

Neurological Disease

Muscular Dystrophy, Myasthenia Gravis,
Multiple Sclerosis or ALS



If you have a patient with Neurological Disease, they may be eligible for hospice care.

Only one in three people in the United States eligible for hospice care receive it – even though hospice is covered by Medicare and most Medicaid and commercial insurance plans for eligible patients. This even includes coverage for medications, equipment and supplies related to comfort care for 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 a chronic degenerative neurologic disease (e.g., Muscular Dystrophy, Myasthenia Gravis, Multiple Sclerosis or ALS) that meets the following criteria, they may be eligible for hospice services:

THE PATIENT MUST MEET ONE OF THE FOLLOWING CRITERIA (1 or 2A or 2B):

1. Critically impaired breathing capacity with all of the following findings:

- Dyspnea at rest
- Vital capacity less than 30%
- The requirement of supplemental oxygen at rest
- The patient declines artificial ventilation

OR

2. Rapid disease progression with either A or B below:

- Progression from independent ambulation to wheelchair or bed-bound status
- Progression from normal to barely intelligible or unintelligible speech
- Progression from normal to pureed diet
- Progression from independence in most or all Activities of Daily Living (ADLs) to needing major assistance by caretaker in all ADLs

AND

A. Critical nutritional impairment demonstrated by all of the following in the preceding twelve (12) months:

- Oral intake of nutrients and fluids insufficient to sustain life
- Continuing weight loss
- Dehydration of hypovolemia
- Absence of artificial feeding methods

OR

B. Life-threatening complications demonstrated by one or more of the following in the preceding twelve (12) months:

- Recurrent aspiration pneumonia (with or without tube feedings)
- Upper urinary tract infection (e.g., Pyelonephritis)
- Sepsis
- Recurrent fever after antibiotic therapy
- Stage 3 or Stage 4 pressure ulcer(s)

In the absence of one or more of these findings, rapid decline or co-morbidities 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 if the disease runs its normal course. These determinants are to be used as guidelines and do not take the place of a physician's clinical judgment.

Please contact Tridia Hospice at

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if you would like to refer a patient to our program, or if you have
any additional questions about hospice eligibility or benefits