

# HOSPICE MYTHS

## ■ **Hospice means giving up hope**

Actually, hospice helps to continue the hope, the hope of a quality of life, the hope of peace, the hope of serenity. At Ohio Living Home Health & Hospice, our goal is never to take away someone's hope of another option to come. If there is something new to trial, in hopes of improving health status and changing the decline of the disease, then we support that, and hospice can be revoked.

## ■ **Once a patient elects hospice care, he or she cannot return to traditional medical treatment**

Once again, hospice is not a decision that is set in stone. If someone's health improves, if the disease has an option available, such as a new chemotherapy, an organ transplant, some new trial for the disease, or if health just improves overall, hospice can be revoked, or client discharged. Coming off of hospice brings back all traditional Medicare that pays for additional aggressive treatment.

## ■ **If you choose hospice care you won't get other medical care**

Hospice care covers the eligible disease process and its treatment. Being able to continue to see your primary care physician is allowed and continues to be covered by Medicare. The hospice team will stay in touch with your physician in order to report changes in your condition.

## ■ **After six months, patients are no longer eligible to receive hospice care**

Hospice benefit requires a physician statement stating that life expectancy is "six months or less." This statement is required to be eligible for the benefit. Understand that this statement is made "to the best of my ability." Hospice

services are available to continue care as long as a person remains in this area, with a life-limiting disease process. Some people receive hospice services for years.

## ■ **Hospice is only for cancer patients**

Hospice was first intended and used for cancer patients, but hospice is available to any person with a limited life expectancy with any disease process. This may be cardiac, lung disease, dementia, any disease that is progression with no "cure" available.

## ■ **Hospice is a place**

Hospice is *not* a place, Hospice is a philosophy of care. This care can be provided any where the client calls home.

## ■ **Hospice requires a Do Not Resuscitate (DNR) Order**

There is no mandate that a person needs a DNR order to be on hospice. Many hospices may mandate, but at Ohio Living Home Health & Hospice, we do not mandate. We allow people to work through this difficult time, and help clients and families understand the process and ramifications of "full code" as the disease progresses.

## ■ **Hospice means that the patient will soon die**

Hospice does *nothing* to expedite the death of a person. The timing is all in God's hands. Again, many people are on hospice for years, and often they feel much better once hospice is involved and pain and symptoms are better managed.

## ■ **Hospice provides 24-hour care**

Medicare does not allow hospice to be a 24-hour care provider. Hospice is available 24 hours a day with our on-call nurse to provide support in a crisis. At Ohio Living Home Health & Hospice, we often provide bedside vigil

or support to families, or facilities in the final hours.

## ■ **All hospice programs are the same**

All hospice programs are mandated to have the same rules and regulations to follow, our *Conditions of Participation*. However, all hospice programs run a little different based on the philosophy of the management. At Ohio Living Home Health & Hospice, we believe in providing a lot more than most hospice programs. We believe that each person should be heard and what is important to their plan of care. We often provide therapy, tube feedings, treat infections, and listen to each person's needs, and what will benefit the quality of life.

## ■ **Hospice is just for the patient**

Hospice services is meant to be support to not only the client, but also the family, and the facility staff.

## ■ **To be eligible for hospice care, a patient must be bedridden**

Hospice care is about quality of life. Hospice would encourage a client to be up and about, active and enjoying life.

## ■ **Hospice discontinues all patient medications**

Ohio Living Home Health & Hospice standard is to review the medications, monitor the benefit, and we only discontinue medications as they become non-beneficial, or when the client is declining or unable to take the medication because of inability to swallow.

## ■ **You can't keep your own doctor if you choose hospice**

Ohio Living practice is to allow attending physicians to continue to follow unless the client, or the physician request otherwise. Medicare expectation is that the attending physician is the client's choice.



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