



National Association for Home Care & Hospice/Hospice Association of America

SAMPLE Part D and Hospice Admission Notice

7/24/2014

As stated elsewhere in the _____ Hospice Admission Packet, Medicare requires that _____ Hospice provide you with all medications and other treatments necessary for the palliation and management of symptoms related to your principal hospice diagnosis and related conditions. Medicare also requires that _____ Hospice arrange for and provide you these necessary medications.

As part of this process, _____ Hospice will review all your medications to determine if they should be covered by _____ Hospice under your Medicare hospice benefit, by a Medicare Part D plan, or by you, the beneficiary. This is part of the Medicare Part D Prior Authorization (PA) process. As explained during the admission process, _____ Hospice is responsible for providing and paying for all medications that are related to your principal hospice diagnosis and any related conditions and that are reasonable and necessary for treating this diagnosis and any related conditions. Any medications that are unrelated to this diagnosis and related conditions are paid for under Medicare Part D if you are a Medicare Part D enrollee, through other insurance coverage you have or out-of-pocket by you. If there are medications that are related to the principal hospice diagnosis or any related conditions but are not reasonable and necessary for treating this diagnosis or any related conditions, CMS requires that you, the beneficiary, pay for the medication. You may use non-Medicare insurance to cover the drug if you have this type of coverage.

The hospice physician, with input from your attending physician (if any), and the hospice team determines if a medication is related to the principal diagnosis and related conditions as well as if the medication is reasonable and necessary in your

hospice plan of care. If the hospice physician determines that the medication is related and reasonable and necessary, _____ Hospice will provide and pay for this medication in reasonable fill amounts.

Should you choose to continue or begin taking a medication that is determined to be related to the principal diagnosis and related conditions but not reasonable and necessary in your hospice plan of care, Medicare prohibits _____ Hospice and your Medicare Part D plan from paying for this medication. In these cases, Medicare requires you, the beneficiary, to pay for the medication. This is also the case if there is a medication you would like to take that is not part of the _____ Hospice formulary. For an off-formulary medication to be covered by _____ Hospice under your Medicare hospice benefit, there must be a clinical reason why you cannot take the equivalent medication that is on the _____ Hospice formulary. If there is no such clinical reason, you will need to pay for the medication out-of-pocket.

The PA process determines payment responsibility for the medication so we encourage you to initiate this process if the pharmacy notifies you that it has not/is not planning to get the information necessary to determine payment responsibility from the person who prescribed the medication (the prescriber) or _____ Hospice. You can initiate this process by telling your pharmacy that you are requesting a PA for the medication. We ask that you also contact _____ Hospice at _____ to notify us you have initiated the PA. We may pay for the first fill of the medications in question. In addition, we can help speed up the decision by providing the Part D plan with information, but also suggest that you tell the pharmacy that you are requesting an expedited review. With an expedited review, a payment decision is usually made within 24 hours. If you feel that Medicare Part D should be paying for a medication that it is not covering, you have the right to appeal this decision to Medicare. Information on how to make an appeal can be provided by your pharmacy and/or Part D plan.