

Is your patient ready for hospice?

At Vivie, we believe in looking at the whole picture, not just a single diagnosis. A holistic view of your patient's health journey may mean they're ready for the comfort and support hospice care can offer—sooner than you think.



Common Indicators for Hospice Care (Not all indicators are required to qualify)

Alzheimer's/Dementia

- Difficulty swallowing
- Lack of bowel and/or bladder control
- Dependence on Activities of Daily Living (ADLs)
- Loss of meaningful speech (7A or higher on the FAST scale)
- Consistent weight loss – 10% or more in the last six months

Congestive Heart Failure

- Severe fatigue
- Shortness of breath, with or without exertion
- Chronic fluid build-up/edema
- Frequent hospitalizations for CHF
- Oxygen use

Lung Disease/COPD

- Severe, debilitating asthma or emphysema
- Shortness of breath, with or without exertion
- Oxygen/CPAP use
- Frequent hospitalizations for COPD

Stroke

- Difficulty swallowing
- Lack of bowel and bladder control
- Dependence on Activities of Daily Living (ADLs)
- Karnofsky Performance Scale (KPS) score of 40% or less
- Consistent weight loss – 10% or more in the last six months

Cancer

- Disease has spread to other organs/metastasis
- Continued weight loss
- Refuses further treatment – chemo, radiation, surgery

End-Stage Kidney Disease

- Severe fluid buildup and swelling
- Frequent hospitalizations due to ESRD
- Discontinuation of dialysis

Karnofsky Performance Scale (KPS) Patients at 70 or less on the scale may be hospice appropriate.	Score	Function
	100	Normal, no evidence of disease
	90	Able to perform normal activity with only minor symptoms
	80	Normal activity with effort, some symptoms
	70	Able to care for self but unable to do normal activities
	60	Requires occasional assistance, cares for most needs
	50	Requires considerable assistance
	40	Disabled, requires special assistance
	30	Severely disabled
	20	Very sick, requires active supportive treatment
	10	Moribund
	0	Death

Functional Assessment Scale (FAST) Patients with ANY symptoms in stage 7 may be hospice appropriate.	Score	Level of Functioning
	1	No difficulty, subjectively or objectively
	2	Complaints of forgetting location of objects; words
	3	Deficit in demanding employment settings
	4	Requires assistance in complex tasks (planning dinner for guests, handling personal finances, forgetting to pay bills, etc.)
	5	Requires assistance in choosing proper clothing to wear for the day, season or occasion
	6	a. Assistance required in putting on clothing b. Assistance required in bathing properly c. Assistance required with mechanics of toileting d. Urinary incontinence e. Fecal incontinence
	7	a. Speech ability limited to less than 6 different intelligible words/day or over the course of a single interview b. Speech ability limited to the use of one single intelligible word/day or over the course of a single interview c. Unable to walk without personal assistance d. Unable to sit up e. Unable to smile f. Unable to hold up head

At Vivie, our goal is to help patients live fully, wherever they are in their journey. If you believe your patient may benefit from hospice, call 1.844.903.2736 or submit a referral at vivie.org/referrals

Top 10 Most Common Diagnoses in Hospice

1. Cancer
2. Heart Disease
3. Dementia/Alzheimer's
4. Lung Disease
5. Stroke
6. Kidney Disease
7. Liver Disease
8. Neurological Disease- Parkinson's/ALS
9. HIV/AIDS
10. Other: infections, masses suspicious for cancer, moderate/severe malnutrition, and multiple other chronic conditions

Beyond diagnoses: What else to consider

If your patient doesn't have a common diagnosis, here's what to watch for:

1. Recent decline in health over weeks or months
2. Increased need for assistance with ADLs
3. Significant weight loss (check trends over 1 to 6 months)
4. BMI and food intake changes
5. Recurring falls, infections, hospitalizations, or ER visits
6. Shortness of breath at rest or with activity
7. Refusal of further medical treatment
8. Multiple co-morbidities contributing to their condition

Ultimately, the most important factor is believing that your patient has a life expectancy of six months or less should their illness follow its normal course.

Four Ways to Meet Hospice Criteria

1. Meets LCD Guidelines

- Patient meets Medicare administrative contractors disease-specific guidelines to help determine if a patient meets the clinical criteria for the Hospice Medicare Benefit.

2. Meets most LCD guidelines and has a documented decline

- Deterioration of lab values, evidence of metastatic disease, ER or hospital visits in the last 6 months, unintentional weight loss, decline in functional status

3. Meets most LCD guidelines and has additional co-morbidities

- Patients who meet most of the LCD guidelines may still be eligible for hospice if they have a terminal diagnosis of six months or less and have significant life-limiting co-morbidities: dementia, CRF, COPD, CHF

4. Physician's clinical judgment

- Patients who do not meet all the LCD guidelines but who still have a terminal illness with a prognosis of six months or less may still be eligible if their disease follows the normal course. An attending physician may consult with a Medical Director to review the patient's status to determine eligibility.

We'll assess your patient promptly. If they're not hospice-ready now, we'll reassess in a month—or sooner if needed—to ensure they get the care they need, right when they need it most.

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