

WHAT IS HOSPICE CARE?

Hospice describes a *philosophy* of care designed to optimize the quality of life for individuals with a life-limiting illness.

Hospice specializes in family-centered health care and is uniquely equipped to treat and manage the special needs and circumstances of an individual with a life-limiting illness.

While the hope of remission and cure is never abandoned, the focus of hospice care is on creating an environment where pain and symptoms are expertly treated so that life can be lived to its fullest.

Hospice care is provided in the comfort of the individual's home or residence, including a nursing home, assisted living facility, or residential care setting.

WHAT SERVICES ARE PROVIDED?

Hospice care is provided by an interdisciplinary team (medical director, registered nurses, home health aides, social workers, spiritual counselors, bereavement counselors, and trained volunteers).

SERVICES INCLUDE:

- Weekly and as needed nursing visits to assess needs and ensure comfort
- Home Health Aide visits to assist with personal care needs
- Management of physical pain and symptoms with medical and psychosocial interventions
- Education, support, and guidance to loved ones on how to care for the patient
- 24/7/365 care and staff availability
- Availability of short-term inpatient care when pain/symptoms become too difficult to manage at home
- Availability of short-term inpatient care when the caregiver needs respite
- Emotional, spiritual, and social support for the patient, caregivers, and loved ones
- Supply and delivery of medications, medical supplies, and medical equipment
- Assistance with applications for entitlements (ALTCS, VA benefits); completing Power of Attorney documents; burial arrangements and memorial services
- Coordination of care with other providers; community resources, and social service agencies
- Assistance with managing problematic behaviors
- Assistance with arranging in-home caregiving support and/or out of home placement when needed
- Educational in-services and training for community providers
- Grief support for caregivers and loved ones for 13 months following death

HOW IS HOSPICE PAID FOR?

Medicare, Medicaid, and most private health insurance, including most HMOs, provide a hospice benefit. The hospice benefit covers all of the services of the hospice team, plus the cost of medication, medical equipment, ancillary therapies, and supplies related to the symptom management of the terminal illness.

HOW DO I KNOW IT MAY BE TIME FOR HOSPICE CARE?

HAVE YOU OR A LOVED ONE...

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Been hospitalized or to the Emergency Room several times in the past six months? |
| <input type="checkbox"/> | <input type="checkbox"/> | Started taking medications to lessen physical pain? |
| <input type="checkbox"/> | <input type="checkbox"/> | Fallen three or more times in the past six months? |
| <input type="checkbox"/> | <input type="checkbox"/> | Started needing help with two or more of the following: bathing, dressing, walking, eating, and/or getting out of bed? |
| <input type="checkbox"/> | <input type="checkbox"/> | Decided you no longer want aggressive curative medical treatment? |
| <input type="checkbox"/> | <input type="checkbox"/> | Been told by a doctor that his/her life expectancy is limited due to medical illness? |
| <input type="checkbox"/> | <input type="checkbox"/> | Making more frequent calls to your primary care? |
| <input type="checkbox"/> | <input type="checkbox"/> | Been treated for recurrent infections (i.e. urinary track infection, pneumonia)? |

If you answered YES to any of the above, ask your doctor or contact Dependable Hospice Consultant directly.

HOW DO I ACCESS SERVICES FROM DEPENDABLE HOSPICE?

To be eligible for hospice care, the following criteria must be met:

- The patient and or legal representative must elect hospice
- The patient's physician must certify hospice eligibility
- The patient must have a life-limiting prognosis

Once receiving the initial referral and physician order, the patient and family meet with members from the hospice team to complete paperwork and discuss the plan of care. Most often, admissions can occur within 24 hours from the time the referral is received, or at patient/family discretion.

No patient will be denied hospice care because of race, color, creed, age, national origin, gender, handicap, religion, genetic makeup, marital status, diagnosis, sexual preference, or an inability to pay for Hospice services.

If the patient chooses hospice care for a life-limiting illness but later changes his or her mind, that patient can cancel or revoke hospice services at any time and immediately resume traditional medical care.