



# Hospice Medical Director Certification is Vital to your Organization

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**T**he need for enhanced physician involvement in **hospice care, compliance, and leadership** has been made abundantly clear by a variety of recent events. Are you doing everything that you can to demand and demonstrate the best from your physicians? If you are not yet supporting certification for your hospice medical directors and hospice physicians through the Hospice Medical Director Certification Board® (HMDCB), then you can do more for the health and well-being of your program!

Assessment of clinical knowledge and skills can be a formidable challenge in hospice and palliative medicine. Historically, many physicians have become hospice physicians after having their patients served by a local hospice. The advent of hospice and palliative medicine fellowship programs has brought more physicians to the field with formal clinical training. However, there will always be seasoned physicians who find that the experience of working with hospice leads to the desire to work more in the field of hospice and palliative

medicine. Understandably, it is not possible for most of these physicians to return to the life of physicians-in-training to achieve formal recognition of the expertise they develop. The **experiential pathway** towards Hospice Medical Director Certification gives your organization a way to assess and recognize the skills that these physicians bring to the care of your patients.

The role of the hospice physician in maintaining regulatory compliance has increased dramatically in the past few years. Since 2009, a **physician narrative** has been required to justify the six months or less prognosis necessary to certify and recertify patients' eligibility for coverage under the Medicare Hospice Benefit.<sup>1</sup> Anecdotally, it seems that most hospice programs have wisely opted to have their hospice physicians write these narratives (instead of community attendings). As of January 1, 2011, **face-to-face visits** have been required before certifying patient into third or later benefit periods of the Medicare Hospice Benefit.<sup>2</sup> And in 2014, the Centers for Medicare and Medicaid Services (CMS) proposed and adopted the rule that emphasized that **certifying hospice physicians must determine and document** the principal hospice diagnosis and the diagnoses related to the terminal condition for each certified patient.<sup>3</sup> These heightened regulatory requirements make it

necessary for hospices to invest in ongoing training and education for their medical staff; Hospice Medical Director Certification gives programs a recognized and objective measure of physician knowledge and application of these important regulatory demands.

Leadership extends beyond our organizations. Our communities are increasingly educated and desirous of the best end-of-life care possible. The Institute of Medicine released its report, *Dying in America*<sup>4</sup> and advocated that comprehensive care for those nearing the end-of-life be competently delivered by professionals with appropriate expertise and training. *Being Mortal*<sup>5</sup> by Atul Gawande engaged both medical and lay audiences as a best-seller that explores "medicine and what matters in the end."<sup>6</sup> And in 2015, CMS proposed that the two advance care planning codes established in FY2015 become "active," thereby allowing physicians to code and be reimbursed for advance care planning discussions with their patients.<sup>7,8</sup> Hospice Medical Director Certification gives your organization a meaningful measure of physician competence that differentiates you from competitors and increases your credibility in your community by demonstrating that you have the most skilled and experienced hospice and palliative medicine professionals. "In the current

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regulatory climate, having hospice physicians who are skilled and knowledgeable is more important than ever”, states Dave Fielding, President and CEO of TrustBridge in West Palm Beach, FL. “TrustBridge supports HMDCB certification and covers examination expenses for our HMDC-certified physicians.”

Hospice Medical Director Certification also gives your program a unique way to reward physicians who do more for your programs. You can enhance both accountability and reward by adding a premium to compensation for achievement of certification. Highlight your very high expectations and attract committed physicians by reimbursing them for the costs of obtaining and maintaining certification as well.

Your medical directors and hospice physicians need to bring their best to the clinical, regulatory, and leadership tasks that only they can perform for your organization. Your support for certification through the Hospice Medical Director Certification Board® allows you to assess the knowledge, skills,

and competence that your organization expects while highlighting the expertise that you deliver to patients, families, and communities.

