PATIENT NOTIFICATION OF HOSPICE NON-COVERED ITEMS, SERVICES, AND DRUGS

-6

Hospice Agency Name:_

Purpose of Issuing this Notification

The purpose of this addendum is to notify in writing, upon request, any items, services, or drugs not covered by the hospice because the hospice has determined they are unrelated to your terminal illness and related conditions. If you request this notification within the first five days of your care, the hospice must provide you this form within 5 days. If you request this form at any point after the fifth day of hospice care, the hospice must provide you this form within 3 days.

Date Furnished:

Diagnoses Related to Terminal Illness and Related Conditions	
1	
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3	/
4	
5.	
6	
Non Covered Items, Services, and Drugs, Determined by Hennies to be Uprelated to	Vour
Non-Covered Items, Services, and Drugs Determined by Hospice to be Unrelated to Terminal Illness and Related Conditions:	rour
ITEMS/SERVICES/DRUGS REASON FOR NON-COVERAGE & REFEREN	ICES
PATIENT NAME – Last, First, Middle Initial MEDICAL RECORD # MEDICARE #	

PATIENT NOTIFICATION OF HOSPICE NON-COVERED ITEMS, SERVICES, AND DRUGS

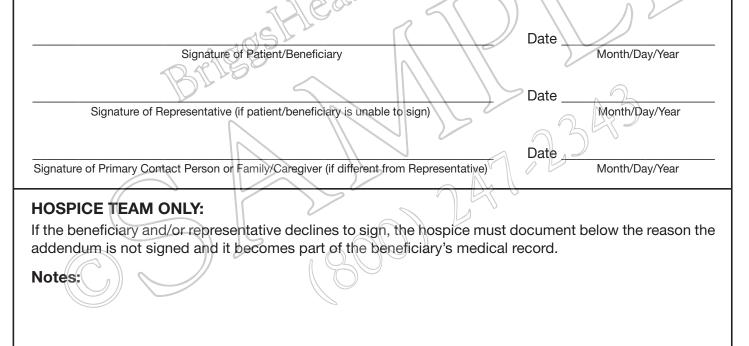
Note: Our hospice team makes the decision as to whether or not conditions, items, services, and drugs are related for each patient. As the patient or representative, you should share this list of clinical explanation with other healthcare providers from which you seek items, services, or drugs, unrelated to your terminal illness and related conditions to assist in making treatment decisions. We will provide you reasons for non-coverage in language that you (or your representative) understand. If this list changes over the course of your care, our team will keep this form updated.

Right to Immediate Advocacy

As a Medicare beneficiary, you have the right to contact the Medicare Beneficiary and Family Centered Care-Quality Improvement Organization (BFCC-QIO) to request Immediate Advocacy if you (or your representative) disagree with the decision of the hospice agency on items not covered because the hospice has determined they are unrelated to your terminal illness and related conditions. This is your right to ask for a "second opinion".

Please visit this website to find the BFCC-QIO for your area: https://qioprogram.org/locate-your-qio or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

Signing this notification (or its updates) is only acknowledgement of receipt of this notification (or its updates) and does not constitute your agreement with the hospice's determinations.



HOSPICE RETAINS ORIGINAL.

Copies have been provided to: Patient Patient Representative Physician Other:_