



HPCAIA Update

Bi-weekly News for Hospice Professionals in Iowa

April 23, 2010

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Iowa Advocates Visit Capitol Hill

HPCAIA members met with Iowa's Congressional Delegation on April 21 to talk about hospice and palliative care. The visits were scheduled during the National Hospice and Palliative Care Organization's (NHPCO) Capitol Hill Day.

Meetings were held with legislative staff to Congressmen Bruce Braley (D) 1st District, Leonard Boswell (D) 3rd District, Steve King (R) 5th District, and Tom Latham (R) 4th District. In addition, the Iowa group met with Diane Meier, MD, who is a Health Policy Fellow with the Committee on Health, Education, Labor and Pensions (HELP Committee) and serving in Senator Tom Harkin's (D-IA) office. Dr. Meier is nationally recognized in end-of-life care; she is the Director of the Center to Advance Palliative Care (CAPC) and a physician and faculty member at Mount Sinai Hospital and School of Medicine in New York City. She is taking a one year sabbatical to serve this fellowship. In Senator Grassley's (R-IA) office, the group met with Michael Park, who serves as health policy counsel to the Committee on Finance and Senator Charles Grassley.

Lori Bishop, RN, CHPN, Clinical Manager with Iowa Health Hospice/Taylor House in Des Moines and HPCAIA Board President, led the discussions in the Senate offices and spoke frankly characterizing the hospice rate cuts as a terminal diagnosis for Iowa hospices. Discussions with staff focused on the impact of these cuts amounting to a 14.3% reduction in payment over the next decade will have on Iowa hospices that are already experiencing financial pressures due to declining admissions and donations, and rising expenses. The cuts facing hospice are on two fronts — regulatory cuts enacted in October 2009 that eliminated a key component of the Medicare hospice reimbursement known as the Budget Neutrality Adjustment Factor (BNAF) and more recently, cuts slated to be implemented in 2013 as a result of the health care reform bill passed last month. HPCAIA members also explained how hospice would not benefit from the expansion of access to health insurance, contained in the health

care reform bill, since more than 90 percent of hospice care is provided to Medicare beneficiaries. The Iowans did express appreciation for the palliative care proposals contained in the recently passed health care reform bill.

At each meeting, HPCAI members provided a packet of information that included an Iowa hospice and palliative care fact sheet, as well as the most current Medicare data profiling hospice penetration in Iowa. The congressman also received a roster of the hospices serving their district. This information was accompanied by handouts prepared by NHPCO. The information is available for all HPCAI members to use and is now [posted on the HPCAI Web site in the Advocacy section](#).

Board officers and members of HPCAI who participated in the Hill visits included:

- Norene Bauman, HPCAI Board President-elect and Patient Care Coordinator, Community Hospice-Stewart Community Hospital, Lake City
- Lori Bishop, HPCAI Board President and Clinical Manager with Iowa Health Hospice/Taylor House, Des Moines
- Chloe Bishop, social work major, Buena Vista University, Storm Lake
- Marvin Fagerlind, Executive Director, Cedar Valley Hospice, Waterloo
- Norene Mostkoff, President/CEO, Hospice of Central Iowa, West Des Moines
- Linda Todd, Director, Hospice of Siouxland, Sioux City
- Tray Wade, Vice President-Patient and Family Care, Hospice of Central Iowa, West Des Moines
- Abigail Stork, Federal Lobbyist, HPCAI
- Becky Anthony, Executive Director, HPCAI

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HPCAI Seeks Presentations for Fall Conference

Have you heard a great hospice or palliative care related speaker recently? Do you have a question you've always wanted answered? Does your hospice have a successful initiative or program you would like to share? This is your opportunity to ensure topics you are interested in are covered at the HPCAI Fall Conference.

The 2010 Fall Conference Call for Presentations was sent out early in March. Please review the Call for Presentations and either complete the application form or pass it on to someone you think would make a great presenter. The form is available in an electronic version as well as a downloadable PDF on the opening page of the [HPCAI Web site](#).

Deadline: The deadline to submit an application is **Friday, May 7, 2010**.

Questions: Contact [Stacey Nay](#), HPCAI Director of Education, 515.243.1046.

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Farewell to a Hospice Hero

It is in times of sadness and reflecting upon someone's life accomplishments that we often find sources of great admiration. For many who work in the hospice service industry this is not a new revelation but an affirmation of why the work we do is important.

For Iowans, we have Dolores Butt, RN, to thank for helping to pave the way for hospice education and advocacy. Butt spent much of her career as a registered nurse at St. Joseph Mercy Hospital in Mason

City, Ellsworth Municipal Hospital in Iowa Falls and the Ahrens Nursing Home in Hampton. In 1981 she helped file the articles of incorporation helping to form the Iowa Hospice Organization (now known as the Hospice and Palliative Care Association of Iowa) and was its first president. She was also the founding program director of North Central Hospice in Mason City, now known as Hospice of North Iowa.

