

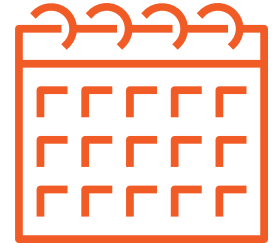
# HOSPICE LENGTH OF STAY

## ANALYSIS TIPS

### What is the Six-Month Terminal Prognosis?

To be eligible for the hospice benefit, the patient must be considered to be terminally ill. Terminally ill means that the patient's life expectancy is 6 months or less, if the illness runs its normal course.

As a condition of payment under the Medicare hospice benefit, the six-month terminal prognosis must be supported in the medical record. The physician's clinical judgment must be supported by clinical information and other documentation that provides a basis for the six-month prognosis. Diagnosis alone may not support terminal prognosis; therefore, documentation in the medical record must support the terminal status.



### Leverage Medical Record Data and Reports



- Average Length of Stay (LOS)
  - Examine LOS >180 days
- Agency patient population characteristics
- Patient characteristic trends with long lengths of stay
  - Primary diagnosis
  - Comorbidities affecting prognosis
  - Clinical signs/symptoms
  - Place of service
  - Referral source
  - Admitting clinician

### Clinical Observations



Determine clinical observations in similar patients in the final 6 months of life:

- Weight loss in last 6 months
  - (decrease pounds/kilograms, MAC, MTC, Abdominal girth)
- Change in pain
- Change in responsiveness
- Skin integrity (decubitus)
- Increase dependence for ADLs
- Respiratory rate (increased, decreased)
- New or increase in dyspnea
- Oxygen use
  - (new or increase in LPM, decrease in oxygen saturation)
- Hyper/hypotension
- Radial/apical pulse
  - (tachycardic, bradycardic, regular, irregular)
- Edema (new or increase level 1-4, pitting)
- Turgor (slow, normal)
- New or increase in incontinence frequency
- Change strength/weakness
- Increased confusion
- Decreased intake/output
- Increased sleep
- Worsening lab studies (when available)

### Establish Agency Discharge Parameters



- Timeframe without documented decline
- Timeframe without signs/symptoms



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