

1. How is hospice different from other medical care?

Some of the ways that hospice is different from standard medical care are:

- Hospice provides palliative care: Care that focuses on the patient's comfort and quality of life when curing the disease is not a realistic possibility rather than curative care that focuses on healing the patient.
- Hospice looks at all the patient's and family's needs. A coordinated team of hospice professionals, assisted by volunteers, works to meet the patient's and family's emotional and spiritual needs, as well as the patient's physical needs.
- The emphasis is on controlling pain and symptoms through the most advanced techniques available and on emotional and spiritual support tailored to the needs of the patient and family.

Hospice recognizes that a terminal illness affects the entire family as well as the person who is ill. The entire family, is the “focus of care” for the nurses, social workers, chaplains, and others who make up the hospice team.

2. How is VNS Hospice of Central Indiana different from other hospices?

Ways that ***VNS Hospice of Central Indiana*** is different include:

- The VNS Co-Medical Directors will make home visits when necessary
- Board Certified Palliative Care Medical Directors
- We have certified Hospice/Palliative Care nurses
- We deliver medication directly to your home
- We are a not-for-profit, United Way Agency
- We are inpatient care, if needed, with many central Indiana hospitals. We also have contracts with multiple care facilities. All this makes additional or higher level medical attention easier to arrange, if needed.

3. What services do you provide?

Hospice includes the services of an interdisciplinary team of health care professionals:

- Physicians (the patient's own physician and hospice medical directors, who are specialists in controlling pain and other symptoms of serious illness) prescribe medications and other methods of pain and symptom control.
- Nurses are experts at maintaining patient comfort. They assess the patient frequently and help family members provide the necessary support.
- Certified home care aides provide personal care and help the patient and family with activities of daily living. They also provide companionship and valuable emotional support.
- Social workers coordinate and access community resources and help the patient and family with non-medical concerns. They can help family members mend damaged relationships, plan for the future and ease other emotional difficulties.
- Chaplains to help patients and families cope with spiritual questions and concerns at the end of life, either directly or by coordinating services with the patient's and family's spiritual advisors.
- Bereavement coordinators help patients and families deal with loss. Grief support services continue for at least one year after the death of a hospice patient.
- Volunteers provide companionship and emotional support and offer help in myriad ways.

Hospice also provides medications, medical equipment and supplies necessary to promote comfort at home or in other hospice settings.

4. Doesn't accepting hospice mean giving up?

The truth is that when patients are admitted to hospice in a timely manner their quality of life, and that of their families, is greatly enhanced!

5. What specific assistance does Hospice of Central Indiana provide home-based patients?

Hospice patients are cared for by the VNS team of committed professionals and volunteers trained in the care and support of terminally ill patients and their families. VNS Hospice of central Indiana is available when needed – 24-hours a day, 7 days a week, and provides doctors, nurses, a social worker, home health aides, clergy, therapists and volunteers-and each provides assistance based on his or her area of expertise.

6. Is the home the only place hospice services are delivered?

VNS Hospice of Central Indiana promotes quality of life in the comfort of one's own home, where people most want to be when they are ill. However, hospice care can also be provided in a hospital, in a skilled nursing facility or in a hospice-managed residence.

7. Who pays for hospice care?

Hospice is covered by most insurance plans, including Medicare and Medicaid, with few out-of-pocket costs to the patient.

The Medicare hospice benefit covers costs related to the terminal illness, including the services of the hospice team, medication, medical equipment and supplies. Medicare reimburses for different levels of hospice care recognizing that sometimes patients require special attention. In general, medical coverage includes:

- Physician services;
- Professional services of nurses, social workers, physical and other therapies;
- Medical appliance and supplies as appropriate. The physician and nurse will work with the family to determine which medical supplies and equipment the patient needs. VNS Hospice of Central Indiana will order the equipment and have it delivered to the home.
- Drugs for symptom management and pain relief. VNS Hospice of Central Indiana will order the medications for you and deliver them to your home or and you can get them from the pharmacy. Medications for a condition not related to the

- terminal illness-allergy medication, for example-are not covered by the hospice benefit.
- Short-term inpatient respite care
 - Homemaker services and home health aid
 - Counseling
 - Bereavement services

Medicaid is available in Indiana and most private health insurance policies have hospice coverage. To be sure of coverage, families should, of course, check with their employer or health insurance provider.

8. What are the different levels of hospice care?

Most hospice patients live at home or in a nursing home. Routine home hospice care covers the services, of the interdisciplinary hospice team, medications and equipment. Other categories of care are available when needed.

- **Inpatient Care.** Sometimes pain or symptoms cannot be controlled at home, and the patient is taken to a hospital or other inpatient care center. When the symptoms are under control, the patient returns home. Insurance usually covers the cost of inpatient room and board.
- **Respite Care.** Many patients have their own caregivers, often family members. When caregivers need a rest from their care giving responsibilities, patients can stay in a nursing home or hospice residential care center for up to five days. Medicare covers the cost of room and board, as do many other insurance plans.
- **Continuous care.** Sometimes a patient has a medical crisis that needs close medical attention. When this happens, we can arrange for inpatient care, or VNS Hospice of Central Indiana can provide short-term round-the-clock care in the home. When the crisis is over, the patient returns to “routine” hospice care in the home.

