L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)	
[ Subpart A ] - §418.	ubpart A ] - §418.3 Definitions		
	Attending Physician	7	
	Bereavement Counseling	7	
	Cap Period	7	
	Clinical note	7	
	Comprehensive assessment	7	
	Dietary Counseling	7-8	
	Employee	8	
	Hospice	8	
	Hospice Care	8	
	Initial Assessment	8	
	Licensed Professional	8	
	Multiple Location	8	
	Palliative Care	8-9	
	Physician	9	
	Physician designee	9	
	Representative	9	
	Restraint	9-10	
	Seculsion	10	
	Terminally ill	10	

[Subpart B ] Eligibility, Election and Duration of Benefits		
§418.20 Eligibility Requirements	10	
§418.21 Duration of Hospice Care Coverage Election Periods	10	
§418.22 Certification of Terminal Illness	10-14	
§418.24 Election of Hospice Care	14-19	
§418.25 Admission to Hospice Care	19	
§418.26 Discharge from Hospice Care	19-21	
§418.28 Revoking the Election of Hospice Care	21-22	
§418.30 Change of the Designated Hospice	22	

L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)
	Conditions of Participation: Patient Care Organizational Environment	
[Subpart C ] Patient	Care	
L500	§418.52 Condition of Participation: Patient's rights	22
L501 -504	(a) Standard: Notice of rights and responsibilities.	22-26
L505 – L511	(b) Standard: Exercise of rights and respect for property and person.	26-29
L512 – L519	(c) Standard: Rights of the patient.	29-32
L520	§418.54 Condition of Participation: Initial and comprehensive assessment of the patient	32
L521	Paragraph 1 of §418.54	32
L522	(a) Standard: Initial assessment.	32-33
L523	(b) Standard: Timeframe for completion of the comprehensive assessment.	33
L524 – L532	(c) Standard: Content of the comprehensive assessment.	33-37
L533	(d) Standard: Update of the comprehensive assessment.	37-38
L534 – L535	(e) Standard: Patient outcome measures.	38
L536	§418.56 Condition of Participation: Interdisciplinary group, care planning, and coordination of service.	38
L537 – L538	Paragraph 1 of §418.56	38-39
L539 – L542	(a) Standard: Approach to service delivery.	39-40
L543 – L544	(b) Standard: Plan of care.	40-41
L545 – L551	(c) Standard: Content of the plan of care.	41-44
L552 – L553	(d) Standard: Review of the plan of care.	44
L554 – L558	(e) Standard: Coordination of services.	45
L559	§418.58 Condition of Participation: Quality assessment and performance improvement.	45
L560	Paragraph 1 of §418.58	45-48
L561 – L562	(a) Standard: Program scope.	48
L563 – L565	(b) Standard: Program data.	48-49
L566 – L570	(c) Standard: Program activities.	49-50
L571 – L573	(d) Standard: Performance improvement projects.	50-51
L574 – L576	(e) Standard: Executive responsibilities.	51
L577	§418.60 Condition of Participation: Infection Control	51
L578	Paragraph 1 of §418.60	51-52
L579	(a) Standard: Prevention.	52-53

L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)
L580 – L581	(b) Standard: Control.	53-54
L582	(c) Standard: Education.	54
L583 – L586	§418.62 Condition of Participation: Licensed Professional Services	54
L587	§418.64 Condition of Participation: Core Services	54
L588 – L589	Paragraph 1 of §418.64	54-55
L590	(a) Standard: Physician services.	55-56
L591 – L593	(b) Standard: Nursing services.	56
L594	(c) Standard: Medical social services.	56-57
L595 – L598	(d) Standard: Counseling services.	57-59
L599 – L600	§418.66 Condition of Participation: Nursing Services – Waiver of requirement that substantially all nursing services be routinely provided directly by a hospice.	59-60
L601 – L602	Non-Core Services §418.70 Condition of Participation: Furnishing of Non-Core Services	60
L603 – L604	§418.72 Condition of Participation: Physical Therapy, Occupational Therapy, and Speech-Language Pathology	60
L-605 – L606	§418.74 Condition of Participation: Waiver of Requirement – Physical Therapy, Occupational Therapy, Speech-Language Pathology, and Dietary Counseling	60-62
L607	§418.76 Condition of Participation: Hospice Aide and Homemaker Services	62
L608	Paragraph 1 of §418.76	62
L609 – L610	(a) Standard: Hospice aide qualifications.	62
L611 – L614	(b) Standard: Content and duration of hospice aide classroom and supervised practical training.	62-64
L615 – L619	(c) Standard: Competency evaluation.	64-65
L620 – L622	(d) Standard: In-service training.	65-66
L623	(e) Standard: Qualifications for instructors conducting classroom and supervised practical training.	66
L624	(f) Standard: Eligible competency evaluation organizations.	66-67
L625 – L628	(g) Standard: Hospice aide assignments and duties.	67-68
L629 – L633	(h) Standard: Supervision of hospice aides.	68-69
L634 – L636	(i) Standard: Individuals furnishing Medicaid personal care aide-only services under a Medicaid personal care benefit.	69-70
L637	(j) Standard: Homemaker qualifications.	70
L638 – L640	(k) Standard: Homemaker supervision and duties.	70-71
L641	§418.78 Condition of Participation: Volunteers	71
L642	Paragraph 1 of §418.78	71
L643	(a) Standard: Training.	71
L644	(b) Standard: Role.	72
L645	(c) Standard: Recruiting and retaining.	72

L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)
L646	(d) Standard: Cost saving.	72
L647	(e) Standard: Level of activity.	72-73
[Subpart D ] Organi	zational Environment	
L648	§418.100 Condition of Participation: Organization and Administration of Services	73
L649	Paragraph 1 of §418.100	73
L650	(a) Standard: Serving the hospice patient and family.	73
L651	(b) Standard: Governing body and administrator.	73
L652 – L653	(c) Standard: Services.	74
L654	(d) Standard: Continuation of care.	74
L655	(e) Standard: Professional management responsibility.	74-75
L656 – L660	(f) Standard: Hospice multiple locations.	75-77
L661 – L663	(g) Standard: Training.	77-78
L664	§418.102 Condition of Participation: Medical Director	78
L665	Paragraph 1 of §418.102	77-78
L666	(a) Standard: Medical director contract.	78
L667	(b) Standard: Initial certification of terminal illness.	78
L668	(c) Standard: Recertification of the terminal illness.	78
L669	(d) Standard: Medical director responsibility.	79
L670	§418.104 Condition of Participation: Clinical Records	79
L671	Paragraph 1 of §418.104	79
L672 – L678	(a) Standard: Content.	79
L679	(b) Standard: Authentication.	79-80
L680	(c) Standard: Protection of information.	81
L681	(d) Standard: Retention of records.	81
L682 – L684	(e) Standard: Discharge or transfer of care.	81-82
L685	(f) Standard: Retrieval of clinical records.	82
L686	§418.106 Condition of Participation: Drugs and Biologicals, Medical Supplies, and Durable Medical Equipment	82
L687	Paragraph 1 of §418.106	82
L688 – L689	(a) Standard: Managing drugs and biologicals.	82
L690	(b) Standard: Ordering of drugs.	83
L691	(c) Standard: Dispensing of drugs and biologicals.	83
L692	(d) Standard: Administration of drugs and biologicals.	83-84
L693 – L700	(e) Standard: Labeling, disposing, and storing of drugs and biologicals.	84-85
L701 – L703	(f) Standard: Use and maintenance of equipment and supplies.	85-86

L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)
L704	§418.108 Condition of Participation: Short-Term Inpatient Care	86
L705	Paragraph 1 of §418.108	86
L706 – L707	(a) Standard: Inpatient care for symptom management and pain control.	86
L708 - 710	(b) Standard: Inpatient care for respite purposes.	86
L711 – L716	(c) Standard: Inpatient care provided under arrangements.	86-87
L717	(d) Standard: Inpatient care limitation.	87
L718	(e) Standard: Exemption from limitation.	87-88
L719	§418.110 Condition of Participation: Hospices That Provide Inpatient Care Directly	88
L720	Paragraph 1 of §418.110	88
L721	(a) Standard: Staffing.	88
L722 – L723	(b) Standard: Twenty-four hour nursing services.	89
L724 – L727	(c) Standard: Physical environment.	89-91
L728	(d) Standard: Fire protection.	91-93
L729	(e) Standard: Patient areas.	93
L730	(f) Standard: Patient rooms.	93-94
L731	(g) Standard: Toilet and bathing facilities.	94
L732	(h) Standard: Plumbing facilities.	94-95
L733	(i) Standard: Infection control.	95-97
L734	(j) Standard: Sanitary environment.	97
L735	(k) Standard: Linen.	98
L736	(I) Standard: Meal service and menu planning.	98-99
L737 – L752	(m) Standard: Restraint or seclusion.	99-102
L753 – L757	(n) Standard: Restraint or seclusion staff training requirements.	102-104
L758	(o) Standard: Death reporting requirements.	104-105
L759	§418.112 Condition of Participation: Hospices That Provide Hospice Care To Residents of a SNF/NF or ICF/MR	105
L760	Paragraph 1 of §418.112	105
L761	(a) Standard: Resident eligibility, election, and duration of benefits.	105
L762	(b) Standard: Professional management.	105-106
L763 – L772	(c) Standard: Written agreement.	106-109
L773 – L776	(d) Standard: Hospice plan of care.	109-111
L777 – L781	(e) Standard: Coordination of services.	111-115
L782	(f) Standard: Orientation and training of staff.	115
L783	§418.114 Condition of Participation: Personnel Qualifications	116
L784	(a) General qualification requirements.	116

