

OIG Report on RN Hospice Aide Supervisory Visits and Quality of Care

To: NHPCO Provider Members

From: NHPCO Regulatory and Quality Teams

Date: November 25, 2019

Summary at a Glance

On November 21, 2019, the Office of the Inspector General published their report entitled ***Registered Nurses Did Not Always Visit Medicare Beneficiaries' Homes at Least Once Every 14 Days to Assess the Quality of Care and Services Provided by Hospice Aides*** ([download the full report](#)) which:

OIG identified two issues:

- RNs did not always visit homes of hospice Medicare beneficiaries at least once every 14 days to assess hospice aide quality of care and aide services provided
- Documentation did not meet federal hospice COP requirements, resulting in a lack of assurance that hospice beneficiaries received appropriate care while in those hospices.

OIG recommended:

- CMS promote hospices' compliance with this COP standard, to include intense oversight, education, making this standard a quality measure, and action to ensure supervisory visits are documented in accordance with applicable CMS regulations and interpretive guidelines.

CMS agreed and plans actions to address these recommendations.

Summary of Regulatory Requirement:

Within the hospice aide and homemaker services COP at [42 CFR § 418.76\(h\)](#), the standard regarding hospice aide supervision requires that an RN provide an onsite visit or supervisory visit to the a patient's home not less than a frequency of once every 14 days to assess the quality of care and services provided by the aide a hospice aide to ensure that services ordered by the hospice IDG meet the patient's needs (42 CFR § 418.76(h)(1)(i)). **The hospice aide is not required to be present in the patient's home for this visit.** (42 CFR § 418.76(h)(1)(i)). Since 2009, this standard has been identified consistently by CMS one of the top seven standards with the most deficiencies.

Reasons Cited for Hospice Aide Supervision Deficiency:

The OIG report noted that these deficiencies occurred due to:

- lack of oversight by the hospice agency
- scheduling errors
- employee turnover
- RNs not being aware of the 14-day supervisory visit requirement

Some hospices were unable to explain why the RN did not make the required supervisory visits at least once every 14 days. This resulted in the OIG having no assurance that hospice patients received appropriate care while in hospice.

Data:

- **Year:** 2016
- **High risk RN visits:**
 - **189,000** high-risk RN visit date-pairs during which there was a greater risk that an RN didn't assess the quality of care and hospice aide services provided.
 - Date-pairs were identified from hospice aides' visits reported on the claims for this time period identifying approximately 189,000 date-pairs meeting this criterion.
 - Date-pair consisted of two visits that were made by a registered nurse to a beneficiary's home for routine or continuous home care and **greater than 14 days apart**.
 - These date-pairs were potentially less likely to have the required 14-day supervisory visits because a nurse did not otherwise visit the patient in order to provide care.
- **Random sample:** A random sample of 78 date-pairs from this population was selected. For the 78 date-pairs, supporting documentation we requested from 75 hospices to determine whether RNs visited patients' homes at least once every 14 days to assess the quality of care and services provided by the hospice aides and documented the supervisory visits in accordance with COPs. **For each of the 78 sampled date-pairs, all RN supervisory visits associated with these date-pairs was reviewed.**

Findings:

- **Visit frequency:** OIG identified an estimated **99,000 instances in which the RNs didn't visit the patients' homes at least once every 14 days** to assess the hospice aide quality of care and services provided.
- **Documentation:** OIG also identified an estimated **5,000 instances in which RN supervisory visits weren't documented in accordance with COPs**. Therefore, the OIG was unable to determine whether the RN visited the patients' homes at least once every 14 days to assess the hospice aide quality of care and services provided.

OIG Recommendations to CMS:

- **RN visits at least once every 14 days:**
 - COPs require the RN to visit patients' homes at least once every 14 days to assess the quality of care and services provided by hospice aides
 - Work with State survey agencies and accreditation organizations to:
 - Increase oversight
 - educating hospices about the requirements associated with this standard
 - making this standard a quality measure
- **Documentation:**
 - Ensure that all RNs hospice aide supervisory visits are documented in accordance with applicable [COPs \(§418.76\(h\)\)](#) and interpretative guidelines.
 - [State Operations Manual Interpretive Guidelines](#) (L629) state that the supervisory visits must be documented in the patient's clinical record.
 - CMS will educate hospices on the need for RNs to document their hospice aide supervisory visits through outreach, weekly electronic newsletters, and quarterly compliance newsletters.

Improving Compliance with the RN Hospice Supervisory Requirement:

As indicated earlier in this alert, since 2009, hospice aide supervision has been identified consistently by CMS one of the top seven standards with the most deficiencies. To assist agencies in monitoring and improving compliance with this COP standard, agencies should consider the following:

NHPCO Best Practice Recommendations

1. **Ensure that your agency has a system in place for monitoring hospice aide visit frequencies.**
2. **If your EMR has the capability to run aide supervisory reports, consider incorporating this and track with RN case managers.**
3. **Consider completion of hospice aide supervision with each RN visit for patients who have a hospice aide.**
4. **As part of the supervisory visit, the RN should ask the patient/caregiver the following three questions and document their response:**
 - a. Is the hospice aide following the care plan?
 - b. Did the clinician observe the aide performing any duties? Was the aide present?
 - c. Are the patient/family satisfied with the hospice aide's care?
5. **If your agency employs LVNs/LPNs, after each LVN visit, the RN visit following the LVN/LPN should include a hospice aide supervisory visit for those patients with a hospice aide within the timeframe.**
6. **To assess your compliance, perform a hospice aide supervision and documentation audit. Consider starting with a sample size of 10% of your census on a monthly basis for one quarter.**

NHPCO members may direct questions to regulatory@nhpco.org.