Butt was also instrumental in providing education opportunities for fellow nurses caring for terminally ill patients. Outside of her professional life she was very active member of the Hampton United Methodist Church, the Iowa & American Nurses Associations, the Iowa & National Hospice Associations and 4-H. Most importantly, Butt is remembered for having strong ties with her family and loved ones.

It is with sadness and gratitude that the Hospice and Palliative Care Association of Iowa bids farewell to Dolores Butt. Among her many life accomplishments she will be remembered as a great advocate for hospice care in Iowa.

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Hospice Nurses Honored

Four hospice nurses are included in the [2010 list of "100 Great Iowa Nurses."](#) Lori Bishop, Clinical Manager, Iowa Health Hospice-Taylor House, Des Moines; Beverly Erskine, Admissions Director, Hospice of Central Iowa, West Des Moines; Dee Dee Kennedy, Patient Care Coordinator, Mercy Hospice, Des Moines; and Amy Mobley, Referrals Coordinator, Hospice of Central Iowa, Mount Ayr are among the 100 nurses who will be honored at a celebration May 2 in Des Moines.

The field of nominees was narrowed to 100 by a panel of judges, including nursing professionals and past years' award winners, who reviewed nominations from around the state. Nurses selected for this honor represent many sectors of health care, including hospitals, long-term care facilities, and school and office nurses.

For more information on the Great Iowa Nurses program, [click here](#).

Congratulations to Lori, Beverly, Dee Dee and Amy!

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Hospital Discharge Planning and Hospice

The Social Security Act (SSA) at §1861(ee) requires Medicare participating hospitals as part of the discharge planning to include an evaluation of a patient's need for appropriate post-hospital services, including hospice, and the availability of those services in the area in which the patient resides. The law also states that a hospital may not limit the qualified providers from the area included on the list and must disclose any financial relationships.

While the SSA does not specifically require hospitals to provide a list for hospice services like it does for home health agencies, the interpretive guidelines (tag A-0809) for prospective payment system (PPS) hospitals (non-critical access hospitals) clearly require that hospitals provide hospice-appropriate patients with a list of hospice providers available to the patient that participate in the Medicare program and the geographic area the patient requests.

The interpretive guidelines for critical access hospitals do not explicitly address the topic, but the requirement can be inferred from the other conditions of participation related to medical records, nursing, and swing beds that clearly indicate that critical access hospitals have a responsibility for

discharge planning. The context does not otherwise require critical access hospitals to operate under a different standard than set forth in the SSA for PPS hospitals so critical access hospitals historically have been advised and do maintain compliance with the requirement.

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QAPI Snapshot Survey Deadline Nears

The first quarter data submission period is more than half over. This survey is an essential component of your QAPI program. **Data submission deadline is May 5.**

To help you prepare your data for the online survey submission process, OCS has updated the [Data Definitions](#). This is a key resource to understand the details of each measure and how to prepare your data for the most efficient online survey submission.

To help your agency streamline data collection activities and ensure accuracy, OCS has developed a Data Organization Tool to use before you submit the survey. Simply download the tool to your desktop and start your data preparation. Access to the tool is available from the Survey page, to the right of the online survey link. After you complete your preparatory work using the tool, you're ready to proceed to the online survey.

To access the online survey, follow these simple steps:

1. Go to the OCS home page (<http://www.ocshomecare.com>).
2. Click on the "Client Login" link in the top right-hand corner of the page.
3. Click on the drop-down box in the middle of the page and select Hospice Connection.
4. At the [Hospice Connection User Login](#) prompt, enter your Agency ID and Password.
5. From the main Hospice Connection window, click on the Surveys tab.
6. Under the Surveys tab, click on the QAPI Snapshot surveys link. *For the short term, you may be prompted to re-enter your Agency ID and Password to access the surveys.*

Note: If you do not submit data, no report for this time period will be available.

Please add this handy [Outlook appointment reminder](#) to your calendar for timely data entry reminders.

If you have questions, please email client services at qapi@ocsys.com or call 866.641.8324.

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Training Makes Difficult Conversations Productive

A national study by VitalSmarts and the American Association of Critical-Care Nurses, "Silence Kills: The Seven Crucial Conversations for Health Care," discovered that holding an important – but difficult – conversation with a co-worker who takes shortcuts, makes a mistake or demonstrates dangerous incompetence can be so intimidating that nine out of 10 health care professionals remain silent. That's why these are called "crucial conversations."

