

## **Prescribing Considerations for Hospice Care Providers**

Approved by the Board at its August 4, 2015 meeting; Withdrawn; Revised and Approved at its February 1, 2016 meeting

Service Area: Medical

Subject: Prescribing Considerations for Hospice Care Providers

The South Carolina Board of Medical Examiners (“Board”) has addressed the establishment of the physician-patient relationship as a prerequisite for prescribing in a separate advisory opinion. The Board recognizes, however, that physicians providing hospice care face a unique constellation of circumstances when prescribing for newly certified hospice patients and that those circumstances warrant an exception to the requirement of a physical examination prior to prescribing for a new patient set forth in S.C. Code Ann. § 40-47-113 (A). Patients at the end of life deserve prompt and efficient management of pain and symptoms to ensure their quality of life is maintained in the best manner possible. Many patients are referred to certified hospice programs because they need aggressive symptom management and want to receive care outside the hospital setting. Failure to provide for these needs would cause unnecessary suffering and could lead to unwanted hospitalization.

Any licensed physician who is an employee of, or under contract with, a Medicare-certified hospice program with a qualified hospice program director may prescribe up to a 14-day supply of medications for a certified hospice patient for the purpose of controlling symptoms prior to establishing a traditional patient-physician relationship by a direct physical examination.

All usage shall be documented and an appropriate medical record detailing a pain management plan shall be maintained for each patient as required by the Medical Practice Act. Physicians should not use this exception to routinely prescribe for hospice patients they have not examined.

The South Carolina Board of Medical Examiners has concluded that the prescription of medications, including opioids, for a certified hospice patient participating in a Medicare-certified hospice program as described herein does not constitute misconduct if the hospice physician is familiar with and abides by acceptable medical guidelines regarding such use, is knowledgeable about effective and compassionate pain and symptom relief, and ensures the documentation of an appropriate symptom management plan. Hospice physicians are strongly encouraged to participate in continuing medical education activities specifically related to safe prescribing of controlled substances, symptom management and other topics pertinent to end of life care.