Developing A Discharge Process: Merging Regulation and Patient/Family Satisfaction

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Objectives

- Gain an understanding of the regulatory requirements surrounding discharge planning
- Discuss when to start the discussion and the process of discharge planning
- Discuss the necessity of strong policy and procedure as well as IDT involvement when discharging a patient
Regulatory Requirements

- Medicare Conditions of Participation
- 418.26 Discharge from hospice care
  1. The patient moves out of the hospice’s service area or transfers to another hospice;
  2. The hospice determines that the provider is no longer terminally ill;
  3. The hospice determines, under a policy set by the hospice for the purpose of addressing discharge for cause....
Regulatory Requirements

- (d) Discharge planning

  (1) The hospice must have in place a discharge planning process that takes into account the prospect that a patient’s condition might stabilize or otherwise change such that the patient cannot continue to be certified as terminally ill.

  (2) The discharge planning process must include planning for any necessary family counseling, patient education, or other services before the patient is discharged because he or she is no longer terminally ill.
Medicare Expedited Review

- NOMNC-CMS10123
- Valid notice delivered at least 2 days prior to termination of services
  - Valid delivery
    - Beneficiary must be able to understand the purpose and contents

- Detailed Explanation of Non-Coverage
Why Important?

- Good discharge planning paves the way from one health care setting to another and possibly back to your hospice

- MedPac 2011
  - 79% of live discharges are for patients who are considered no longer terminally ill

- Abt Associates 2010
  - 49.2% of live discharges are dead within 6 months
When To Start The Conversation

- Need to take a step back
- Educate staff regarding the Hospice Medicare Benefit
  - Eligibility
  - Benefit periods
- Chronic vs. acute
- Expected progression
  - LCD
- Needs to be a team approach and all members need to understand their role in supporting eligibility
- Boundaries
When To Start The Conversation

- Admission?
  - Need to treat each patient and family as an individual
  - Educate patients and family about the Hospice Medicare Benefit
    - CMS resource
    - No “penalty” for inappropriate admission
  - Written information that can be part of the Admission information that can be re-visited as needed
  - Need to approach discharge as an IDT, not a single discipline
  - Don’t sugar coat it
    - Patients are still sick, scared
Elements Of Successful Discharge Planning

- Should not be a surprise to patients and families
- Need to include all members of the IDT and patient and family
- Time for processing
- Patient/family education
- Time for resource referral
  - Alternate living arrangements
Process

- First, where is your agency compared to National and state stats

- How do you currently document or track decline
  - Software
  - Manually graph
  - Utilization Committee

- Face to Face
  - What is your agencies for Face to Face
  - Timing is everything
Process

First “inkling” of potential discharge

IDT input; including Attending Physician

Discussion with patient/family
Process

Objective evaluation

Discharge preparation/NOMNC

Discharge
Maintaining the Relationship

- Develop process for follow up
- Volunteers
- Standardized form
- Process for clinical evaluation
Policy & Procedure

- Need to establish written guidelines that will be utilized to direct staff and establish consistency

- Process needs to be specific
  - No complaints for inappropriate discharge
  - No discharges for utilization of services

- Can’t wait for the next IDT to discuss with team, need a process for timely communication once discharge is felt to be appropriate
Policy & Procedure

- Will contact the primary care MD if different than the Attending MD for additional clinical information

- All members of the team will be consulted to gather additional information

- Team Leader, DON, NP, MD will conduct home visit for objective evaluation
Take Aways

- Educate staff
  - Ensure their comfort level
  - Utilize those that do it well
  - Role play

- Evaluate your process…and policy

- Follow up
  - What can your agency do to maintain the relationship?
Questions?