

How hospice works

If you qualify for hospice care, you and your family will work with your hospice team to set up a plan of care that meets your needs. For more specific information on a hospice plan of care, [call your national or state hospice organization](#).

You and your family members are the most important part of a team that may also include:

- Doctors
- Nurses or nurse practitioners
- Counselors
- Social workers
- Physical and occupational therapists
- Speech-language pathologists
- Hospice aides
- Homemakers
- Volunteers

A hospice doctor is part of your medical team. You can also choose to include your regular doctor or a nurse practitioner on your medical team as the attending medical professional who supervises your care.

In addition, a hospice nurse and doctor are on-call 24 hours a day, 7 days a week, to give you and your family support and care when you need it.

Note

Only your hospice doctor and your regular doctor (if you have one) - not a nurse practitioner that you've chosen to serve as your attending medical professional - can certify that you're terminally ill and have a life expectancy of 6 months or less.

If you need to get inpatient care at a hospital, your hospice provider must make the arrangements. The cost of your inpatient hospital care is covered by your hospice benefit, but paid to your hospice provider. They have a contract with the hospital and they work out the payment between them. However, if you go to the hospital and your hospice provider didn't make the arrangements, you might be responsible for the entire cost of your hospital care.

Where you get hospice care

The hospice benefit allows you and your family to stay together in the comfort of your home unless you need

care in an inpatient facility. If your hospice team determines that you need inpatient care, they will make the arrangements for your stay.

How long you can get hospice care

Hospice care is for people with a life expectancy of 6 months or less (if the disease runs its normal course). If you live longer than 6 months, you can still get hospice care, as long as the hospice medical director or other hospice doctor recertifies that you're terminally ill (with a life expectancy of 6 months or less).

You can get hospice care for two 90-day benefit periods, followed by an unlimited number of 60-day benefit periods.

You have the right to change providers only once during each benefit period.

At the start of each period, the hospice medical director or other hospice doctor must recertify that you're terminally ill (with a life expectancy of 6 months or less), so you can continue to get hospice care.

Finding a hospice program

Consider these questions when choosing your hospice care providers:

Is the hospice provider certified and licensed by the state or federal government?

Does the hospice provider train caregivers to care for you at home?

How will your doctor work with the doctor from the hospice provider?

How many other patients are assigned to each member of the hospice care staff?

Will the hospice staff meet regularly with you and your family to discuss care?

How does the hospice staff respond to after-hour emergencies?

What measures are in place to ensure hospice care quality?

What services do hospice volunteers offer? Are they trained?

The hospice provider you choose must be Medicare-approved to get Medicare payment. To find out if a certain hospice provider is Medicare-approved, ask your doctor, the hospice provider, your state hospice organization, or your state health department.

If you're in a Medicare Advantage Plan or other Medicare health plan

Once you choose hospice care, your hospice benefit should cover everything you need. Original Medicare covers all Medicare-covered services you get while in hospice care, even if you were previously in a Medicare Advantage Plan or other Medicare health plan. If your plan covers extra services that aren't covered by Original Medicare (like dental and vision benefits), your plan will continue to cover these extra services as long as you continue to pay your premium.

If you choose to leave hospice care your Medicare Advantage Plan will not start again until the first of the following month.

Care for your other conditions

Your hospice benefit covers your care and you shouldn't have to go outside of hospice to get care (except in very rare situations). Once you choose hospice care, your hospice benefit should cover everything you need.

You must pay the deductible and coinsurance amounts for all Medicare-covered services to treat health

problems that aren't part of your terminal illness and related conditions. You also must continue to pay Medicare premiums, if necessary.

Stopping hospice care

If your health improves or your illness goes into remission, you may no longer need hospice care.

You always have the right to stop hospice care at any time. If you choose to stop hospice care, you will be asked to sign a form that includes the date your care will end.

You shouldn't be asked to sign any forms about stopping your hospice care at the time you start hospice.

Stopping hospice care is a choice only you can make, and you should not sign or date any forms until the actual date that you want your hospice care to stop.

If you stop your hospice care, you'll get the type of Medicare coverage you had before you chose a hospice program, like Original Medicare, a Medicare Advantage Plan (like an HMO or PPO), or another type of Medicare health plan. If you're eligible, you can go back to hospice care at any time.



A federal government website managed by the Centers
for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244

