, and drugs is related is made for each patient and that the beneficiary should share this clinical explanation with other health care providers from which they seek services unrelated to their terminal illness and related conditions
- 6) References to any relevant clinical practice, policy, or coverage guidelines
- 7) Information on the following domains
 - Purpose of the addendum
 - Right to immediate advocacy
- 8) Name and signature of Medicare hospice beneficiary (or representative) and date signed, along with a statement that signing this addendum (or its updates) is only acknowledgement of receipt of the addendum (or its updates) and not necessarily the beneficiary's agreement with the hospice's determinations.

Election Statement Addendum – Patient Notification of Hospice Non-Covered Items, Services, and Drugs

When should the addendum be furnished to the beneficiary or representative?

- If requested at the time of hospice election, the hospice has 5 days from the SOC
 - Unless the patient dies within that time
- If requested during the course of hospice care (after the date of election), the hospice would have 72 hours from the date of request to provide the written addendum

Other Important Details

- Condition of payment
- Separate consent not needed to release form to non-hospice providers
- CoP updates to § 418.24



Hospice Quality Reporting Program

No changes to HQRP

Imminent migration to new internet Quality Improvement and Evaluation System (QRP submission)

Imminent Death Measure 2 not publicly displayed, but still required to report

CAHPS volume-based exemptions extended

***KNOW THE
RULES!***



Other Updates

Hospice Assessment Tool

HOPE (Hospice Outcome and Patient Evaluation) Tool

Public Use Files (PUF)

Hospice Compare

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