

Who, what, when, where, why and how. Frequently Asked Questions about

HOSPICE AND PALLIATIVE CARE

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WHAT IS HOSPICE CARE?

Hospice care is a special medical approach to caring for someone with a life-limiting illness. It 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
- Trained volunteers

WHAT SERVICES ARE PROVIDED?

Among its major responsibilities, the interdisciplinary hospice team will:

- Manage the patient's pain and symptoms
- Assist the patient with the emotional, psychosocial and spiritual aspects of dying
- Provide needed drugs, medical supplies, and equipment
- Coach the family on how to care for the patient
- Deliver special services like physical therapy, speech therapy, and even music and art therapy
- Make short-term inpatient care available when pain or symptoms become too difficult to manage at home, or the caregiver needs respite time
- Provide bereavement care and counseling to surviving family and friends

It is important to understand that while Hospice can respond to patient needs 24 hours a day, the team members do not provide around the clock, in-home patient care. The Hospice team helps the caregivers do their job, including recommending respite or other care providers as needed.

WHAT ROLE DO VOLUNTEERS PLAY?

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 team 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 and hospitals.

HOW DO I GET SET UP FOR HOSPICE CARE?

Your doctor will make the referral for hospice or palliative care. There are different providers, so ask questions about which service will be best for you. If your doctor is unable to discuss hospice care, or if there is no attending physician available, families or patients can begin a self-referral process through a hospice provider. For example, a patient or family can contact a hospice that serves the patient's geographic area, describe the situation, including medical history and condition, and ask for guidance.

HOSPICE CARE PROVIDERS

in Monterey, San Benito and Santa Cruz Counties

Bridge Home Health & Hospice

831-220-0211
bridgehh.com

Central Coast VNA & Hospice

831-372-6668
ccvna.com

Heartland Hospice

888-427-6590
heartlandhospice.com

Hospice of the Central Coast – Montage Health

831-649-7750
chomp.org/services/hospice

Hospice of Santa Cruz County

831-430-3000
hospicesantacruz.org

IS HOSPICE JUST FOR THE LAST FEW DAYS OR WEEKS OF LIFE?

Hospice care is for people with an anticipated life expectancy of 6 months or less. However, the length of service varies by individual and some patients live longer than 6 months. Open communication with your doctor and the hospice team will ensure you get the care you need for as long as necessary.

WHAT IS THE DIFFERENCE BETWEEN HOSPICE AND PALLIATIVE CARE?

Both palliative care and hospice care provide comfort. But palliative care can begin at diagnosis, and at the same time as treatment. Hospice care begins after treatment of the disease is stopped and when it is clear that the person is not going to survive the illness. To thoroughly compare hospice and palliative care, we recommend using the National Hospice and Palliative Care Organization's worksheet called "Palliative Care or Hospice- The right service at the right time for seriously ill individuals". That worksheet can be reviewed and downloaded online at hospicegiving.org/resources.

WHAT IS PALLIATIVE CARE?

Palliative care is specialized medical care for people living with serious illnesses. Different from hospice, it includes providing relief from the symptoms and stress of the illness, curative interventions, pain and stress management, and a better understanding of the course of the disease and the prognosis. It's appropriate at any stage of a serious illness. The goal is to improve quality of life for both the patient and the family.

Palliative care is provided by a specially trained team of doctors, nurses and specialists, who work together with the patient's doctors to add an extra layer of support. Palliative care is based on medical and practical needs of the patient, not just the prognosis. Most importantly, palliative care can be provided alongside your usual medical care and is available for people of all ages.

