

What Is Hospice?

Hospice is a special way of caring for people who are terminally ill.

- The goal of hospice care is to provide care for people who are terminally ill by managing their pain and other symptoms.
- People of all ages who are terminally ill can receive hospice care during the final months of life. Such care includes not only medical care, but also psychological, social, spiritual, and bereavement services.
- In addition, the family of a hospice patient benefits from the education they receive regarding caregiving as well as counseling services designed to help them with their spiritual and social needs. At the same time, the provision of medical equipment and medicines helps ease the family's financial burden.

Who Is Eligible For Hospice Benefits?

A patient is eligible for hospice care if they meet the following conditions:

- Their doctor and the hospice medical director certify that they are terminally ill and have six months or less to live if the illness runs its normal course.
- They sign a statement choosing hospice care instead of other Medicare-covered benefits to treat the terminal illness.

Medicare, Medicaid, and private insurance will still pay for covered benefits for any health problems that aren't related to the terminal illness.

How Does Hospice Work?

Once it is determined that a patient qualifies for hospice care, a specially trained medical team and support staff is available to help them and their family cope with the terminal illness.

The patient's doctor and the hospice medical team work together with the patient and their family to set up a plan of care that meets the patient's specific needs.

“Comfort care” measures are employed to help make the patient's last months of life more peaceful. Comfort care focuses on symptom control and pain relief with the goal of increasing the quality of life for the patient and the family.

Nursing care, home health aide services, equipment, and supplies are all provided to make the patient as comfortable and pain free as possible. Social and spiritual counseling are also part of the hospice plan of care.

Who Is Involved In A Patient's Hospice Care?

- The Primary Physician...most often the patient's family doctor. It could also be the medical director of the hospice organization or the patient's oncologist, cardiologist, or other specialist. In the case of a nursing home resident, it might be the medical director of the nursing home.
- The Hospice Medical Director... a physician who works under contract with the hospice agency to oversee medical operations. This person may also manage individual cases at the patient's or primary physician's request.
- Nurses... work within the hospice agency. There will usually be a particular nurse assigned to an individual patient who will visit the patient in their place of residence 2 to 5 times a week as is needed. In addition there are "on-call" nurses available to the patient 24 hours a day/7 days a week.
- Home Health Aides...also referred to as Certified Nursing Assistants (CNA's). Their job is to provide for the physical and hygienic needs of the patient including baths, linen changes, etc....They also normally visit the patient 2 to 5 times a week as is needed.
- Chaplain... available to discuss and resolve spiritual matters according to individual needs and desires. The Chaplain is also normally involved in tending to the bereavement needs of the family after the completion of the patient's life.
- Social Workers...accessible to the patient and family to help them cope with the emotional and psychosocial matters that are so often magnified during a loved one's illness. A social worker might also aid in directing families to other agencies and institutions that would be of benefit to their particular needs.
- Therapists...normally work under contract with the hospice agency. Physical, speech, and occupational therapies are all available as required by an individual patient's needs.
- Volunteers...able to help with such things as running small errands, preparing meals, or providing short sitting services for the patient and family.

What Is Covered By The Payor?
(Medicare, Medicaid, Or Private Insurance)

Hospice benefits provide these hospice services for a patient's terminal illness and related conditions:

- Physician services
- Nursing care
- Medical equipment (such as wheelchairs or walkers)
- Medical supplies (such as bandages and catheters)
- Drugs for symptom control and pain relief
- Home health aide services
- Physical and occupational therapy
- Speech therapy
- Social worker services
- Dietary counseling
- Bereavement counseling for the patient and their family
- Short-term inpatient care
- Short-term respite care
- Any other covered services needed to manage pain and control symptoms, as recommended by the hospice team

What Is Not Covered?

When hospice care is chosen, the following items are normally no longer covered:

- **Treatment intended to cure the terminal illness**

A patient should consult with their doctor if they are considering getting treatment to cure their illness. Any hospice patient always has the right to stop getting hospice care at any time and receive the coverage they had before they began receiving hospice care.

- **Prescription drugs intended to cure the terminal illness**

Only the drugs used to provide symptom control and pain relief are covered. If a patient is enrolled in prescription drug coverage, however, drugs unrelated to the terminal illness normally remain covered.

- **Room and board**

Room and board aren't covered if the patient is receiving hospice care in a nursing home unless the nursing home stay is related to short-term inpatient or respite services that the hospice medical team determines are needed.

- **Other**

The following services are not covered unless they have been arranged in advance by the hospice medical team:

- Emergency room care
- Care in an inpatient facility
- Ambulance transportation

How Much Does The Patient Have To Pay For Hospice Care?

Although the guidelines dictated by Medicare, Medicaid, and private insurance providers normally specify a co-pay from the patient for such things as respite care and pharmaceuticals, Hospice of the Shoals never requires patients to make such payments.

How Would Care For A Condition Other Than The Terminal Illness Be Covered?

A patient can continue to use their benefit plan to receive care for any health problems that aren't related to their terminal illness. They can also still use their own doctor for this care.

How Long Can A Patient Receive Hospice Care?

A patient can benefit from hospice care as long as their doctor and the hospice medical director certify that they are terminally ill and probably have six months or less to live if the disease runs its normal course. Even if they live longer than six months, they can still receive hospice care, as long as the hospice medical director recertifies that they are still terminally ill.

Why Would Someone Stop Getting Hospice Care?

If a patient's health improves or if their illness goes into remission, they may no longer need hospice care. Also, any patient always has the right to stop getting hospice care for any reason. If a patient decides to stop their hospice care, they normally may return to the type of coverage that they had before they chose a hospice program. If they are eligible, they can begin receiving hospice care again at any time.

What Is Respite Care?

While in hospice care, a patient may have one person who takes care of them every day, such as a family member. Sometimes this person needs someone to take care of the patient for a short time when he or she needs a break from caregiving. **Respite care** is care given to a hospice patient by another caregiver such as a nursing home or other inpatient facility so that the primary caregiver(s) can rest.

**For answers to other questions
concerning hospice care, please call...**

Hospice of the Shoals

767-6699

or visit us on the web at.....

www.hospiceoftheshoals.org

We are your community-oriented, NOT-FOR-PROFIT, hospice.