



CMS to Docs: “Don’t Fear to Certify Terminally Ill”

CMS has begun placing a two-page ad in specialized magazines reaching physicians and other referral sources, explaining hospice care and telling readers that physicians need not be concerned about certifying a patient’s terminal illness. The ad is the first hospice outcome from the “Open Door” meetings between the Centers for Medicare and Medicaid Services and hospice leaders.

The Open Door group is comprised of leaders and staff of the National Hospice and Palliative Care Organization, Hospice Association of America, representatives of the organizations for hospice physicians, hospice nurses, and home care personnel, and about a half-dozen directors of major hospices.

The two-page advertisement ran first in the March-April issue of *The Physician Executive*, the magazine of the American College of Physician Executives. It will soon run in a number of other journals and publications. The three key paragraphs of the advertisement read:

“The Medicare program recognizes that terminal illnesses do not have entirely predictable courses, therefore, the [hospice] benefit is available for extended periods of time beyond six months provided that proper certification is made at the start of each coverage period.

“Recognizing that prognoses can be uncertain and may change, Medicare’s benefit is not limited in terms of time. Hospice care is available as long as the patient’s prognosis meets the law’s six-month test.

“This (six-month) test is a general one. As the governing statute says: “The certification of terminal illness of an individual who elects hospice shall be based on the physician’s or medical director’s clinical judgment regarding the normal course of the individual’s illness.” The statute further notes that, “making medical prognostication of life expectancy is not always exact.” Thus, there is no reason for a physician to be concerned about certifying an individual for hospice care that he or she believes to be terminally ill.” (*New Jersey Hospice and Palliative Care Organization’s Newsnotes*, 3/18)