

1. Disease with metastases at presentation

OR

2. Progression from an earlier stage of disease to metastatic disease with either:
 - Continued decline in spite of therapy (like palliative chemo or radiation)

OR

- Patient refuses further disease related therapy

Certain cancers with poor prognoses – small cell lung cancer, brain cancer and pancreatic cancer – may be hospice eligible without fulfilling the other criteria in this section.

Document a description of the decline and the impact of the decline on the patient's functioning and quality of life.

[Information on LCDs is taken directly from the MAC's website at the time of publication.]

Hospice Quickflips[©] #34
GIP Due to Psychosocial Crisis

In April 2007, CMS issued a transmittal (1539) that clarified that GIP cannot be used for caregiver breakdown, stating:

...some hospices are billing Medicare for “caregiver breakdown” at the higher “general inpatient” level, rather than the lower payment for “inpatient respite” or “routine home care” levels of care. To receive payment for “general inpatient care” under the Medicare hospice benefit, beneficiaries must require an intensity of care directed towards pain control and symptom management that cannot be managed in any other setting.

This means that GIP must be related to symptoms as outlined above. Psychosocial crisis of the caregiver may result in use of respite care.

SAMPLE