

# Pulmonary Disease

If you have a patient with pulmonary disease, they may be eligible for hospice.

Only one in three people in the United States eligible for hospice care receives it – even though hospice is covered by Medicare and most Medicaid and commercial insurance plans for eligible patients. This even includes coverage for medications and supplies related to the life-limiting illness. Why aren't more people taking advantage of the benefit? Largely because people don't understand all that hospice can offer – or because they are not aware of the many diagnoses that can qualify a patient for hospice.

If you have a patient with **pulmonary disease** that meets the following criteria, they may be eligible for hospice services:

**The patient has severe chronic lung disease as documented by 1, 2, and 3.**

1. The patient has all of the following:

- Disabling dyspnea at rest
- Little or no response to bronchodilators
- Decreased functional capacity (e.g. bed to chair existence, fatigue and cough)

Note: A serial decrease of FEV1 > 40 ml/yr is objective evidence for disease progression but is not required

**AND**

2. Progression of disease as evidenced by a recent history of increasing office, home, or emergency visits and/or hospitalizations for pulmonary infection and/or respiratory failure.

**AND**

3. Documentation within the past 3 months of one or more of the following:

- Hypoxemia at rest on room air ( $pO_2 \leq 55$  mmHg by ABG) or oxygen saturation  $\leq 88\%$
- Hypercapnia evidenced by  $pCO_2 \geq 50$  mmHg

**Supporting documentation includes:**

- Cor pulmonale and right heart failure secondary to pulmonary disease (e.g. not secondary to the left heart disease or valvulopathy)
- Unintentional progressive weight loss > 10% of body weight over the preceding six months
- Resting tachycardia > 100 bpm

*In the absence of one or more of these findings, rapid decline or comorbidities may also support eligibility for hospice care.*

Patients are eligible for hospice care if in the physician's clinical judgment they have a life expectancy of six months or less. These determinants are to be used as guidelines and do not take the place of a physician's clinical judgment. Coverage for hospice care may still be appropriate for patients not meeting these determinations due to comorbidity or rapid decline.

Please contact VistaCare at 1-866-VISTACARE if you would like to refer a patient or have any additional questions about hospice eligibility. Or, feel free to use our online Hospice Referral Form at <http://www.VistaCare.com/eligibility/referral>.



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At VistaCare, we're committed to the exceptional delivery of compassionate, patient-focused hospice care that meets our patients and families where they are, with the care that's right for them. We can help care for patients in the following ways:

- **Expertise in pain management and end-of-life care.** Through an interdisciplinary team approach, VistaCare addresses the physical needs of the hospice patient as well as the emotional and spiritual needs of the entire family.
- **Medical Director services available.** VistaCare can coordinate care with the patient's physician – or our Medical Director can assume the care. We respect the doctor-patient relationship and will work with the physician to determine their preferred level of involvement.
- **Registered nurses available around-the-clock.** VistaCare nurses are experts at managing the needs of each hospice patient. They are trained to help with the physical and psychosocial needs of patients and families and can serve as a valuable resource 24 hours a day, seven days a week. In addition, nurses are available around-the-clock to admit eligible patients to hospice.
- **Help patients remain at home or other residence of choice.** Hospice helps patients remain in their residence of choice while receiving the appropriate care for their medical needs. Should their needs change, VistaCare staff is available around-the-clock to provide continuous care or transfer patients to an appropriate inpatient setting. In addition, hospice provides respite care, which relieves caregivers and can help to ease the burden on families.
- **Relieve the patient of financial obligations associated with the terminal illness.** A 100% covered benefit through Medicare, hospice covers the cost of prescriptions, supplies and equipment related to the terminal illness. Physicians can be confident that patients will receive the appropriate medications, equipment and treatments for their terminal diagnosis as ordered by the physician and cost will not be a reason for non-compliance with orders. In addition, the hospice team is available to monitor, support and provide accountability for the patient and family in the care plan.
- **Reinforce your commitment to quality patient care.** A recent University of Pittsburgh study indicated that 75 percent of people would trade seven months of healthy life to ensure quality care at the end of life. Families who have experienced the hospice benefit through VistaCare have historically expressed that they wished they had accessed hospice care sooner. Their high satisfaction with hospice care can augment your reputation for providing quality care.
- **Accept all eligible patients.** VistaCare's Open Access philosophy makes hospice available to all eligible patients by removing barriers and overcoming obstacles to access. We accept all hospice-eligible patients, even those with complex medical needs.

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