



CAPC Stratification Tool: This document gives guidance to “dosing” interventions, so that patients get the care they need when they need it, and the program may use its resources efficiently. The tool was adapted from the Center for the Advancement of Palliative Care. See **CAPC’s Palliative Care in the Home: A Guide to Program Design** for care delivery information.

Risk level	High	Medium	Low
Care intensity	Visits 2+ month and phone/video calls 2+/month	Visits 1/ month and phone/video call 1/month	Visits every 2 months and phone/video calls 1/month
Utilization	2	1	None
ADL	Dependence in 1+ new ADL in past 3 months	Some functional impairment	Minimal or no functional impairment
Palliative Performance Score	PPS <=40	PPS <=60	Normal function
Medical	Advanced illness or multiple chronic conditions AND significant deterioration in clinical status	Advanced illness or multiple chronic conditions	Advanced illness or multiple chronic conditions
Psychosocial	Lives alone or high caregiver burden or financial distress or remote rural location	Lives with caregiver or good support network	Lives with caregiver and good support network

This resource was shared as part of the Building the Value Case for Complex Care Toolkit from the National Center for Complex Health and Social Needs, an initiative of the Camden Coalition. Find the full toolkit at www.nationalcomplex.care/value-case.