

Hospice and Palliative Care Content

Hospice FAQs

What is hospice care?

Hospice focuses on caring, not curing, and in most cases, care is provided in the patient's home. Hospice care also is provided in freestanding hospice centers, hospitals, and nursing homes and other long-term care facilities. Hospice services are available to patients of any age, religion, race, or illness. Hospice care is covered under Medicare, Medicaid, most private insurance plans, HMOs, and other managed care organizations.

How does hospice care work?

Typically, a family member serves as the primary caregiver and, when appropriate, helps make decisions for the terminally ill individual. Members of the hospice staff make regular visits to assess the patient and provide additional care or other services. The hospice team develops a care plan that meets each patient's individual needs for pain management and symptom control. Support for family caregivers is also assessed throughout the care period. While the range of services provided will vary depending on each individual situation and the specific needs, hospice staff are available by phone 24 hours a day/7 days a week.

Who makes up the hospice team? The interdisciplinary team usually consists of:

- The patient's personal physician;
- Hospice physician (or medical director);
- Nurses;
- Home health aides;
- Social workers;
- Spiritual care providers or other counselors;
- Bereavement professionals;
- Speech, physical, and/or other occupational therapists; and
- Trained volunteers.

What services are provided?

Among its major responsibilities, the interdisciplinary hospice team:

- Manages the patient's pain and symptoms;
- Assists the patient with the emotional and psychosocial and spiritual aspects of dying;
- Provides needed drugs, medical supplies, and equipment;

- Coaches the family on how to care for the patient;
- Delivers special services like physical therapy, speech therapy, and even music and art therapy;
- Makes short-term inpatient care available when pain or symptoms become too difficult to manage at home, or the caregiver needs respite time; and
- Provides bereavement care and counseling to surviving family and friends.

What role do volunteers play in hospice care?

Hospice provides trained volunteers to aid the family and patients. Most hospice volunteers are trained to relieve the primary caregivers, do household chores, and help bathe the patients. Perhaps the most important task, however, is their ability to be “good listeners.” Volunteers also support the work of the hospice program that might not involve patient or family interaction.

Who qualifies for hospice care?

Hospice care is for any person who has a life-threatening or terminal illness. Most reimbursement sources require a prognosis of six months or less if the illness runs its normal course. All hospices consider the patient and family together as the unit of care.

How is hospice care paid for?

Most people receiving hospice care are covered by the Medicare hospice benefit. This benefit covers virtually all aspects of hospice care with little out-of-pocket expense to the patient or family. As a result, the financial burdens usually associated with caring for a terminally ill patient are virtually nonexistent. In addition, most private health plans and Medicaid in most states and the District of Columbia cover hospice services.

Where does hospice care take place?

The majority of hospice patients are cared for in their own homes or the homes of a loved one. “Home” may also be broadly construed to include services provided in nursing homes, assisted living centers, hospitals...wherever the patient considers to be home.

Palliative Care

Palliative care is patient and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering. Palliative care throughout the continuum of illness involves addressing physical, intellectual, emotional, social, and spiritual needs and to facilitate patient autonomy, access to information and choice.

NHPCO uses the National Consensus Project's definition of Palliative care. The following features characterize palliative care philosophy and delivery:

- Care is provided and services are coordinated by an interdisciplinary team;
- Patients, families, palliative and non-palliative health care providers collaborate and communicate about care needs;
- Services are available concurrently with or independent of curative or life-prolonging care;
- Patient and family hope for peace and dignity are supported throughout the course of illness, during the dying process, and after death.

Palliative Care or Hospice?

https://www.nhpc.org/wp-content/uploads/2019/04/PalliativeCare_VS_Hospice.pdf