

The Four Paths to Eligibility

All four paths lead to the same destination: identification and support of a six-month prognosis

Path One	Path Two	Path Three	Path Four
Meets ALL the Local Coverage Determination (LCD) criteria	Meets most of the LCD criteria AND has documented rapid clinical decline supporting a limited prognosis	Meets most of the LCD criteria AND has significant comorbidities that contribute to a limited prognosis	Physician's clinical judgment is that the patient has a limited prognosis
<p>The LCDs</p> <ul style="list-style-type: none"> Developed by the MACs Provide medical criteria for determining prognosis but not consistent predictors of prognosis Use as guidelines for documenting terminal illness If a patient meets certain criteria, they are deemed eligible If a patient doesn't meet the LCD, may still be eligible for the MHB but must document why (best done by a physician) Not the legal standard for hospice eligibility however, are followed by reviewers when reviewing for payment determinations 	<p>Indicators of Rapid Clinical Decline</p> <ul style="list-style-type: none"> Nutritional decline Functional decline Progressive deterioration while receiving appropriate care Hospital utilization Serial lab assessments 	<p>Terminal Diagnosis: The condition established after study to be chiefly responsible for the patient's admission to hospice</p> <p>Related: Secondary conditions or related co-morbid conditions that directly emerge or result from the terminal condition or co-morbid conditions associated with the terminal illness; interconnected with the terminal condition and impact prognosis</p> <p>Unrelated: Conditions or diagnoses that are independent of the terminal condition</p>	<p>Clinical assessment + experience + evidence based knowledge</p>