



Medicare Hospice Benefits

a special way of caring for people
who have a terminal illness

This booklet explains . . .

- ◆ The hospice program and who is eligible.
- ◆ Your Medicare hospice benefits.
- ◆ How to find a hospice program.
- ◆ Where you can get more help.



Centers for Medicare & Medicaid Services

Medicare Hospice Benefits

(Finding what you want to know)

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“When my wife was ill, . . . hospice arranged for a volunteer to come in one day a week so that I could go to the grocery store, or whatever needed to be done.”

–Max, Husband of a former hospice patient

*Medicare will still pay for covered benefits for any health problems that are not related to your terminal illness (see page 6 “Can I keep my Medicare health plan?”).

What is hospice?

Hospice is a special way of caring for people who are terminally ill, and for their family. This care includes physical care and counseling. Hospice care is given by a public agency or private company approved by Medicare. It is for all age groups, including children, adults, and the elderly during their final stages of life. The goal of hospice is to care for you and your family, not to cure your illness.

If you qualify for hospice care, you can get medical and support services, including nursing care, medical social services, doctor services, counseling, homemaker services, and other types of services (see page 4). You will have a team of doctors, nurses, home health aides, social workers, counselors and trained volunteers to help you and your family cope with your illness. In many cases, you and your family can stay together in the comfort of your home. Depending on your condition, you may have hospice care in a hospice facility, hospital, or nursing home.

Who is eligible for Medicare hospice benefits?

Hospice care is covered under Medicare Part A (Hospital Insurance). You are eligible for Medicare hospice benefits when:

- You are eligible for Medicare Part A (Hospital Insurance); and
- Your doctor and the hospice medical director certify that you are terminally ill and probably have less than six months to live; and
- You sign a statement choosing hospice care instead of routine Medicare covered benefits for your terminal illness*; and
- You receive care from a Medicare-approved hospice program.

How does hospice work?

Your doctor and the hospice will work with you and your family to set up a plan of care that meets your needs. The plan of care includes the hospice services you need that are covered by Medicare. The chart on page 4 lists these hospice services, including grief and loss counseling for your family. For more specific information on a hospice plan of care, call your State Hospice Organization (see pages 10–11).

“My wife received hospice care for 3 months before she passed away. They sent a registered nurse 3 times a week to care for her.”


–Art, Husband of a former hospice patient

The care that the hospice gives you is meant to help you make the most of the last months of life by giving you comfort and relief from pain. The focus is on care, not cure.

As a hospice patient, there is a team of people that will help take care of you. They are . . .

- ▶ your family
- ▶ a doctor
- ▶ a nurse
- ▶ clergy or other counselors
- ▶ a social worker
- ▶ trained volunteers

How does hospice work? (continued)

 Call your State Hospice Organization (see pages 10–11) to find a hospice program in your area.

Volunteers are trained to help with everyday tasks, such as shopping and personal care services, like bathing and dressing. Speech, physical, and occupational therapists and other persons who are trained to give care are also there for you when needed.

A family member or other person who cares for you will be with you every day and members of the hospice team will make regular visits. A nurse and a doctor are on-call 24 hours a day, 7 days a week to give you and your family support and care when needed. If you should need care in a hospital for your illness, the hospice team will help arrange your stay.

Even though a doctor is a part of the hospice team, you can choose to use your regular doctor, who is not a part of the hospice, to get care. The hospice will work closely with your regular doctor to give you the care that you need.

Hospice Services Covered by Medicare

What does Medicare cover?

Medicare covers these hospice services and pays nearly all of their costs:

Medicare Services	Covered
Doctor services	✓
Nursing care	✓
Medical equipment (such as wheelchairs or walkers)	✓
Medical supplies (such as bandages and catheters)	✓
Drugs for symptom control and pain relief	✓
Short-term care in the hospital, including respite care (see below)	✓
Home health aide and homemaker services	✓
Physical and occupational therapy	✓
Speech therapy	✓
Social worker services	✓
Dietary counseling	✓
Counseling to help you and your family with grief and loss	✓

You will only have to pay part of the cost for outpatient drugs and inpatient respite care (see page 6 “What will I have to pay for hospice care?”).

What is respite care?

Respite care is care given to a hospice patient by another caregiver so that the usual caregiver can rest. As a hospice patient, you may have one person that takes care of you every day. That person might be a family member. Sometimes they need someone to take care of you for a short time while they do other things that need to be done. During a period of respite care, you will be cared for in a Medicare-approved facility, such as a hospice facility, hospital or nursing home (see page 6).

What Is Not Covered

What is not covered?

The care that you get for your terminal illness must be from a hospice. When you choose hospice care, Medicare will not pay for:

✓ **Treatment to cure your terminal illness.**

As a hospice patient, you can get comfort care to help you cope with your illness, not cure it. Comfort care includes drugs for symptom control and pain relief, physical care, counseling, and other hospice services (see page 4). Hospice uses medicine, equipment, and supplies to make you as comfortable and pain-free as possible. Medicare will not pay for treatment to cure your illness. You should talk with your doctor if you are thinking about potential treatment to cure your illness. As a hospice patient, you always have the right to stop getting hospice care and go back to your regular doctor or health plan (see page 7).