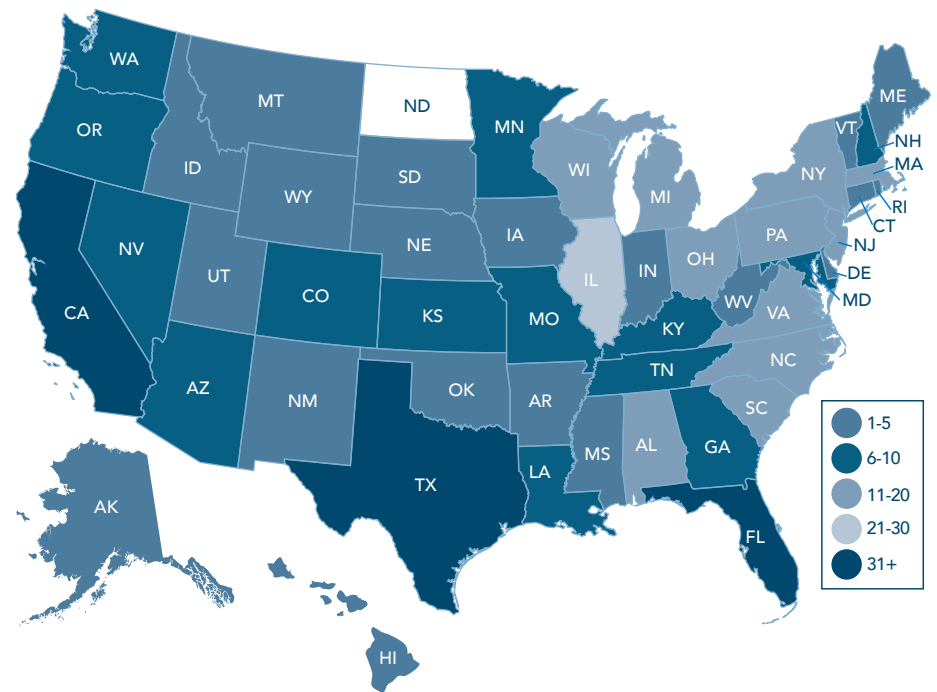
**For more information on HMDCB’s certification, visit [www.hmdcb.org](http://www.hmdcb.org) or call 847-375-6740.**

**Joan K. Harrold** is the Vice President/Medical Director for Hospice and Community Care, based in Lancaster, PA, as well as a representative on the NHPCO Board of Directors and

Relatedness Committee. She earned her HMDC® credential from HMDCB in 2015, is also board certified in internal medicine and hospice and palliative medicine, and is a Fellow of the American Academy of Hospice and Palliative Medicine. Dr. Harrold presents frequently at state and national conferences.

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**More than 500 physicians from 49 states became Hospice Medical Director Certified® (HMDC®) in the first two years. Are yours among them?**



1. “Medicare Program; Hospice Wage Index for Fiscal Year 2010,” 74 *Federal Register* 150 (6 August 2009), pp.39398-400.  
 2. <http://www.gpo.gov/fdsys/pkg/CFR-2011-title42-vol3/pdf/CFR-2011-title42-vol3-part418-subpartB.pdf>. Accessed September 21, 2015.  
 3. “Medicare Program; FY 2014 Hospice Wage Index and Payment Rate Update; Hospice Quality Reporting Requirements; and Updates on Payment Reform,” 78 *Federal Register* 152 (7 August 2013), pp.48236-7, 48240, 48243, 48251.

4. Institute of Medicine, 2014, *Dying in America: Improving quality and honoring individual preferences near the end of life*, Washington, DC, The National Academies Press.  
 5. Gawande, A., 2014, *Being Mortal*, Metropolitan Books/Henry Holt & Company, New York.  
 6. <http://www.beingmortal.net>. Accessed September 21, 2015.

7. “Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2016,” 80 *Federal Register* 135 (15 July 2015), p.41773.  
 8. <http://www.nhpco.org/press-room/press-releases/proposed-rule-would-reimburse-physicians-acp-0>. Accessed September 21, 2015.