The Role of the Physician Assistant in Hospice

While § 51006 of the Bipartisan Budget Act of 2018 modified the Social Security Act to allow Physician Assistants (PAs) to serve as attending physicians for hospice patients, the Hospice Conditions of Participation restrict functions that the PA can perform.

The Hospice Conditions of Participation (CoPs) do NOT allow Physician Assistants to:

- Certify/recertify hospice patients
- Perform the face-to-face encounter
- Fulfill the role of the hospice physician on the Interdisciplinary Group (IDG)
- Fulfill the role of medical director
- Prescribe medications for hospice patients

Only an approved physician (as defined by Section 1861(r)(1) of the Social Security Act), or a nurse practitioner in accordance with the plan of care and State law, may order drugs for the patient (418.106(b)(1)).

In situations when medications are ordered, the hospice needs to ensure that the order was given by a physician or nurse practitioner and not by a PA.

A physician is defined as a:

- A doctor of medicine or osteopathy
- A doctor of dental surgery or of dental medicine
- A doctor of podiatric medicine
- A doctor of optometry
- A chiropractor

All must be legally authorized to practice by the State in which medicine is performed.

1861(r)(1) of the Social Security Act
The Role of the Nurse Practitioner in Hospice

In hospice, a nurse practitioner (NP) is able to serve as the attending physician, order medications, and perform the face-to-face encounter.

A NP is NOT able to perform the following functions:

- Certify/recertify hospice patients
- Fulfill the role of the hospice physician on the Interdisciplinary Group (IDG)
- Fulfill the role of medical director

Hospice Face-to-Face Encounter

In order for the NP to complete the face-to-face encounter in hospice, there must be an employment relationship between the NP and the hospice. A contract NP is not able to perform the Face-to-Face Encounter. Nor is a PA able to complete the hospice face-to-face encounter.

Role of the Nurse Practitioner and Physician Assistant in Home Care

Both the NP and the PA are prohibited from certifying and ordering any home health services for Medicare beneficiaries. CMS requires that all home health services are provided under a plan of care established and approved by a physician (as defined by Section 1861(r)(1) of the Social Security Act). This is the case even if State law is less restrictive and allows treatments and medications to be ordered by NPs and PAs for all types of patients including home health patients.

Remember: When Federal regulations differ from State laws, home health and hospice providers must follow the MOST restrictive regulations.
Home Health Face-to-Face Encounter

As part of the certification of patient eligibility for the Medicare home health benefit, a face-to-face encounter with the patient must be performed by the certifying physician, a physician that cared for the patient in the acute or post-acute care facility from which the patient was directly admitted to home health, or an allowed non-physician practitioner (NPP).

NPPs that can perform the Face-to-Face Encounter include:

- A nurse practitioner
- Clinical nurse specialist
- A certified nurse midwife
- A physician assistant

The NPP must work in accordance with State law and in collaboration with the certifying physician or in collaboration with an acute or post-acute care physician who cared for the patient in the acute or post-acute care facility from which the patient was directly admitted to home health.

For home care, the NPP must not have a financial relationship with the home health agency. Financial relationships include:

- A direct or indirect ownership or investment interest
- A direct or indirect compensation arrangement, including employment or a contractual relationship

42 CFR § 411.354 - Financial relationship, compensation, and ownership or investment interest