9. When should patients and families consider hospice care?

At any time during a life-limiting illness it's appropriate to discuss all of the patient's care options, including hospice. By law the decision belongs to the patient. Understandably, most people are uncomfortable with the idea of stopping an all-out effort to "beat" their disease. Hospice staff members are highly sensitive to these concerns and are always available to discuss them with the patient, family and physician.

10. Should family wait for our physician to raise the possibility of hospice, or should I raise it first?

The patient and family should feel free to discuss hospice care at any time with their physician, other healthcare professionals, clergy or friends.

11. What if my loved one chooses hospice care and then lives more than six months?

Hospice care does not automatically end after six months. Medicare and most other insurers will continue to pay for hospice care as long as a physician certifies that the patient continues to have a limited life expectancy.

12. What if my condition improves?

If improvement in the condition occurs and the disease seems to be in remission, the patient can be discharged from hospice and return to aggressive therapy or go on about his or her daily life. If a discharged patient should later need to return to hospice care, Medicare and most private insurance will allow additional coverage for this purpose.

13. What kinds of emotional and spiritual support does hospice provide?

Hospice recognizes that people are more than a collection of symptoms. People nearing the end of their lives often face enormous emotional and spiritual distress. They are dismayed as their physical

abilities begin to fail. They don't want to be a burden on their families. They worry how their loved ones will manage without them. Sometimes, they feel deep regret about things they have done or said - or things left undone and unsaid. Hospice professionals and volunteers are trained to be active listeners and to help patients and families work through some of these concerns so that they can find peace and emotional comfort in their final days.

14. How many family members or friends does it take to care for a patient at home?

There is no set number. One of the first things a hospice team will do is prepare an individualized care plan that will, among other things, address the amount of care giving a patient needs. Hospice staff visit regularly and are always accessible to answer questions and provide support.

15. Must someone be with a patient at all times?

In the early weeks of care, it's usually not necessary for someone to be with the patient all the time. Later, however, since one of the common fears of patients is the fear of dying alone, hospice generally recommends someone be there continually. While family and friends must be relied on to give most of the care, VNS Hospice does provide volunteers to assist with errands and to provide a break and time away for major caregivers.

16. How difficult is caring for a dying loved one at home?

It's never easy and sometimes can be quite hard. At the end of a long, progressive illness, nights especially can be very long, lonely and scary. So, VNS Hospice has staff available around the clock to consult with the family and to make night visits if appropriate.

17. Does hospice do anything to make death come sooner?

Hospices do nothing to either hasten or prolong the dying process. Just as doctor's and midwives lend support and expertise during the time of a child's birth, so hospice provides its presence and specialized knowledge during the dying process.

18. How does hospice "manage pain?"

VNS Hospice is up-to-date on the latest medications and devices for pain and symptom relief. VNS Hospice of central Indiana's Medical Directors and nurses have a great knowledge of pain and symptom management. In addition, physical and occupational therapists assist patients to be mobile and self-sufficient as possible. Hospice believes that emotional and spiritual pain is just as real and in need of attention as physical pain, so it addresses these, as well. Clergy and social workers are available to assist family members as well as patients.

19. What is VNS Hospice's success rate in battling pain?

Very high. Using some combination of medications, counseling and therapies, most patients can attain a level of comfort that is acceptable to them. Our patient satisfaction surveys rate us in the 95%+ in managing pain and other symptoms.

20. Will medications prevent the patient from being able to talk or know what is happening?

Usually not. It is the goal of VNS Hospice of central Indiana to help patients be as comfortable and alert as they desire. By constantly consulting with the patient, hospices have been very successful in teaching this goal.

21. How will pain medications affect the patient?

When morphine and other pain control medications are administered properly for medical reasons, patients find much-needed relief without getting "high" or craving drugs. The result is that hospice patients often remain more alert and active because they are not exhausted from uncontrolled symptoms.

22. Is VNS Hospice affiliated with any religious group?

No. VNS Hospice of central Indiana respects and supports the patient and family in their beliefs.

23. Is hospice covered by insurance?

Hospice coverage is widely available. Hospice is provided by Medicare nationwide. When a Medicare-eligible patient receives services from VNS Hospice, Medicare pays almost the entire cost. In general, coverage includes:

- Physician services
- Professional services of nurses, social workers, physical and other therapists.
- Medical appliance and supplies as appropriate
- Drugs for symptom management and pain relief
- Short-term inpatient respite care
- Homemaker services and home health aid
- Counseling
- Bereavement services

Medicaid is available in most states and most private health insurance plans have hospice coverage. To be sure of coverage, families should, of course, check with their employer or health insurance provider.

24. If the patient is not covered by Medicare or any other health insurance, will hospice still provide care?

We do have availability of using United Way funds as long as the patient qualifies financially.

25. Does hospice provide any help to the family after the patient dies?

Hospice maintains contact with the family through our bereavement program for 13 months after the patient dies.

26. If the patient is eligible for Medicare, will there be any additional expenses to be paid?

Although the hospice CAN charge 5% for medications and "Respite Care," VNS Hospice of central Indiana chooses not to impose those changes.