

## **HOSPICE QUESTIONS AND ANSWERS**

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**QUESTION:** If we have a resident who is on hospice, are we allowed to call hospice instead of 9-1-1?

**ANSWER:** If certain specific conditions have been met, you can forego calling 9-1-1 and contact a resident's hospice agency instead. California Health and Safety Code §1569.73(c) states that an RCFE that has obtained a hospice waiver need not call emergency response services at the time of a life threatening emergency if the hospice agency is notified instead and if the following conditions are all met:

1. The resident is receiving hospice services from a licensed hospice agency;
2. The resident has completed an advance directive requesting to forego resuscitative measures; and
3. The RCFE has documented that its staff has received training from the hospice agency on the expected course of the resident's illness and the symptoms of impending death.

If the above requirements have not all been met, the RCFE must call 9-1-1 instead of hospice. It is therefore important to have in the resident's file

the appropriate documentation, including a copy of the advance directive and documentation of the training received from hospice.

In addition, if the resident develops a condition that would normally warrant calling 9-1-1 that is not part of the normal course of the resident's illness and a symptom of impending death, 9-1-1 must still be called. For example, if a person dying from cancer falls, suffers head trauma, and is hemorrhaging, 9-1-1 would need to be called as the head injury has nothing to do with why they are on hospice.

**QUESTION:** We were recently cited for retaining a hospice resident who our LPA determined needed "total care." Can we appeal this citation?

**ANSWER:** In all probability, you should appeal this citation. RCFEs that have a hospice waiver in place may retain a hospice resident even though that resident has a prohibited condition. Thus even if your LPA is correct and the resident in question depends on others to perform all activities of daily living for them as set forth in Regulation §87584, which would constitute a prohibited condition under Section 87701, there is a prohibited condition exception for hospice residents.

In accordance with a 1999 Memorandum from then Chief of the Policy Development Bureau, Carole Jacobi, "Residents receiving hospice care with health-related conditions prohibited in Section 87701 . . . will be allowed to remain in the facility provided that the facility is in compliance with the

hospice criteria set forth in Section 87124.1.” In addition, the Jacobi Memorandum states that the following conditions must also be met:

1. The prohibited condition must be hospice-related;
2. The residential care staff must have been trained in accordance with the hospice plan; and
3. The care for the prohibited condition is outlined in the hospice plan.

The Jacobi Memorandum contains an exception to the hospice exception and states that residents with naso-gastric

tubes, gastrostomy care, tracheotomies, and staph infection or other serious infections, including active communicable Tuberculosis, will not be permitted to reside in an RCFE regardless of the client’s hospice status.

In light of the above, you should not have been cited and should appeal the deficiency provided that the resident did not have one of the absolutely prohibited conditions noted above and provided that the resident’s need for assistance with all activities of daily living was related to his or her hospice status, and that your staff has been trained in accordance with the hospice plan which specifically addresses the care needs of this resident.