



## The Hospice Special Focus Program Identifies Providers Not Meeting Care Standards

[The Hospice Special Focus Program](#) (SFP), designed by the Centers for Medicare and Medicaid Services (CMS) and included in the [Calendar Year 2024 Home Health Perspective Payment System Final Rule \(88 FR 77676\)](#), has been implemented to improve the quality of patient care by identifying hospices that do not meet SFP quality of care standards. The ramifications for hospices selected for the program are substantial and it is essential to understand the impact of SFP selection.

### Public Reporting

Selected hospices will be listed publicly on the SFP website. This list will be updated annually and include hospices identified as the poorest performers based on the SFP algorithm and status updates for the selected organizations. The list will detail hospice organizations currently in the program, those who have successfully completed the program and ones who have been terminated from the Medicare program.

### Increased Oversight

Hospices in the program will be surveyed every six months. Each survey may result in new or compounded progressive enforcement remedies related to any issues identified during the survey.

[Progressive enforcement remedies](#) include:

- Civil monetary penalties
- Suspension of payment for all new admissions
- Temporary management of the hospice
- Directed plan of correction
- Directed in-service training



### Termination From Medicare

The hospice Conditions of Participation (CoPs) includes standards that outline compliance. Failure to comply with most or all of the CoPs standards is classified as a condition level deficiency. Hospices will be considered for Medicare termination when a condition level deficiency reoccurs while the hospice is participating in the SFP. Termination from the Medicare program will result in termination of Medicaid and most insurance contracts, effectively closing the hospice.

The introduction of the SFP requires hospices to thoroughly understand, monitor and adjust to improve survey outcomes and quality scores to avoid being selected for the program. Hospices that place premiums on the quality of care provided and compliance will continue to thrive.

### About The Author

Zaundra Ellis is the Vice President of Hospice Professional Services for Axxess. She leverages her many years of expertise in the hospice industry to create a software solution that is easy to use and allows clients to be clinically, administratively and financially compliant. Prior to joining Axxess, Zaundra served as the Executive Director for Kindred Hospice and Heart to Heart hospice agencies across Texas. In this role, she oversaw a hospice house, created and implemented a companywide QAPI program for an organization that served more than 2,500 patients, and used her experience to create operations that improved compliance and maximized reimbursements.



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