

Medicare Hospice Conditions of Participation
Pharmacist
Revised May 2022

Summary

***Highlights of key changes for pharmacy professionals
and guidance for implementation***

- 1) 418.54 Initial and comprehensive assessment of the patient
- 2) 418.56 Interdisciplinary group, care planning, and coordination of services
- 3) 418.58 Quality assessment and performance improvement
- 4) 418.62 Licensed professional services
- 5) 418.100 Organization and administration of services
- 6) 418.104 Clinical records
- 7) 418.106 Drugs and biologicals, medical supplies, and durable medical equipment
- 8) 418.110 Hospices that provide inpatient care directly
- 9) 418.112 Hospices that provide hospice care to residents of a SNF/NF or ICF/MR
- 10) 418.114 Personnel qualifications

Background

In the new CoPs, there is an increased role for pharmacists with initial medication review, updates to that review, and ongoing medication therapy oversight and drug disposition management, particularly with respect to controlled substances and symptom management. For the hospice who provides inpatient care directly, medication oversight by a licensed pharmacist is required.

§ 418.54 Condition of participation: Initial and comprehensive assessment of the patient.

In order to meet the drug therapy review requirements of this standard as intended, the hospice needs a process to ensure a pharmacist assists with this review. The initial medication review, as part of the initial assessment, must be completed no later than 5 calendar days after the election of hospice care and updated on an ongoing basis as needed based on therapy changes and no less frequently than every 15 days. The drug therapy review data elements must be an integral part of the comprehensive assessment and must be incorporated and documented in a systematic and retrievable way for each patient for quality assurance and process improvement purposes.

§ 418.56 Condition of participation: Interdisciplinary group (IDG), care planning, and coordination of services.

The plan of care must include drug therapy intervention necessary for to meet the needs of the patient.

The plan of care must be reviewed no less than every 15 days. The pharmacist's medication profile review should include, but not limited to, the 5 core elements outlined in the CoPs: the drug therapy is appropriate and effective; actual or potential adverse drug side effects; drugs therapy monitoring; drug interactions; duplications of therapy. The pharmacist review should also assist the interdisciplinary team (IDT) with medication use case scenarios that could assist in determining relatedness to the hospice prognosis. The goals of the patient and the family must be identified in the plan of care, which may include medication related goals.

Pharmacists working with hospices should provide ongoing education and consultation to the IDT, not only on patient related care plans, but also with respects to medication related industry changes and regulations (e.g. drug shortages and recalls, FDA Risk Evaluation and Migration Strategies (REMS), drug pricing).

§ 418.58 Condition of participation: Quality assessment and performance improvement.

All 3 of the areas listed below are required under this CoP and frequently may involve medication. Therefore, the participation of a pharmacist in quality assessment and process improvement is vital. There is opportunity for pharmacists to identify medication-related areas that need improvement and participate in the development of processes and education to improve and sustain performance.

- (1) The hospice's performance improvement activities must:
 - (i) Focus on high risk, high volume, or problem-prone areas
 - (ii) Consider incidence, prevalence, and severity of problems in those areas
 - (iii) Affect palliative outcomes, patient safety, and quality of care
- (2) Performance improvement activities must track adverse patient events, analyze their causes, and implement preventive actions and mechanisms that include feedback and learning throughout the hospice.
- (3) The hospice must take actions aimed at performance improvement and, after implementing those actions, the hospice must measure its success and track performance to ensure improvements are sustained.

Pharmacists working with hospice program should assist the hospice in policy and procedures around proper drug disposal in various settings in which the hospice provides patient care, as well as ongoing billing oversight to ensure medications are billed to appropriate payers as defined by CMS.

§ 418.62 Condition of participation: Licensed professional services.

The pharmacists who work with hospice programs and their patients must take responsibility for maintaining compliance with applicable hospice policies and procedures and participate in quality assessment and process improvement activities and hospice in-service training in order to be equipped to participate as a member of the interdisciplinary group in providing input into the comprehensive assessment, plan of care, and contribute to educational needs of the organization, patient, and family as appropriate.

