

*Part 2635 Chapter 15: Hospice Practice*

*Rule 15.1 In-Home Hospice Good Faith*

Recognizing the unique team-based approach utilized when treating in-home hospice patients, the following represents four factors required to establish a proper physician-patient relationship:

- i) The medical director must receive an order from the treating/referring physician requesting the patient be admitted for hospice care;
- ii) That the treating hospice physician or medical director has thoroughly reviewed the medical records of the patient, as provided by the referring physician, has documented the review, and has determined just cause exists for hospice admission (expected death in six months or less), with documented follow-up review at every certification period thereafter;
- iii) That the actions of the physician are otherwise deemed within the course of legitimate professional practice, as defined by the Centers for Medicare and Medicaid Services (CMS); and
- iv) That the physician's live-discharge rate for hospice patients does not exceed twenty (20) percent.

It shall be considered unprofessional conduct for a medical director to participate in active recruitment for patient admission to hospice.

Nothing in this section shall preclude a hospice physician from fulfilling their duties to provide physician services as needed to hospice patients.