✓ **Care from another hospice that was not set up by your hospice.**

You must get hospice care from the hospice provider you chose. You cannot get hospice care from another hospice provider, unless you change your hospice provider (see page 8).

✓ **Care from another provider that is the same care that you must get from your hospice.**

All care that you get for your terminal illness must be given by your hospice team. You cannot get the same type of care from a different provider unless you change your hospice provider (see page 8).

✓ **Room and board.**

Room and board are not covered by Medicare if you get hospice care in your home, or if you live in a nursing home. In certain cases, depending on the level of services provided, the costs for room and board are included in Medicare's payment (for example, when a hospice patient is admitted to a hospital or skilled nursing facility for the inpatient or respite level of care).

What will I have to pay for hospice care?

Medicare pays the hospice for your hospice care. You will have to pay:

- **No more than \$5 for each prescription drug and other similar products:** The hospice can charge up to \$5 for each prescription for outpatient drugs or other similar products for pain relief and symptom control.
- **5% of the Medicare payment amount for inpatient respite care:** For example, if Medicare pays \$100 per day for inpatient respite care, you will pay \$5 per day. You can stay in a Medicare-approved hospital or nursing home up to 5 days each time you get respite care. There is no limit to the number of times you can get respite care. **The amount you pay for respite care can change each year.**

Can I keep my Medicare health plan?

Yes. You should use your Medicare health plan (like the Original Medicare Plan or a Medicare managed care plan) to get care for any health problems that are not related to your terminal illness. You may be able to get this care from your own doctor who is not a part of the hospice, or from the hospice doctor. When you use your Medicare health plan, you must pay the deductible and coinsurance amounts (if you have the Original Medicare Plan), or the copayment (if you have a Medicare managed care plan). For more information about Medicare health plans, including deductibles, coinsurance, and copayments, look in your *Medicare & You* handbook. If you do not have the Medicare handbook, you can get a free copy by calling 1-800-MEDICARE (1-800-633-4227).

Important information about Medicare Supplemental Insurance: If you are in the Original Medicare Plan, you may have a Medicare Supplemental Insurance or “Medigap” policy. Your Medigap policy still helps to cover the costs for the care of health problems that are not related to your terminal illness. Call your insurance company for more information. You can also call 1-800-MEDICARE (1-800-633-4227) and ask for a free copy of the *Guide to Health Insurance for People with Medicare*. This guide will give you more information on using Medigap policies.

Periods of care are important. They are a time when your doctor recertifies that you still need and remain eligible for hospice care.

How long can I get hospice care?

You can get hospice care as long as your doctor certifies that you are terminally ill and probably have less than six months to live. Even if you live longer than six months, you can get hospice care as long as your doctor recertifies that you are terminally ill.

Hospice care is given in periods of care. As a hospice patient, you can get hospice care for two 90-day periods followed by an unlimited number of 60-day periods. **At the start of each period of care, your doctor must certify that you are terminally ill in order for you to continue getting hospice care.** A period of care starts the day you begin to get hospice care. It ends when your 90 or 60-day period is up. If your doctor recertifies that you are terminally ill, your care continues through another period of care.

As a hospice patient, why would I stop getting hospice care?

Sometimes a terminally ill patient's health improves or their illness goes into remission. If that happens, your doctor may feel that you no longer need hospice care and will not recertify you at that time. Also, as a hospice patient you always have the right to stop getting hospice care, for whatever reason. If you stop your hospice care, you will get your health care from your Medicare health plan, (like the Original Medicare Plan or a Medicare managed care plan). If you are eligible, you can go back to hospice care at any time.

As a hospice patient, you always have the right to stop getting hospice care and go back to your regular doctor or health plan.

Example:

Mrs. Jones is a cancer patient who received hospice care for two 90-day periods of care. Mrs. Jones' cancer went into remission. At the start of her 60-day period of care, Mrs. Jones and her doctor decided that, due to her remission, she would not need to return to hospice care at that time. Mrs. Jones' doctor told her that if she becomes eligible for hospice, she may be recertified and can return to hospice care.

How can I find a hospice program?

To find a hospice program, call your State Hospice Organization (see phone numbers on pages 10-11). The hospice you choose must be Medicare-approved in order to get Medicare payment. To find out if a hospice program is Medicare-approved, ask your doctor, the hospice program, your State Hospice Organization, or your State Health Department.

Can I change the hospice provider I get care from?

As a hospice patient, you have the right to change hospice providers only once during each period of care.

Where to Get More Information

Where can I get more information?


You can get more information about hospice care from:

- The National Hospice Organization
1901 North Moore Street, Suite 901
Arlington, VA 22209
1-800-658-8898
www.nho.org (on the Internet)
- The Hospice Association of America
228 7th Street, SE
Washington, DC 20003
1-202-546-4759
www.hospice-america.org (on the Internet)

Call your State Hospice Organization to find a hospice program in your area (see phone numbers on pages 10-11).

At the time of printing, these phone numbers were correct. Phone numbers sometimes change. To get the most updated phone numbers, call 1-800-MEDICARE (1-800-633-4227) or go to the Internet at www.medicare.gov under “Important Contacts.”
Help Line

To get help with your Medicare questions

▶  Call **1-800-MEDICARE** (1-800-633-4227, TTY/TDD: 1-877-486-2048 for the speech and hearing impaired) or look on the Internet at www.medicare.gov.

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