§ 418.100 Condition of Participation: Organization and administration of services.

Pharmacists working with hospice programs must have written agreements outlining their responsibilities and they must be oriented about the hospice philosophy as appropriate to their responsibilities. The hospice must assess and document the competency of the pharmacist as well as their participation in in-service training as appropriate to their function with the hospice.

§ 418.104 Condition of participation: Clinical records.

Pharmacists who work with hospice programs to provide drug therapy review must provide documentation of their medication review that can be incorporated into the clinical record, Documentation must be "legible, clear, complete, and appropriately authenticated and dated in accordance with hospice policy and currently accepted standards of practice." The pharmacist must only access patient information necessary for the performance of their functions and shall keep that information confidential.

§ 418.106 Condition of participation: Drugs and biologicals, medical supplies, and durable medical equipment.

This CoP places a greater emphasis on ongoing both medication therapy oversight and drug disposition management, particularly with respect to controlled substances. Based on their knowledge and training, the pharmacist is the ideal clinician, but not the only possible choice, to take responsibility for the medication profile oversight and as a contributor to drug-related policies and processes.

From ordering to storage, dispensing, monitoring, and disposing of controlled substances both for patients in home care and in an inpatient facility, the role of a pharmacist is clear. Even with additional training, it would be unfair to expect other disciplines to have the breadth of knowledge to meet all the drug related components of this CoP efficiently and effectively as compared with a pharmacist.

§ 418.110 Condition of participation: Hospices that provide inpatient care directly.

Medication oversight by a licensed pharmacist is required when a hospice provides inpatient care directly. The pharmacist can play a key role in assisting the IDT in managing symptoms with the appropriate medication so as to prevent the need for restraints or seclusion. In the event medications are needed to restrain the patient from harming themselves or others, knowledge of the appropriate doses and agents to use to prevent overmedication is within the scope of a hospice trained pharmacist. The pharmacist can also provide guidance to the IDT when ethical aspects of end-of-life care are needed (e.g. Palliative Sedation).

§ 418.112 Condition of participation: Hospices that provide hospice care to residents of a SNF/NF or ICF/MR.

A key point in this condition is the importance of the development of the patient plan of care and coordination of care between the hospice, the patient/family, and the facility. When a hospice patient resides in a facility, hospice remains responsible for "medical direction and management of the patient." The hospice pharmacist should maintain collegial relationships with the medical staff of these facilities in order to help the hospice staff provide the necessary coordination for excellent patient care.

§ 418.114 Condition of participation: Personnel qualifications.

Licensure

- All professionals who furnish services directly, under an individual contract, or under arrangements with a hospice, must be legally authorized (licensed, certified, or registered) in accordance with applicable Federal, State, and local laws, and must act only within the scope of their State license, certification, or registration. All personnel qualifications must be kept current at all times.

Criminal Background Checks

- All hospice employees who have direct patient contact or access to patient records must have a criminal background check. Hospice contracts must require all contracted entities obtain criminal background checks on contracted employees who have direct patient contact or access to patient records.

What resources do I need to be successful?

- In addition to general drug knowledge, it is optimal for pharmacists to also have training in factors affecting drug therapy in end stage disease, deprescribing, and the hospice philosophy and regulations.
- Participation as an active member of the interdisciplinary team.
- Knowledge of how to best document and evaluate drug related data so it can be utilized to improve patient outcomes and processes.
- Knowledge of appropriate anti-infective therapies and access to pertinent patient information related to infections.
- Access to hospice policies and procedures and in-service training as necessary to perform their functions and training in factors affecting drug therapy in end stage disease and the hospice philosophy and regulations.
- State Organizations
- State Boards of Pharmacy
- Drug Enforcement Agency (DEA)
- Use other materials developed for pharmacy programs featured in the [NHPCO Marketplace](#)
- Join the [My.NHPCO Pharmacy community](#)
- Join at least one of the My.NHPCO list serves to get more information and stay current

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