



# SENIOR & LONG TERM CARE DIVISION

## COMMUNITY SERVICES BUREAU

### Medicaid Hospice Policy Manual

**Title:** Hospice Policy 410  
**Section:** ELIGIBILITY FOR SERVICES  
**Subject:** Initial and Comprehensive Assessment of the Member  
**Reference:** ARM 37.40.805, 42 CFR 418.54  
**Supersedes:** Policy 410, October 2016

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#### INITIAL AND COMPREHENSIVE ASSESSMENT OF MEMBER

The hospice must conduct and document in writing a member-specific comprehensive assessment that identifies the member's need for hospice care and services, and the member's need for physical, psychosocial, emotional, and spiritual care. This assessment includes all areas of hospice care related to the palliation and management of the terminal illness and related conditions.

#### INITIAL ASSESSMENT

The hospice registered nurse must complete an initial assessment within 48 hours after the election of hospice care is complete (unless the physician, member, or representative requests that the initial assessment be completed in less than 48 hours.)

#### TIMEFRAME FOR COMPLETION OF THE COMPREHENSIVE ASSESSMENT

The hospice interdisciplinary group, in consultation with the member's attending physician (if any), must complete the comprehensive assessment no later than five calendar days after the election of hospice care in accordance with 37.40.815 (Refer to Hospice Policy 404).

#### CONTENT OF THE COMPREHENSIVE ASSESSMENT

The comprehensive assessment must identify the physical, psychosocial, emotional, and spiritual needs related to the terminal illness that must be addressed in order to promote the hospice

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member's well-being, comfort, and dignity throughout the dying process. The comprehensive assessment must take into consideration the following factors:

1. The nature and condition causing admission (including the presence or lack of objective data and subjective complaints);
2. Complications and risk factors that affect care planning;
3. Functional status, including the member's ability to understand and participate in his or her own care;
4. Imminence of death;
5. Severity of symptoms;
6. Drug profile. A review of all of the member's prescription and over-the-counter drugs, herbal remedies and other alternative treatments that could affect drug therapy. This includes, but is not limited to, identification of the following: