NoteGrade
HOSPICE

Sample Hospice (fictional)

ADR READY REVIEW · 2 CHART(S)

ADR response due 10/30/2026

B

84/100

1 of 2 chart(s) have critical gaps to review before submitting.

CHARTS REVIEWED

C

1 · Patient B.K. (fictional)

Risk: High. Critical: 2 · Other gaps: 2

A

2 · Patient L.T. (fictional)

Risk: Moderate. Critical: 0 · Other gaps: 2

WHERE TO START

Start with the High-risk charts. Fix only what can be fixed honestly; never create or re-date documents.

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NoteGrade
HOSPICE

Patient B.K. (fictional)

ADR READY CHART REVIEW · RISK: HIGH

Claim 9/1–9/30/2026 · routine home care · benefit period 3



End-stage COPD. Strong nursing notes; the face-to-face and one recertification are the problems.

FINDINGS

!! **C2 · CRITICAL · can't be fixed later · Certification**

Each recertification signed no more than 15 days before its benefit period starts, and obtained (verbal or written) within 2 days after the period starts, with the written one before billing. Recert for 9/1 signed 8/12, 20 days early. [42 CFR 418.22(a)(3)]

!! **C4 · CRITICAL · can't be fixed later · Certification**

Face-to-face visit no more than 30 days before the 3rd and later benefit periods (day 1 of the period is OK), by a hospice physician or hospice-employed NP, with a signed attestation. Face-to-face dated 7/28, 35 days before the 9/1 period. [42 CFR 418.22(a)(4), (b)(4)]

! **E3 · Gap · can't be fixed later · Election and consents**

Election statement addendum (items and services not covered) given in writing within 5 days of the election start, and updated within 3 days of any plan-of-care change that affects it (elections before 10/1/2026: due only if requested). Addendum requested 8/2; given 8/11 (9 days). [42 CFR 418.24(b)(6), (c), (d) (elections on or after 10/1/2026)]

! **P2 · Should fix · Plan of care and team**

Visit frequencies ordered for each discipline and followed, with missed visits explained. RN ordered 2x/week; 6 of 8 visits made, 2 missed without a note. [42 CFR 418.56(c)]

WHAT'S ALREADY IN GOOD SHAPE

Election and consents: 2 met · Certification: 4 met · Plan of care and team: 3 met · Medications: 2 met · Visit documentation: 3 met · Billing consistency: 1 met

ABOUT THE GAPS THAT CAN'T BE FIXED

Timing gaps (for example a late face-to-face or an early recertification) can't be corrected later. Don't

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create or re-date a document to cover one. Decide with your billing team or counsel how to handle the affected dates of service before you submit.

BEFORE YOU SUBMIT

Don't add late entries, addenda or corrections to the requested records now. Send the record as it is. For a missing signature, the person who wrote the note signs a signature attestation (PIM Ch. 3 §3.3.2.4). If your nurses chart on paper at the bedside, keep those paper notes with the chart; they are part of the record and should match the EMR. Then review the rest with your billing team.

NoteGrade
HOSPICE

Patient L.T. (fictional)

ADR READY CHART REVIEW · RISK: MODERATE

Claim 9/1–9/30/2026 · routine home care · benefit period 1

Almost there



93/100

FINDINGS

! **P3 · Gap · can't be fixed later · Plan of care and team**

Aide supervision visit by an RN at least every 14 days. Aide supervision gap of 19 days (9/3 to 9/22). [42 CFR 418.76(h)]

! **M2 · Should fix · Medications**

Drug profile reviewed (all prescription, over-the-counter and herbal remedies) for effectiveness, side effects, interactions, duplicate drugs and lab monitoring needs. No pharmacist review found. [42 CFR 418.54(c)(6)]

WHAT'S ALREADY IN GOOD SHAPE

Election and consents: 3 met · Certification: 4 met · Plan of care and team: 3 met · Medications: 1 met · Visit documentation: 3 met · Billing consistency: 1 met

ABOUT THE GAPS THAT CAN'T BE FIXED

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