



# Medicare Hospice Levels of Care

## Routine

- Description** • The most common level of care, typified by a pattern of visits from the entire hospice team
- Location of Care** • Wherever the patient resides whether a home/private residence, personal care or assisted living facility or skilled nursing facility
- Services** • Patient and family will receive visits from the hospice team members including nurse, hospice aide, chaplain, social worker, and volunteers (based on need and desire)
- Hospice provides medications, equipment, and supplies related to the terminal diagnosis, for free
- What you Need to Know** • Hospice is a Medicare Part A benefit, so patients generally cannot receive simultaneous hospice and "skilled days" at a skilled nursing facility

## General Inpatient

- A higher level of care designed to provide symptom management for a short period
- Care must be provided by a facility with 24-hour RN presence, typically a skilled nursing facility or hospital
- Similar to "skilled days" in a skilled nursing facility, hospice pays the facility a per diem which included room and board, medications, equipment and supplies; A member of the hospice team will continue to make daily visits
- General inpatient care is appropriate only as long as a patient has a symptom that needs active management; once a symptom is under control and monitored for a period of time, the patient must return to Routine Care

## Continuous

- A higher level of care designed to provide symptom management for a short period
- Wherever the patient resides, whether a home/private residence, personal care or assisted living facility, or skilled nursing facility
- Continuous Care is designed to treat a symptom that is out of control by having intensive short-term hospice intervention
- Typically used to control pain or respiratory distress, the hospice provides a nurse and an aide for a minimum of eight hours in each calendar day in an attempt to comfort the patients in their location
- If a patient does not meet the criteria for continuous care, yet still has an unmet need, talk with your hospice provider; perhaps additional chaplain and/or psychosocial support would be helpful

## Respite

- Level of care designed to give the hospice patient caregivers living at home a "respite" of up to five-night
- Care must be provided by a facility with 24-hour RN presence typically a skilled nursing facility,
- If necessary, hospice will provide appropriate transport to and from the respite facility
- The patient brings their medications and supplies to the facility; hospice pays for the room and board in the facility; hospice team continues to visit the patient in the facility
- Maximum of five-night, but can be utilized more than once in a benefit period; if the family repeatedly requests respite, it may be an indication that they need to consider whether they are capable of providing day-to-day care as primary caregivers

\*Patients are eligible for hospice care when the attending physician and hospice medical director make a clinical determination that life expectancy is six months or less, or the disease follows its usual course. To help make the determination Devoted Healthcare and Hospice Services, LLC. offers this guide as a convenient reference for hospice eligibility. These indicators do not replace professional judgment, CMS, regulations, or local coverage determinations (LCDs).

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