

## **When is it Time for Hospice Care?**

For many people who are faced with learning how to live with a terminal illness, hospice care can be the answer. It can mean living with a pain-free peace of mind, allowing for comfortable, quality living, as well as time to address important personal and financial affairs. Below are some common questions people have about hospice care.

### ***What is hospice care?***

Hospice is not a place, but a particular type of care. The majority of hospice care is provided in the patient's home, the home of a loved one or in a nursing home. Some hospice providers also offer in-patient care in hospice facilities where specially trained medical professionals provide the care. Their goal is to reduce the patient's pain and control other symptoms, resulting in the patient having an increased ability to live life. Hospice care also provides support services for the emotional and spiritual needs of the patient and their loved ones.

### ***Doesn't choosing hospice mean "giving up on life"?***

This is a question commonly asked about hospice care. The answer is no. Choosing hospice means choosing to add life to days, rather than adding days to life. Trained professionals monitor the patient's condition regularly. Hospice care allows the patient and their loved ones to refocus their energy and attention away from spending time in hospitals and doctors' offices to spending quality time together at home.

### ***How does someone qualify for hospice care?***

- Life expectancy of six months or less, confirmed by an attending physician
- Goal of comfort care rather than aggressive care measures
- Allowing for a natural death to occur, meaning the wish for no heroic end of life measures

### ***Isn't hospice just for people with cancer?***

No. Hospice is for any person who is living with a terminal disease and a life expectancy of less than six months.

### ***What signs might mean it is time for hospice care?***

- Repeated hospitalizations or visits to the emergency room
- Failure to "bounce back" after medical set-backs occur
- Increase in pain, nausea, breathing distress or other symptoms
- Poor rehabilitation potential
- Less participation in favorite activities or hobbies
- Increased dependence requiring assistance for walking, eating, bathing, dressing
- Decrease in alertness, increase in sleep, more withdrawn
- Increased difficulty with comprehension
- Significant decrease in appetite
- Weight loss for no identified reasons

### ***Can I continue to use my doctor if I decide on hospice care?***

Yes. A patient who is receiving hospice services may be cared for under their physician of choice. The alternative option is to have your symptoms cared for by the hospice physician.

### ***What services are included in hospice care?***

Hospice services are provided by an interdisciplinary team of specially trained clinical staff and volunteers. The team includes a doctor, nurse, social worker, certified nurse's aide and volunteers. A hospice chaplain is also available upon request as well as other forms of care such as pet therapy, massage therapy and music therapy.

### ***Can I live in my own home and receive hospice care?***

Yes. One of the main goals of hospice care is to enable the patient to remain out of the hospital setting and in the comfort of their own home environment. Hospice care is provided in private homes, nursing homes and assisted living facilities.

### ***Will hospice take away my medicines?***

As the hospice team works with the patient and their physician to control the pain and other symptoms related to the terminal illness, it may be necessary to re-evaluate medications on a regular basis. Effective management of pain, nausea and other symptoms is always a primary goal of a hospice team. When symptoms are well managed, it allows for the patient to enjoy living life and time spent with others.

***How is hospice care different from other types of home health care?*** In addition to the care provided directly to the patient, ongoing grief support services are provided to family members. Hospice care does not end when a patient dies. Hospice support staff and volunteers maintain contact with the family for at least one year after the death of a patient.

### ***Who pays for my hospice care?***

Medicare, Medicaid and most private insurance plans pay for hospice care. This includes payment for services, medications and supplies directly related to the patient's terminal illness. In addition, professional bereavement counseling as well as spiritual counseling and guidance, are included as covered benefits. Hospice benefits do not cover nursing home room and board expenses. The patient is responsible for paying any nursing home charges.

### ***Will hospice provide care for longer than six months?***

Hospice patients can, and sometimes do, live longer than six months from the time they begin receiving hospice services. Often times this does not mean hospice care ends. The hospice doctor and clinical team will regularly reevaluate the patient's condition. Any time the patient's life expectancy is six months or less, hospice care can continue. It is not unusual for a patient to be under hospice care beyond the six-month time frame.

**For additional information, please visit the following websites:**

[www.floridahospices.org](http://www.floridahospices.org)

[www.hospicenet.org](http://www.hospicenet.org)

[www.hospicefoundation.org](http://www.hospicefoundation.org)

### ***What are the hospice levels of care?***

The symptoms a patient experiences often change over time, requiring different levels of hospice care. There are four levels of care:

- Routine Home Care  
Day-to-day care is provided by caregivers with support of hospice staff. Visits are made according to the patient's needs and are provided wherever the patient calls home.
- Inpatient Respite Care  
When a caregiver needs short-term relief, a patient can be admitted to a contracted nursing facility or to an inpatient hospice care center for up to five (5) consecutive days under the hospice Medicare benefit. This service may be used on an occasional basis.
- General Inpatient Care  
When a patient is experiencing symptoms, like pain, that cannot be controlled at their home the patient can be admitted to a hospice care facility for short-term management of the acute symptoms.
- Continuous Home Care  
When a patient is at home and experiencing acute symptoms, like pain, continuous hospice care at home can sometimes be provided for a limited number of days.