



## **Admission Criteria—Levels of Care Catawba Valley and Sherrills Ford Hospice Facilities**

The Catawba Valley and Sherrills Ford Hospice facilities provide various levels of care for patients. The hospice physician determines level of care based on Medicare guidelines. Patient admission is also dependent on bed availability.

*It is important that patients and families understand and accept criteria for each level of care prior to an admission to one of the hospice facilities.*

### **1. General Inpatient Care**

General inpatient care is available **for a short term** to manage acute patient symptoms that cannot be managed in other settings, such as medication adjustments, observations, or stabilizing treatments. This service is covered by Medicare, Medicaid, and many insurance companies.

### **2. Inpatient Respite Care**

Respite care is available for the caregiver to obtain **temporary** relief from the demands of caring for the patient or when the caregiver becomes unable to provide care at home. Respite care is available for five days per respite episode. This service is covered by Medicare, Medicaid, and many insurance companies.

### **3. Transitional Care**

Transitional care is for the patient who no longer qualifies for general inpatient care or inpatient respite care and requires one to two days to accommodate a move back to their home or to secure placement in an appropriate facility in the community. Medicare, Medicaid, and insurance companies do not cover room and board fees; therefore, patient room and board costs must be paid by the patient/family.

If discharge from the Hospice House is necessary, a patient may be placed at home, in a nursing home, assisted living facility, or hospital, dependent on the needs/desires of the patient and caregiver/family.

***For additional information, please contact one of our admission coordinators at 828.466.0466.***