Mississippi Secretary of State

125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTR	ATIVE	PROCEDURES	NOTICE FILING
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ADMINISTRATIVE I NOCEDONES	HOTICE HEING					
AGENCY NAME Mississippi State Board of Medical Licensure		CONTACT PERSON Mike Lucius		TELEPHONE NUMBER 601-987-0248		
ADDRESS 1867 Crane Ridge Drive, Suite 200-B	CITY Jackson		STATE MS	ZIP 39216		
EMAIL mboard@msbml.ms.gov	Name or number of rule(s): Part 2635 Chapter 15: Hospice Practice, Rule 15,1					
Short explanation of rule/amendment/	repeal and reason(s) for proposing rule/amendm	nent/repeal: N	lew rule to es	tablish practice	
standards for physicians practicing as a						
Specific legal authority authorizing the	promulgation of rule	e: Miss. Code Ann., §73-43-1	1			
List all rules repealed, amended, or sus	pended by the prop	osed rule: None				
ORAL PROCEEDING:						
An oral proceeding is scheduled for	this rule on Date:	Time: Place:				
Presently, an oral proceeding is not						
If an oral proceeding is not scheduled, an oral protein (10) or more persons. The written request shotice of proposed rule adoption and should include agent or attorney, the name, address, email addressment period, written submissions including a ECONOMIC IMPACT STATEMENT:	nould be submitted to the ude the name, address, e ress, and telephone numb	agency contact person at the above mail address, and telephone numbe per of the party or parties you repres	e address within ter of the person(s) sent. At any time	wenty (20) days a making the requ within the twent	after the filing of this lest; and, if you are an ly-five (25) day public	
Economic impact statement not rec	uired for this rule.	Concise summary of e	conomic impa	ct statement	attached.	
TEMPORARY RULES PROPOS		SED ACTION ON RULES	Date Propo	FINAL ACTION ON RULES Date Proposed Rule Filed: 11/15/2019		
Original filing Renewal of effectiveness	Original filing Action propo Renewal of effectiveness New r			Action taken: X Adopted with no changes in text		
To be in effect in days Amen		dment to existing rule(s)	Ado	Adopted with changes		
Effective date: Immediately upon filing		l of existing rule(s) ion by reference		Adopted by reference Withdrawn		
Other (specify):	Proposed fina	al effective date:	Repo	Repeal adopted as proposed		
		s after filing (specify):	1	Effective date:X 30 days after filing		
	Other	(зреспу).		Other (specify):		
Printed name and Title of person a	uthorized to file ru	ıles: Mike Lucius, Dep	uty Director			
Signature of person authorized to	file rules: _ M	we Lucius				
OFFICIAL FILING STAMP		WRITE BELOW THIS LINE	0	FFICIAL FILING	Э СТАМР	
	311					
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Accepted for filing by	Accepted for		Accepted 1			

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Part 2635 Chapter 15: Hospice Practice

Rule 15.1 In-Home Hospice Good Faith

Recognizing the unique team-based approach utilized when treating in-home hospice patients, the following represents four factors required to establish a proper physician-patient relationship:

- i) The medical director must receive an order from the treating/referring physician requesting the patient be admitted for hospice care. Self-referral by the physician medical director may be necessary, and on those occasions, a second physician must be consulted to affirm the decision for hospice admission. Physician Medical Directors who self-refer a patient to their hospice, or to any hospice with whom the director has a contractual relationship, must obtain informed consent from the patient. Additionally, Physician Medical Directors must disclose to the primary care provider for the patient, in writing, that the patient has been admitted to hospice;
- ii) That the treating hospice physician or medical director has thoroughly reviewed the medical records of the patient, as provided by the referring physician, has documented the review, and has determined just cause exists for hospice admission (expected death in six months or less), with documented follow-up review at every certification period thereafter;
- iii) That the actions of the physician are deemed within the course of legitimate professional practice, as defined by the Centers for Medicare and Medicaid Services (CMS); and
- iv) That an evaluation of the patient occurs no later than thirty (30) days after the admission of the patient to hospice. The evaluation shall consist of either a face to face with the physician, face to face with a mid-level provider (PA or APRN), or a telemedicine visit by the medical director with nursing support in the home. Regardless of how the evaluation is accomplished, the author of any controlled substance prescriptions must have evaluated the patient within the thirty (30) day time-period.

It shall be considered unprofessional conduct for a medical director to participate in active recruitment for patient admission to hospice. For the purposes of this regulation, the term "active recruitment" shall mean any unsolicited interaction with a patient for the purposes of convincing a patient to enroll in hospice. As an example: having hospice staff or affiliates visit nursing home patients, with whom the physician has no prior relationship, for the ultimate purpose of soliciting their enrollment in hospice.

It shall be considered unprofessional conduct for physicians to document participation at Inter-Disciplinary Group (IDG)¹ meetings when they did not attend the meeting(s).

Nothing in this section shall preclude a hospice physician from fulfilling their duties to provide physician services as needed to hospice patients.

Source: Miss. Code Ann. §73-43-11 (1972, as amended).

¹ As defined in The Social Security Act, Title 18, §1861 (dd)(2)(B), as amended.



RESOLUTION

WHEREAS, it is necessary for the Occupational Licensing Review Commission to issue a resolution regarding the approval or denial of specific rules submitted for its review:

NOW, THEREFORE, LET IT BE RESOLVED BY THE OCCUPATIONAL LICENSING REVIEW COMMISSION, that the following rules shall be known to have been approved by the Commission at a duly called meeting of its members on December 23, 2019, and may now be filed as final with the Secretary of State's Office for inclusion in the Mississippi Administrative Code:

- Rules of the Board of Medical Licensure 30 Mississippi Administrative Code Part 2635
 Chapter 15: Hospice Practice, Rule 15.1; New rule to establish practice standards for physicians practicing as a Hospice Medical Director.
- Rules of the Mississippi State Board of Dental Examiners 30 Mississippi
 Administrative Code Part 2301, Rule 1.61 MOBILE AND PORTABLE DENTAL
 FACILITIES; Amendment to Regulation 61 as voted upon in Board Meeting dated
 4/5/2019. Approved as amended to delete the last sentence of paragraph 3 a.
- Rules of the Mississippi State Board of Dental Examiners 30 Mississippi
 Administrative Code Part 2301, Rule 1.62 Portable Dental Facilities; Creation of

Regulation 62 as voted upon in Board Meeting dated 6/14/2019. Approved as amended to change the word 'phone' to 'communicate with' in the first sentence of paragraph 6 e.

NOW, THEREFORE, LET IT BE RESOLVED BY THE OCCUPATIONAL LICENSING REVIEW COMMISSION, that the following approval of the Commission which was issued at the November 18, 2019, Commission Meeting shall be known to have been rescinded by the Commission at a duly called meeting of its members on December 23, 2019:

• Rule 30-2301-1.29 Board Regulation 29 – Administration of Anesthesia; To define in new paragraph 2(D)(1)(3) the term "anesthesiologist" whether he/she is a dentist or physician.