

## Responding to a Hospice Additional Documentation Request (ADR)

This is provided as a reminder of what to include when responding to an ADR.

Valid, signed notice of election  Name of hospice providing care  Understanding that the other Part A benefits for the terminal illness are waived  Understanding of the palliative nature of hospice  Effective date of election  Signature
<ul> <li>Physician's certification to cover the dates of services billed:</li> <li>If more than one certification covers the dates of service in question submit all certifications for the dates of service billed.</li> <li>Prognosis statement</li> <li>If certification is a multipage document, number the pages (Example: Page 1 of 3)</li> <li>Physician narrative/face to face documentation/attestation</li> <li>If the narrative is a dictated addendum, include physician signature and date on that page</li> </ul>
Plan of care that covers the dates of service billed
If the beneficiary has expired, submit information regarding date and cause of death
If General Inpatient Care is provided:  Submit the signed and dated physician's orders/updated plan of care Include discharge summary
If Continuous Care is billed:  ☐ Submit notes for all hours that care is rendered ☐ Include when Continuous Care began and ended
Documentation to support coverage  ☐ Submit documentation to support the Local Coverage Determinations (LCDs) ☐ Include documentation showing structural/functional impairments to support terminality ☐ Document all pertinent diagnoses that relate to the patient's terminal condition and hospice appropriateness ☐ Submit documentation related to comorbidities or change in the patient's medical condition ☐ Submit ABN (Advance Beneficiary Notice) if applicable