








Tool

Compliance Updates after End of PHE

The PHE has ended!
This tool will assist your agency in ensuring you are on track for full compliance going forward.

Compliance Date	Topic	Waiver Flexibility During PHE	Standard Compliance
	Volunteer 5% Hours	<i>The hospice's volunteer program does not need to provide 5% of the total patient care hours.</i>	Demonstrate active volunteer utilization in a manner that will achieve an aggregate of 5% of total patient care hours for the 12-month period
	Non-core services	<i>The non-core services, such as PT, OT, SLP during the PHE, may be waived</i>	Must provide – or demonstrate ability to provide – therapy services if patient has need and included in POC
	Comprehensive assessment	<i>The comprehensive assessment may be completed every 21 days, instead of every 15 days and as needed</i>	The comprehensive assessment must be updated at least every 15 days or more frequently, if needed
	Supervisory visit	<i>The supervisory visits by RN for aide services, may be provided by telehealth, or waived</i>	Documentation of RN supervision of HHA every 14 days which includes in-person visit by the RN, aide does not have to be present
	QAPI	<i>Focus QAPI efforts on infection control and adverse events during the PHE</i>	Return to prior level of QAPI program function as comprehensive performance improvement tool
	Annual on-site eval of aide	<i>Annual on-site evaluation by a nurse/qualified practitioner for the aide may be waived.</i>	Annual skills evaluation and observation must be completed by the RN or other qualified practitioner in person
	Aide education of 12 hours per year	<i>Home Health Aides 12 hours of annual education in a 12-month period may be waived</i>	HHAs must have evidence of 12 hours of education for each 12-month period as defined by the organization
	Annual competency	<i>Annual training and competency and skills evaluation may be waived</i>	All clinical team members complete required annual training and/ or competency evaluations
	Face to face and telehealth	<i>Waiver allowing use of telehealth technology for face to face visits by hospice physicians and NPs sustained through end of 2024 by Consolidated Appropriations Act 2022</i>	Face to face visits must return to in-person visits by the hospice physicians and NPs
	Pseudo-patient	<i>Permit the use of a pseudo-patient for assessing the skills competency of hospice aides at the time of employment and for ongoing competency checks</i>	The use of pseudo-patients for competency checks has been made a permanent allowance in the COPs. A pseudo-patient is a person with specific training or use of a computer-based mannequin.