PALLIATIVE CARE PROVIDERS

*in Monterey, San Benito and
Santa Cruz Counties*

Community Hospital of the Monterey Peninsula Palliative Medicine Service

Inpatient Team: 831-625-4977

Outpatient Clinic: 831-620-0700

chomp.org/services/palliative-care

Natividad Palliative Care Program

831-772-7583

natividadfoundation.org/programs/palliative-care

Salinas Valley Memorial Healthcare System Palliative Medicine Service

Inpatient Team: 831-759-3049

Outpatient Clinic: 831-676-0210

svmh.com/services/palliative-care

Coastal Kids Home Care

Pediatric Palliative Care: 800-214-5439

coastalkidshomecare.org/programs

HOW CAN PALLIATIVE CARE HELP ME?

Palliative care can help you better understand the course of the illness, help with decision-making related to serious illness, provide guidance to prepare advance healthcare directives and the POLST form, provide psychosocial support for basic needs as well as help with emotions and stress and manage symptoms and pain.

HOW DO I KNOW IF PALLIATIVE CARE IS RIGHT FOR ME?

Palliative care may be right for you if you have a serious illness and want more support and coordination of your care. Serious illnesses include but are not limited to cancer, heart disease, lung disease, kidney disease, Alzheimer's, ALS, and many more. Palliative care is appropriate at any stage of a serious illness. You can also have palliative care at the same time as curative treatment.

SOME REASONS TO REQUEST A PALLIATIVE CARE CONSULTATION:

- Difficult-to-control symptoms
- Multiple hospitalizations
- Uncertainty with goals of care
- High stress from the impact of a disease

WHAT CAN I EXPECT FROM PALLIATIVE CARE; WHAT DOES THE PALLIATIVE CARE TEAM DO?

Care management: The palliative care team focuses on providing patients with a coordinated plan to manage a serious illness.

An interdisciplinary clinical team: Care is provided, and services are coordinated by, an interdisciplinary team consisting of a physician, nurse, and social worker, as well as other specialists such as pharmacists, nutritionists, and chaplains.

Strong communication: Patients, families, palliative and non-palliative health care providers collaborate and communicate about care needs

Ongoing support: Patient and family support throughout the course of illness, during the dying process, and after death.

WILL MY INSURANCE COVER PALLIATIVE CARE?

The cost of palliative care varies based on the patient's medical coverage. Since palliative care can be both inpatient and outpatient, it is important to ask questions to determine what is or is not covered by your insurance.



DO I HAVE TO GIVE UP MY OWN DOCTOR?

No. The palliative care team provides an extra layer of support and works in partnership with your doctor.

CAN I HAVE CURATIVE TREATMENT TOGETHER WITH PALLIATIVE CARE?

Yes. Your palliative care team works with your specialist or primary physician to develop a plan to both continue curative treatment while establishing a care plan that helps reduce symptoms and improve quality of life.

WHO ELSE, BESIDES THE PATIENT, CAN BENEFIT?

Everyone involved! Patients as well as family caregivers are the special focus of palliative care. Your doctors and nurses benefit too, because they know they are meeting your needs by providing care and treatment that reduces your suffering and improves your quality of life.

HOW DOES PALLIATIVE CARE HELP ME CHOOSE THE BEST TREATMENT OPTION?

The palliative care team will spend time talking and listening to you and your family. They will make sure you completely understand all of your treatment options and choices. By deeply exploring your personal goals, the palliative care team will help you match those goals to the options. They will also make sure that all of your doctors are coordinated and know and understand what you want. This gives you more control over your care.

WHEN SHOULD I ASK FOR PALLIATIVE CARE?

You can have palliative care at any age and any stage of an illness, but early in your illness is recommended. Recent cancer guidelines recommend that cancer patients should receive palliative care early and together with their other treatments. People who are newly diagnosed with advanced cancer should receive a palliative care consult within 8 weeks of their diagnosis.

HOW DO I GET PALLIATIVE CARE?

Ask for it! You have to start by talking with your doctor or nurse.

IF I AGREE TO PALLIATIVE OR HOSPICE CARE, DOES THAT MEAN I'M "GIVING UP?"

Not at all. In fact, palliative care can help you cope with aggressive treatments by getting your pain and symptoms under control to help you fight the disease.