Cancer

Needs any one

- **A** **Metastatic** at presentation

or

- **B** Progression to **metastatic or advanced** disease, with decline in spite of therapy **OR** therapy declined

ALSO SUPPORTS

Baseline: **PPS or KPS 70% or less**; help with **2 or more ADLs**. Small cell lung, brain and pancreatic cancer may qualify without other indicators (LCD).

Call (877) 258-7129, any hour

betahospice.com/eligibility/cancer

Condensed from Medicare LCD L33393. Supports, not replaces, clinical judgment. Draft for medical director review.

Dementia

Needs both

- ☐ **FAST 7** or beyond: needs help to walk, dress and bathe · incontinent · about **6 or fewer** intelligible words
- ☐ **Any 1 in the past 12 months:** aspiration pneumonia · upper UTI · septicemia · multiple **stage 3 to 4** ulcers · fever recurrent after antibiotics · poor intake with **10% weight loss** in 6 months **OR** albumin **under 2.5 g/dL**

ALSO SUPPORTS

Comorbidities and the rate of decline.

Call (877) 258-7129, any hour

betahospice.com/eligibility/dementia

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Heart disease

Needs both

- ☐ **NYHA class IV**: heart failure or angina at rest
- ☐ **Any 1:** optimally treated · not a candidate for surgical procedures · declines them

ALSO SUPPORTS

EF 20% or less (no new echo needed) · resistant symptomatic arrhythmias · prior cardiac arrest · unexplained syncope · cardioembolic stroke · HIV.

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betahospice.com/eligibility/heart-disease

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Pulmonary disease

Needs all 3

- ☐ **Disabling dyspnea at rest**, poor bronchodilator response (bed-to-chair)
- ☐ Progression: rising ED visits or admissions for pulmonary infection or respiratory failure
- ☐ **Any 1:** room-air **pO2 55 mmHg or less** · room-air **SpO2 88% or less** · **pCO2 50 mmHg or more**

ALSO SUPPORTS

Cor pulmonale · weight loss **over 10%** in 6 months · resting heart rate **over 100**. FEV1 not required.

Call (877) 258-7129, any hour

betahospice.com/eligibility/pulmonary-disease

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Kidney disease

Needs both

- ☐ No dialysis or transplant **OR** stopping dialysis (documented decision)
- ☐ **Any 1:** CrCl **under 10 cc/min** (**under 15** with diabetes) · creatinine **over 8.0 mg/dL** (**over 6.0** with diabetes)

ALSO SUPPORTS

Uremia · oliguria · intractable hyperkalemia · uremic pericarditis · hepatorenal syndrome · fluid overload. Higher CrCl cutoffs with heart failure (LCD).

Call (877) 258-7129, any hour

betahospice.com/eligibility/renal-disease

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Liver disease

Needs all 3

- ☐ PT **over 5 seconds** above control **OR** INR **over 1.5**
- ☐ Albumin **under 2.5 g/dL**
- ☐ **Any 1:** refractory ascites · SBP · hepatorenal syndrome · refractory encephalopathy · recurrent variceal bleeding

ALSO SUPPORTS

Malnutrition · muscle wasting · active alcohol use · hepatocellular carcinoma · HBsAg positive or refractory hepatitis C.

Call (877) 258-7129, any hour

betahospice.com/eligibility/liver-disease

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Stroke and coma

Needs both

- ☐ **PPS or KPS 40% or less**
- ☐ **Any 1, poor fluids and calories:** weight loss **over 10%** in 6 months or **over 7.5%** in 3 · albumin **under 2.5 g/dL** · aspiration in spite of speech therapy · poor calorie counts · dysphagia without artificial nutrition

ALSO SUPPORTS

Coma of any cause: day-three bedside findings (LCD).

Call (877) 258-7129, any hour

betahospice.com/eligibility/stroke-coma

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ALS

Needs any one

- **A** Critically impaired breathing, for example vital capacity **under 30%** predicted, dyspnea at rest, ventilation declined (full list in the LCD)

  or

- **B** Rapid progression **AND** critical nutritional impairment

  or

- **C** Rapid progression **AND** a complication: aspiration pneumonia · upper UTI · sepsis · recurrent fever · **stage 3 to 4** ulcer

ALSO SUPPORTS

Rapid progression: walking to bed bound, speech to unintelligible, diet to pureed, ADLs to major help.

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betahospice.com/eligibility/als

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Parkinson's disease

No disease-specific LCD section

Use the ALS pathways, with progression and complications within **12 months**. Oxygen at rest counts in the breathing pathway.

ALSO SUPPORTS

A falling PPS and the comorbidities carry weight.

Call (877) 258-7129, any hour

betahospice.com/eligibility/parkinsons

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Debility, failure to thrive

Not a principal diagnosis since October 2014

Code the condition driving the prognosis as principal; list debility and weight loss as related.

ALSO SUPPORTS

Support with BMI **under 22** in spite of nutrition · **PPS or KPS 40% or less** · weight loss **over 10%** in 6 months. Note the reversible causes considered.

Call (877) 258-7129, any hour

betahospice.com/eligibility/adult-failure-to-thrive

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Signs of decline, any diagnosis

Each supports the prognosis alongside the diagnosis card

- Falling PPS or KPS
- New or progressive ADL dependence
- Weight loss, falling albumin, poor intake
- Recurrent pneumonia, sepsis or upper UTI
- Dysphagia with aspiration
- Repeated hospital or ED visits
- Worsening dyspnea, pain, edema; falling systolic BP
- Progressive stage 3 or 4 pressure ulcers

Document serial scores and weights with dates: two or more show decline.

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betahospice.com/eligibility

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Refer to Beta Hospice

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