

APPROPRIATE CLINICAL FACTORS TO CONSIDER DURING RECERTIFICATION OF MEDICARE HOSPICE PATIENTS

The following is a guide hospice providers and their staff can use during recertification of a Medicare hospice patient. This tool is intended only as a guide, and is not inclusive, nor does it ensure payment. The use of this tool is not required and is completely voluntary. Any new/persistent/change in clinical factors exhibited by the patient should be documented in the medical record to support the appropriateness of the hospice services provided. Documentation should be in a quantitative form (Examples: pounds, 4 on a scale of 1-5, inches, etc.) (See Suggestions for Improved Documentation tool, http://www.cgsmedicare.com/hhh/education/materials/pdf/hospice_documentation_tool_h-021-01_07-2011.pdf.)

CLINICAL STATUS

- Appetite/food consumption (persistent/change)
- Body mass index (persistent/change)
- Functional status (change in activities of daily living (ADLs))
- Infections (new/persistent/change)
- Weight/measurement change resulting from disease
- Temperature fluctuation
- Decreased systolic BP <90
- Respiratory rate, pattern (persistent/change)

SIGNS

- Agitation (new/persistent/increase)
- Ascites (new/persistent/change)
- Circulatory obstructions resulting from disease (new/persistent/change)
- Decubitus (new/persistent/change)
- Edema (new/persistent/change)
- Fatigue (new/persistent/change)
- Heart rate (persistent/change)
- Level of consciousness (persistent/change)
- Pathologic fracture
- Pleural/pericardial effusion (persistent/change)
- Progressive postural hypotension (new/persistent/change)
- Skin color/integrity (persistent/change)
- Weakness (persistent/change)

SYMPTOMS

- Cough (new/persistent/change)
- Diarrhea/constipation (new/persistent/change)
- Dyspnea (new/persistent/change)
- Fatigue (new/persistent/change)
- Nausea/vomiting (new/persistent/change)
- Pain (new/persistent/change)
- Seizure/CNS activity (as related to disease process) (new/persistent/change)
- Swallowing, dysphagia (new/persistent/change)
- Recurrent aspiration
- Urine output (persistent/change)

LAB RESULTS (when available)

with physician interpretation

- Arterial blood gases/pulse oximetry (persistent/change)
- CBC (persistent/change)
- Electrolyte balance (persistent/change)
- Metabolic studies (persistent/change)
- Prealbumin, albumin or cholesterol resulting from disease (persistent/change)
- Tumor markers (persistent/change)

OTHER INDICATORS

- Change in KPS/PPS resulting from disease
- Decline in FAST Scale (dementia and Alzheimer's patients)
- New York Heart Association (NYHA) classification change (cardiac patients)
- Medication adjustment
- Identification/development of new/persistent/change in comorbidities
- Usage of continuous, respite, general inpatient hospice care
- Independence (persistent/change)
- Hospitalizations, emergency department visits
- Psychological state (change)
- Social status (change in social support, relationships)

Revised December 31, 2015.

H-020-02 © 2015 Copyright, CGS Administrators, LLC.

Disclaimer: This resource is not a legal document. Although every reasonable effort has been made to assure accurate information, responsibility for correct claims submission lies with the provider of services. Reproduction of this material for profit is prohibited.