On **June 15-16**, the Iowa Hospital Association (IHA) is offering, at a significantly reduced registration fee, "Crucial Conversations Training," which will teach skills that build relationships while allowing for candid discussions on even the toughest issues. Whether the concern is patient safety, quality care, productivity or declining moral – if it cannot openly and honestly be discussed, poor and even fatal results can be expected. The lack of core management skills can keep an organization from achieving the results it needs to succeed.

Drawing on 30 years of research, this award-winning course teaches best practices to transform the work environment so that health care professionals succeed as healers and patients can receive the best possible care.

For a detailed brochure and to register, [click here](#). HPCAI members are welcome to participate in the training and they can do so at the IHA member rate.

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Cahaba News and Education

Change to the “Claims Audit Trail Report” for Home Health and Hospice Providers

To confirm receipt of claims submitted electronically using the ANSI 837 format, Cahaba GBA provides you with a “Claims Audit Trail Report” in your mailbox/directory. Under the “Medicare A Claims” section of the report, a 14-digit “CLAIM-NBR” (e.g., 21007100649999) is assigned to each claim that is received and accepted by Cahaba GBA.

Once your claim is accepted, it is moved to the Fiscal Intermediary Standard System (FISS), at which time, the “CLAIM-NBR” is removed and FISS assigns the claim a different number; the document control number (DCN). Because the “CLAIM-NBR” provided on the “Claims Audit Trail Report” is of no use after claims move to FISS, effective April 20, 2010, the “CLAIM-NBR” will no longer display on the “Claims Audit Trail Report”.

Please note that with the implementation of the ANSI 5010 format, the current “Claims Audit Trail Report” will be replaced with a 277CA claim acknowledgement transaction that will include the DCN assigned by FISS.

If you have any questions please contact EDI Services at (866) 839-2441, or via e-mail at iaediservices@cahabagba.com.

Updated Cahaba Web pages

[Change Request 6698: Signature Guidelines for Medical Review Purposes](#)

Reminder: [Hospice Billing Changes Impacting April Claims](#)

The "[Beginner Hospice Billing](#)" online course at has been updated. To view a complete list of online courses available to home health and hospice providers, [click here](#).

The "[Fiscal Intermediary Standard System Claims Processing Issues](#)" Web page has been updated.

Upcoming educational events for hospice providers

For more information on Cahaba webinars, please visit the [Calendar of Educational Events](#).

Clinicians: Help Yourself with Self Service Technology

April 29, Noon – 1:30 p.m.

Registration Deadline: April 26

Learn the resources provided to guide clinicians in understanding the home health and hospice benefits, eligibility, coverage and documentation. Services and tools from the Centers for Medicare & Medicaid Services (CMS) and Cahaba will be demonstrated.

For more details and to register, [click here](#).

What Are The Top Hospice Questions to Cahaba: Lunch & Learn

May 25, Noon to 1:00 p.m.

Registration Deadline: May 20

This Webinar will identify the top questions Cahaba receives from hospice agencies. The focus will be on questions about submitting covered hospice services; therefore, clinical related questions will not be addressed. Self-service resources for resolving the top questions will be discussed.

For more details and to register, [click here](#).

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Hospice Organizational and Governance Issues

In an ongoing effort to bring current hospice legal and regulatory issues to the attention of members, HPCAI provides access to the work of hospice attorney Mary Michal through the *Reinhart Headlines in Hospice and Palliative Care*.

As a hospice grows and changes, the organization's corporate or limited liability company (LLC) structure should grow and change along with it. In addition, there are federal and state reporting requirements that a hospice must meet as changes occur within the organization.

To read this high-level overview of several items hospices should consider, please [click here](#).

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Education Opportunity

Hospice scrutiny is more intense than ever and getting worse every day. The best defense is making certain your hospice is in compliance with all hospice regulations and eligibility requirements. Weatherbee Resources is hosting a Hospice Regulatory Boot Camp followed by a post-Boot Camp workshop "Managing Hospice Scrutiny."

The Boot Camp will be held June 21 and 22 at the Omni Chicago Hotel. For more information and to register for the Boot Camp and post-Boot Camp workshop, [click here](#).

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HPCAI Calendar

- **May 11, 10 a.m.**
District 2
Muse Norris Inpatient Unit, Conference Room, Mason City
- **May 25, 10 a.m. - Noon**
HPCAI Education Committee
HPCAI Board Room, Des Moines
- **June 24**
Special Topics Conference
Des Moines
- **November 2 – 3**
HPCAI Fall Conference
Scherman Building, Iowa State Center, Ames

To add items to the HPCAI Calendar, send information to [Stacey Nay](#).

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