



**NAMASTE**

HOME HEALTH • PALLIATIVE CARE • HOSPICE

# PALLIATIVE vs HOSPICE

## CHEAT SHEET

Palliative Care is for patients with a life limiting illness who are continuing to receive curative/palliative treatments. Hospice care is for patients with a life expectancy of 6 months or less who have chosen to focus on receiving comfort treatments. Both Palliative Care and Hospice focus on relieving suffering related to the disease process and improving quality of life for people of any age.

	PALLIATIVE	HOSPICE
<b>Definition</b>	An interdisciplinary consult service which focuses on providing care for patients with serious illness. Services can be provided at the same time as curative/life-prolonging/Palliative care if desired.	An interdisciplinary approach to providing care for patients at the end of life that focuses on pain and symptom management. Comfort is the primary goal.
<b>Eligibility</b>	<ul style="list-style-type: none"> <li>• Physician order.</li> <li>• Diagnosis of a life-limiting illness during any stage of a disease, ideally early in the course of an illness.</li> </ul>	<ul style="list-style-type: none"> <li>• Physician order.</li> <li>• Diagnosis of a terminal illness.</li> <li>• Certification by a physician of prognosis likely to be 6 months or less.</li> </ul>
<b>Goals of Care</b>	<ul style="list-style-type: none"> <li>• Disease education and assistance with choosing on treatment options.</li> <li>• Pain and other symptom management.</li> <li>• Assistance &amp; Support in coping with the stressors of living with a life-limiting illness.</li> </ul>	<ul style="list-style-type: none"> <li>• Pain and other symptom management.</li> <li>• Improved quality of life.</li> <li>• Support the natural process of dying.</li> </ul>
<b>Scope of Services</b>	The interdisciplinary team includes a doctor, nurse practitioner, social worker, and a care coordinator. The nurse practitioner (an advanced nurse who functions similarly to a doctor) makes visits an average of once a month. A social worker is available, and a care coordinator offers telephone support as needed. All care is coordinated with a patient's physician of choice.	Interdisciplinary team including doctor, nurse, nurse aide, social worker, chaplain, and volunteers. The patient's regular doctor may continue as the hospice doctor if patient chooses. The nurse makes visits at least weekly. Bereavement support is available to family for 13 months after the death.
<b>Emergency After Hours</b>	<ul style="list-style-type: none"> <li>• 8am-5pm</li> <li>• After Hours: Call your PCP or visiting ER such as Dispatch Health, or 911 if a true emergency.</li> </ul>	<ul style="list-style-type: none"> <li>• 24/7</li> <li>• Always call the Hospice Team before 911, they understand your hospice needs the best.</li> </ul>
<b>Location Services Provided</b>	<ul style="list-style-type: none"> <li>• Home</li> <li>• Skilled Nursing Facility</li> <li>• Assisted Living Facility</li> <li>• Hospital</li> </ul>	<ul style="list-style-type: none"> <li>• Home</li> <li>• Skilled Nursing Facility</li> <li>• Assisted Living Facility</li> <li>• In patient requires inpatient level of hospice care, needs to be in a contracted facility with 24-hour registered nurse coverage.</li> <li>• Hospital</li> </ul>
<b>Payer Source</b>	As with any consultative service, insurance will be billed for the physician's services. Medicare Part B will pay 80% of these charges; the remainder is billed to either a secondary insurance or to the patient. We are committed to providing services regardless of insurance coverage or ability to pay.	Medicare Part A services pay 100%. Most Medicaid programs pay for Hospice 100%, most private insurance have a hospice benefit, and are sometimes associated with a co-pay or co-insurance.
<b>Medications</b>	Not Covered.	Related to comfort and the terminal illness.
<b>Levels of Care</b>	One Level of Care.	Routine, Respite, General Inpatient, and Continuous Care.
<b>Restrictions</b>	No restrictions, patients may continue to receive curative/life-prolonging/Palliative treatment.	<ul style="list-style-type: none"> <li>• Agree to not receive curative/life-prolonging treatment at the same time as hospice care.</li> <li>• May be unable to use medicare skilled days for payment of long-term care.</li> </ul>