

## HOSPICE GENERAL INPATIENT CARE (GIP)

### What is GIP?

The Hospice Conditions of Participation state that GIP may be used for pain control or other acute symptom management that cannot feasibly be provided in another setting. GIP is initiated when efforts to manage a hospice patient's symptoms in other settings are ineffective. GIP is intended as a **short-term** intervention to be used in a time of crisis. The Hospice patient will be evaluated by the Hospice Nurse every 24 hours to determine continued eligibility for GIP.

*A General Inpatient care day is a day in which a patient receives general inpatient care in an inpatient facility for pain control or acute or chronic symptom management which cannot be managed in other settings. (CMS, Subpart G – Payment for Hospice Care, Updated 2023)*

### When is GIP the right level of Hospice care?

GIP is the right level of care when the Hospice Interdisciplinary Team, in collaboration with the Skilled Nursing Facility Team, determines that the Hospice patient's symptoms cannot be managed at a routine level of care and require frequent skilled interventions and monitoring. It is expected that pain and other symptoms may be resolved within 24 to 48 hours with appropriate interventions.

Examples include:

- ✓ Pain crisis not managed by changes in current treatment that require frequent medication adjustments and monitoring.
- ✓ Intractable nausea/vomiting.
- ✓ Unmanageable respiratory distress.
- ✓ Delirium with behavioral issues, including terminal agitation.
- ✓ Complicated technical delivery of medication.
- ✓ Multiple open wounds requiring frequent skilled care.

### When is GIP not the right level of Hospice care?

- It is not intended to provide caregiver relief. If the caregiver is not willing or able to manage the patient in the home, other arrangements should be made.
- It is not intended as a way to address unsafe living conditions in the patient's home.
- It is not an automatic level of care when the patient is actively dying.
- It is not a way to manage staffing concerns.
- The patient must have a GIP benefit in their insurance plan.

### How is GIP documented?

Documentation during GIP level of care must be thorough and reflect the need and intensity of care. When placing a patient on the GIP level of care the documentation should include the following:

- A precipitating event (onset of uncontrolled symptoms or pain)
- Interventions that have been tried prior to initiating GIP
- A plan of care that reflects specific interventions planned to manage the patients out of control symptom (the hospice nurse will create this plan of care)

## Where is GIP provided?

GIP must be provided in a participating Medicare certified facility with a Registered Nurse available 24 hours a day who provides direct patient care.

## Who pays for GIP?

GIP is a covered service as a Medicare Hospice Benefit. The hospice will reimburse the Acute Care Hospital or Skilled Nursing Facility based on a contracted daily rate. Medi-Cal also covers GIP with the same requirements as Medicare. Private insurance coverage varies and must be verified on a case-by-case basis.

## How does the SNF refer a patient for Hospice GIP?

### **New Hospice Patient (patient in SNF is not currently receiving Hospice services)**

- Physician order obtained for Hospice/GIP evaluation.
- SNF calls Hospice Agency. *(Call Hospice asap to ensure assessment and family contact is done quickly.)*
- The Hospice Agency will provide an in-person assessment and evaluation to determine if the patient qualifies for Hospice and General Inpatient level of care in consultation with the hospice team and attending physician.

### **Existing Hospice Patient (patient in SNF is already receiving Hospice services at a routine level of care)**

- SNF calls Hospice Agency. *(Call Hospice asap to ensure assessment and family contact is done quickly.)*
- The Hospice Agency will provide an in-person assessment and evaluation to determine if the patient qualifies for Hospice and General Inpatient level of care in consultation with the hospice team and attending physician.

## Summary...

- ✓ GIP is intended as a short term level of care.
- ✓ After the initial admission to Hospice GIP level of care, the patient will be re-evaluated by the Hospice nurse daily to determine appropriateness for continued GIP level of care.
- ✓ The patient on GIP requires frequent skilled intervention including hands on care and assessment by a Registered Nurse.
- ✓ Frequent custodial care needs or caregiver breakdown are not accepted by Medicare/Medi-Cal for the GIP level of care.
- ✓ A patient who is actively dying does not necessarily qualify for the GIP level of care, unless symptoms are out of control.
- ✓ Hospice maintains the professional management of the GIP patient and the Hospice Interdisciplinary Team determines initial and ongoing eligibility.