L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)
L785	(b) Personnel qualifications for certain disciplines. (1) Physician.	116
L786	(2) Hospice aide.	116
L787	(3) Social worker.	116-117
L788	(4) Speech language pathologist.	117
L789	(5) Occupational therapist.	117-120
L790	(6) Occupational therapy assistant.	120-121
L791	(7) Physical therapist.	121-124
L792	(8) Physical therapist assistant.	124-125
L793 - 794	(c) Personnel qualifications when no State licensing, certification or registration requirements exist.	125
L795 - L796	(d) Standard: Criminal background checks.	125
L797	§418.116 Condition of Participation: Compliance with Federal, State, and Local Laws and Regulations Related to the Health and Safety of Patients	125
L798	Paragraph 1 of §418.116	125
L799	(a) Standard: Multiple locations.	125
L800 – L801	(b) Standard: Laboratory services.	125-127
	§ 418.200 Requirements for Coverage	127
	§ 418,200 Requirements for Coverage	127
	§ 418.202 Covered Services	127-129
	§ 418.204 Special Coverage Requirements (removed (d) August 2, 2023)	129-130
	§ 418.205 Special requirements for hospice pre-election evaluation and counseling services	130-131
[SubPart G] Pay	ment for Hospice Care	
	§ 418.301Basic Rules	131-132
	§ 418.302 Payment Procedures for Hospice Care	132-136
	§ 418.304 Payment for physicians, nurse practitioners, and physician assistant services	136-138
	§ 418.306 Annual update of the payment rates and adjustments for area wage differences	······
	g +10.000 Annual apacte of the payment rates and adjustments for area wage differences	138-139
	§ 418.307 Period Interim Payments	138-139 139-140
	: , ,	···············
	§ 418.307 Period Interim Payments	139-140
	§ 418.307 Period Interim Payments § 418.308 Limitation on amount of hospice payments	139-140 140
	§ 418.307 Period Interim Payments § 418.308 Limitation on amount of hospice payments § 418.309 Hospice aggregate cap (Updated August 2, 2023)	139-140 140 141-144
	§ 418.307 Period Interim Payments § 418.308 Limitation on amount of hospice payments § 418.309 Hospice aggregate cap (Updated August 2, 2023) § 418.310 Reporting and Record Keeping requirements	139-140 140 141-144 144

L-Tag Numbers	Medicare Hospice Conditions of Participation & Interpretive Guidelines	Page No.(s)
	(b) Submission of Hospice Quality Reporting Program Data	145
	(c) Receipt of CMS certification number before November 1	146
	(d) Contracts with CMS approved vendors for CAHPS	146
	(e) Exemption from CAHPS survey	146
	(f) Vendor requirement for CMS approved CAHPS Surveys	146
	(g) Vendor exclusions for CAHPS Survey	146
	(h) Reconsiderations and appeals of Hospice Quality Reporting Program decisions	146-147
	(i) Exemptions and extensions requirements	147-148
	(j) Data completion thresholds (New August 2, 2023)	148
[SubPart H] COINSUR	ANCE	<u>.</u>
	§ 418.400 Individual liability for coinsurance for hospice care	148-149
	§ 418.402 Individual liability for services that are not considered hospice care	149-150
	§ 418.405 Effect of coinsurance liability on Medicare Payment	150
[SubPart P] REQUIRE	MENTS FOR ESTABLISHING AND MAINTAINING MEDICARE BILLING PRIVELEGES	i
	§424.507 Ordering Covered items and services for Medicare beneficiaries (Revised August 2, 2023)	150-154