**ASK ALECC Topic: Live Discharges**

July 11, 2024

Yesterday I taught my Live Discharges and Preventing Burdensome Transitions. It was both a lively and engaging group, one of my favorite dynamics when teaching!

I decided in this newsletter of ASK ALECC to address some FAQ’s related to Live Discharges that I often get asked when working with Hospice Agencies.

First, did you know the two biggest reasons for live discharges?

* Revocations
* Medically Ineligible

Often I am asked by agencies questions around revocations which falls under the category of a patient choice for Hospice Discharge. This type of live discharge frequently occurs when patients have an event and head to the ER versus calling the Hospice to handle a situation. Unfortunately, this can be a result of agencies not laying down good groundwork on making sure that patient/family/cg understand to please call hospice first! I frequently get asked about the regulations surrounding a revocation. This is a patient/family driven, not hospice driven. Paperwork must be signed by the patient/family revoking hospice and not back dated either!

Revoking hospice can occur for many reasons. Often patients and/or family members really do not have a true understanding of the hospice benefit, what it covers, what it does not and if your agency has a high rate of revocations, it is time to take a look at your admission practices.

As it relates to medically ineligible live discharges. This is a hospice driven live discharge and per CMS, does not happen on a dime. Hospice agencies are expected to have a discharge process in place that they implement for a safe and stable discharge. If a discharge follows a process to produce a safe and stable discharge, your agency will avoid a burdensome transition and poor scores in this area. I often get asked, how do we not document “no change”. Your documentation and discussions in IDG begin to reflect no changes based on assessments related to using your LCD’s, but never use the words “no change”. Once the IDG “team” has determined that the patient has stabilized and no longer meets the hospice criteria for eligibility, it is time to prepare for a discharge.

I always remind agencies this is a great way to use volunteers checking up on discharges making sure all equipment ordered is working, any services ordered is in place and just checking in. Someday and most likely in the not-too-distant future that patient will need to be back with service, so keep in touch!

If you need any help with understanding Live Discharges, the process for all 5 categories or need improvement in your scores related to [Burdensome Transitions](https://hospice.eewebinarnetwork.com/live-discharges-how-when-why-part-2-eligibility-documentation-planning-the-care-continuum), check out my webinar on HHWN. Your agencies will continue to be measured on Quality folks. And stay tuned as we continue to roll out all of our latest new products and ways to connect and keep you informed.

We appreciate you and enjoy helping you optimize your agencies!!