

CHAPTER 509 HOSPICE SERVICES

- Home health and homemaker services: must meet the specifications of [42 CFR §484.36](#), and must be provided under the supervision of an RN. Home health aides and homemaker service providers may provide personal care services and household services for safety and sanitation of the member, appropriate for the plan of care.
- Rehabilitation Services: include physical and occupational therapies and speech pathology used for symptom control or to maintain activities of daily living and functional skills. (In accordance with [West Virginia State Plan Appendix 3.1-C pages 2 & 3 on Hospice Services](#) and [42 CFR §418.202](#)).

When a hospice contracts or arranges for any service, the hospice must maintain professional, financial, and administrative responsibility for the services and must ensure that all staff members meet the regulatory qualification requirements.

509.1.5 Hospice Service Exceptions

Hospice services may be provided to children under age 21 concurrently with curative treatment. (In accordance with the [Affordable Care Act 2302 Concurrent Care for Children](#)).

509.1.6 Hospice Physician Services Staffing

The following functions may be performed by a physician designee including a physician employee, volunteer physician, or a contracted physician:

1. Hospice medical director services (must be a doctor of medicine (MD) or osteopathy (DO));
2. Physician services related to the palliation and management of the member's terminal illness and related conditions;
3. Care for general medical needs when the attending physician is not available (if the member has an attending physician); and
4. Physician participation in the IDT (must be a doctor of medicine (MD) or osteopathy (DO)).

The hospice or the physician member of the Interdisciplinary Team (IDT) may designate another physician or other physicians to be "on call" during the hours the IDT assigned physician is not on duty.

1. The on-call physician may assist with urgent, emergency or otherwise unscheduled plan of care revisions.
2. The hospice or the IDT assigned physician member of the IDT may not designate substitute physicians to routinely assist with initial plans of care and scheduled plan of care reviews and revisions.
3. When the "on call" physician provides a service to a member, it must be documented in that member's health record.

509.1.7 Hospice Volunteers

A hospice provider uses volunteers in defined roles and under the supervision of designated hospice employees. Volunteers may perform administrative functions or direct care services as outlined in the Federal Regulations. In the Hospice Program, "employee" also refers to a volunteer under the jurisdiction of the hospice. All use of volunteers must be in accordance with [42 CFR §418.78](#) and [§418.304 \(b\)](#).