

**§418.112(b) Standard: Professional management.**

**The hospice must assume responsibility for professional management of the resident's hospice services provided, in accordance with the hospice plan of care and the hospice conditions of participation, and make any arrangements necessary for hospice-related inpatient care in a participating Medicare/Medicaid facility according to §418.100 and §418.108.**

**Interpretive Guidelines §418.112(b)**

The term “professional management” for a hospice patient who resides in a SNF/NF or ICF/IID has the same meaning that it has if the hospice patient were living in his/her own home. Professional management involves assessing, planning, monitoring, directing and evaluating the patient's/resident's hospice care across all settings.

Hospices must routinely provide substantially all core services directly by the hospice employee, and cannot delegate these services to the facility. Hospices should specify that facility staff should immediately notify the hospice when facility staff must perform hospice core services in place of hospice staff. The contract between the hospice and the

facility should address potential crisis-situations and temporary emergency measures and how facility staff should handle them.

Hospice is responsible for providing all hospice services including:

- Ongoing assessment, care planning, monitoring, coordination, and provision of care by the Hospice IDG.
- Assessment, coordination, and provision of any needed general inpatient or continuous care.
- Consultation about the patient's care with facility staff.
- Coordination by the hospice RN for the implementation of the plan of care for the patient.
- Provision of hospice aide services, if these services are determined necessary by the IDG to supplement the nurse aide services provided by the facility.
- Provision, in a timely manner, of all supplies, medications, and DME needed for the palliation and management of the terminal illness and related conditions.
- Financial management responsibility for all medical supplies, appliances, medications and biologicals related to the terminal illness and related conditions.
- Determination of the appropriate level of care to be given to the patient (routine homecare, inpatient, or continuous care).
- Arranging any necessary transfers from the facility, in consultation with the facility staff.