



Renal Disease

Hospice Eligibility Guidelines for Renal Disease

Coverage Guidance

The following criteria are provided directly from Medicare guidelines and are used by physicians to support hospice eligibility.

Patients will be considered to be in the terminal stage of renal disease (life expectancy of six months or less) if they meet the following criteria.

Acute renal failure:

(1 and either 2 or 3 should be present. Factors from 4 will lend supporting documentation.)

1. The patient is not seeking dialysis or renal transplant or is discontinuing dialysis;
2. Creatinine clearance GFR <15 ml/min
3. Serum creatinine >8.0 mg/dl (>6.0 mg/dl for diabetics);
4. Comorbid conditions:
 1. Mechanical ventilation;
 2. Malignancy (other organ system);
 3. Chronic lung disease;
 4. Advanced cardiac disease;
 5. Advanced liver disease;
 6. Sepsis;
 7. Immunosuppression/AIDS;
 8. Albumin
 9. Cachexia;
 10. Platelet count <25,000;
 11. Disseminated intravascular coagulation;
 12. Gastrointestinal bleeding.

Chronic renal failure:

(1 and either 2 or 3 should be present. Factors from 4 will lend supporting documentation.)

1. The patient is not seeking dialysis or renal transplant or is discontinuing dialysis;
2. Creatinine clearance GFR <15ml/min
3. Serum creatinine >8.0 mg/dl (>6.0 mg/dl for diabetics);
4. Signs and symptoms of renal failure:
 1. Uremia;
 2. Oliguria
 3. Intractable hyperkalemia (>7.0) not responsive to treatment;
 4. Uremic pericarditis;
 5. Hepatorenal syndrome;
 6. Intractable fluid overload, not responsive to treatment.



Important note

Hospice eligibility is determined by a physician based on the patient's overall clinical condition. Patients may still qualify even if they do not meet every criterion listed above, as long as documentation supports advanced disease and limited life expectancy.