



NURSE PRACTITIONER DOCUMENTATION CLINIC - AGENDA
Virtual Education • 11am ET start

Time and Educational Content	Table of Contents • Content Overview / Objectives
<p>11:00 AM – 12:00 PM ET (60-minute session / no Q&A)</p> <p>1. The Role of the Nurse Practitioner in Hospice Care</p> <p>Presenter: Lauren Templeton, DO FAAHPM HMDC</p>	<ul style="list-style-type: none">• Delineation of the Hospice Physician and Nurse Practitioner roles including determination of clinical eligibility, relatedness, and roles within the interdisciplinary group• Face-to-Face Encounter (F2FE) Requirements: Intent, Timing, and Attestation
<p>12:00 – 1:30 PM ET (75-minute session & 15-minute Q&A)</p> <p>2. Trajectories of Illness and Local Coverage Determination (LCD) Guidelines</p> <p>Presenter: Lauren Templeton, DO FAAHPM HMDC</p>	<ul style="list-style-type: none">• Utilization of the 4 disease trajectories of terminal illness to capture disease progression of the terminally ill patient• Incorporation of the LCD guidelines into the nurse practitioner's clinical assessment and documentation of the F2FE
<p>1:30 – 2:00 PM ET</p>	<p>30-minute break</p>
<p>2:00 – 3:30 PM ET (75-minute session & 15-minute Q&A)</p> <p>3. The Hospice Language</p> <p>Presenter: Carrie Cooley, RN MSN</p>	<ul style="list-style-type: none">• Correct utilization and documentation of the Hospice Assessment Tools (e.g., FAST, NYHA, PPS, ADLs)• Documentation strategies and utilization of quantitative and comparative data, Hospice Assessment Tools, and LCD guidelines for compelling nurse practitioner clinical documentation
<p>3:30 – 4:15 PM ET (35-minute session & 10-minute Q&A)</p> <p>4. Drafting Clinically Relevant Face-to-Face Encounter Visit Documentation</p> <p>Presenter: Lauren Templeton, DO FAAHPM HMDC</p>	<ul style="list-style-type: none">• Discussion of the pertinent clinical factors to assess during the F2FE visit• Overview of best practice for the nurse practitioner to support the patient's terminal prognosis in clinical record documentation• Successful documentation strategies to ensure clinically relevant F2FE visits for use by the hospice physician to determine ongoing clinical eligibility