

CHOOSING HOSPICE

QUESTIONS TO ASK



QUESTIONS TO ASK A HOSPICE

Some Questions to Ask in Selecting a Hospice for Your Loved One

Hospice in the United States began in the 1970's, with approval by Medicare in 1983. Almost all of the early hospices were small community programs that operated as voluntary, not-for-profit corporations. The 1990's saw explosive growth of hospice and today there are proprietary hospice providers as well as not-for-profit providers, just as is the case with hospitals.

Some areas have many hospice programs, while other geographical areas may only have a few hospices. Hospice services are often underutilized by their communities. There are large and small, rural, urban and suburban hospices. As with any large system there may be variations in care, but all Medicare-certified hospices must provide the same core services. Since the kind of services hospice provides are mandated under Medicare, that leaves the question of how those services are provided in Medicare-certified hospices. This document will try to help you analyze that as you consider a hospice.

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- The patient's address is _____.
—Does the hospice serve this area?
 - How long has the hospice been in operation?
 - Is the hospice certified by Medicare?
 - Does the hospice accept Medicaid?
 - What other insurance is accepted?
 - Is the hospice licensed by the State?
 - What services does the hospice provide?
—Phone calls to the family?
—Mailings on what to expect?
—Support groups?
—Retreats or activities for the family?
 - What, if any, hospice services does the hospice not provide?
 - Is participation in care by a family caregiver required for hospice enrollment?
 - What is expected from the family caregiver?
 - How can hospice supplement the family's responsibilities?
 - To what degree are volunteer services available in the home?
 - What, if any, out-of-pocket charges can we anticipate?
—For what services?
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- How often does hospice staff make home visits?
(E.g. once-a-day visits, every- other-day visits, or once-a-week visits? Note: This will change as the patient's condition changes.)
 - Nurse
 - Social worker
 - Home health aide
 - Doctor
 - Volunteer
 - Pastor or chaplain
 - Who provides on-call coverage during nights and weekends?
 - The staff of the hospice?
 - Is a home health aide on duty 24 hours a day if needed?
12 hours a day?
 - Is on-call coverage contracted out to other persons?
 - Does the hospice have contracts with local long-term-care facilities?
 - If so, which one(s)?
 - Does the hospice have an inpatient facility?
 - Does the hospice contract for this?
 - May I tour the facility?
 - Does the hospice provide funeral arrangement support?
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- What bereavement services are provided?
 - Type: Individual? Group?
 - Duration of Sessions?
 - Extent of Support: 1 month? 6 months? 1 year?
 - Are bereavement services performed:
 - In person? a) Individual sessions? b) Group sessions?
 - By phone? (Some programs offer only bereavement follow-up phone calls)

SOME THINGS TO CONSIDER

If you are uncertain about whether hospice is right for you, ask the hospice if they would perform an evaluation of the patient and let you know if hospice would be an appropriate referral now...or at some later date.

To determine if the hospice is legitimate, Medicare-certified or licensed by the State, contact the State Hospice Association. (To locate your state's association, do an Internet search or contact Hospice Foundation of America at 800-854-3402.)

Larger, corporate hospice programs are more likely than small hospice programs to be able to provide palliative treatments like radiation therapy for pain management. You can ask if the hospice is not-for-profit or proprietary. There should be no difference in the quality of care provided.

What is the reputation of the hospice? You may want to ask about the reputation of various hospices in your community. Persons to ask would include your doctor, your minister and especially families that have received hospice care in your community.

For more information on paying for hospice services, you can visit <http://www.hospicefoundation.org/hospiceInfo/services.asp>

SUMMARY

A hospice should be several things:

- It should be an agent for learning in the community, especially the medical community.
- It should be an agent for change, especially in the health care community.
- It should be humble about the work it is privileged to do.
- It should be respectful of the lifestyles of all it serves.
- It should serve people regardless of race, religion, economic or social status.

** Hospice Foundation of America would like to thank Bill Lamers, MD and Medical Consultant to HFA, for his contribution to this publication.*

Notes



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