



# 10 Facts You Need to Know About Hospice Care With VITAS

## 1 Hospice manages multiple disease states.

Hospice is for people with advanced illnesses, including heart disease, stroke, lung disease, liver disease, kidney disease, ALS, Alzheimer's disease, multiple sclerosis and AIDS. Whatever the age, culture, beliefs or diagnosis of the patient, if they have a serious progressive illness, VITAS can help.

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## 2 Hospice can happen anywhere.

Hospice is a service that comes to the patient, wherever the patient calls home. That can be a private residence, a nursing home, an inpatient setting, an assisted living community, etc. Patients at home feel better, surrounded by the faces and things they know and love.

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## 3 Hospice is an option. Patients can leave or "revoke" hospice care at any time.

Once on hospice, they can revoke their hospice status at any time for any reason. Patients can return to hospice anytime, as long as they meet eligibility guidelines.

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## 4 Patients can continue with medications and treatments while on hospice.

Patients can continue treatments that provide symptom relief and improve quality of life. If you have questions about specific medications or therapies, talk to the clinician who conducts the evaluation before going on hospice services. For example: a patient with advanced lung disease who is currently on inhaler therapy that allows them to breathe better can continue on this with hospice.

**5 Hospice provides medications as needed to control specific symptoms.**

One of the biggest myths is that hospice administers morphine to hasten death. Hospice physicians prescribe the lowest effective dose of medications—from NSAIDs to opioids—to alleviate symptoms, stabilize the patient and provide the most comfort. Morphine can control pain and shortness of breath, but not every patient needs it.

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**6 Hospice care is usually provided by family caregivers, with support from the hospice team.**

When hospice is provided in a private home, licensed clinicians come to the home rather than have the patient go to a physician's office. Family or friends take on the role of primary caregivers, supported by a team of hospice professionals, including nurse, hospice aide, social worker, physician, chaplain and others, as needed. The team makes regularly scheduled visits, trains and educates family caregivers. For patients in an assisted living community or nursing home, the hospice team provides additional care that complements the care the patient is already receiving.

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**7 There is no limit to the time a patient can be on hospice.**

Hospice is for patients who are expected to live six months or less. But hospice can be extended if the patient remains appropriate. Several studies show that, in many cases, patients who receive hospice live longer than hospice-appropriate patients who do not receive hospice. Our surveys from families often state, "We wish we had known about hospice sooner."

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**8 Hospice provides home medical equipment and supplies.**

Hospice provides equipment and supplies such as shower chairs, hospital beds, incontinence supplies and more. Having free equipment and supplies readily available is convenient and can improve quality of life for the patient and caregivers.

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**9 Hospice cares for the family.**

The VITAS team addresses emotional and spiritual pain suffered by loved ones. In fact, bereavement support for the family continues for more than a year after the death.

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**10 99%+ of hospice patients do not have any out of pocket expenses.**

Medicare, Medicaid (Medi-Cal in California) and most private insurance covers hospice 100%, including home visits, medications, supplies and equipment related to the terminal diagnosis. If a patient is enrolled in a Medicare Advantage Plan, Original Medicare will still cover the cost of hospice care.

**VITAS**<sup>®</sup>  
Healthcare

Clinicians: 800.93.VITAS

Patients and Families: 800.723.3233 or [HospiceCanHelp.com](http://HospiceCanHelp.com)

