

Vermont Assembly of Home Health and Hospice Agencies

April 1, 2014

Ten Myths about Hospice Care

Hospice is a program to help people with advanced illness live more comfortably and to meet the end of life with confidence, grace and dignity. Individuals with a life expectancy of less than six months can receive expert medical care, pain and symptom management and personal care in the comfort and security of their own home or in a residential or skilled nursing facility. Hospice also includes support services such as homemaking and respite services, counseling, social work, and spiritual support.

Here are 10 common misconceptions about hospice:

- 1. MYTH: You have to have cancer to be a hospice patient.**
The TRUTH is that the diagnosis does not matter. It is life expectancy that helps determine eligibility.
- 2. MYTH: You can only be in hospice if you stay in your home.**
The TRUTH is that people who live in residential care facilities or nursing homes can access the Hospice benefit.
- 3. MYTH: If you go on hospice, it means you “give up” all treatment, all hope.**
The TRUTH is that Hospice provides excellent medical care for pain and symptom management. People on hospice often live longer than people who are aggressively treating an advanced illness.
- 4. MYTH: Hospice is only for old people.**
The TRUTH is that people of all ages utilize the hospice benefit.
- 5. MYTH: You have to be dying to qualify for hospice.**
The TRUTH is that a person does not have to be actively dying to use hospice. They need to choose symptoms management and supportive care over burdensome curative treatments that have caused uncomfortable and unpleasant side effects. Their physician certifies that life expectancy is less than six months. Many people live beyond this six month period because they thrive under the excellent hospice care.
- 6. MYTH: Hospice is only for people who need a lot of care**
The TRUTH is that many people begin hospice services when they need only intermittent care. By initiating hospice services early, they are able to slowly increase services and support as needed during the course of their illness.

7. MYTH: Hospice is only for people whose family can provide most of the care.

The TRUTH is that while hospice encourages the presence of an able and willing primary caregiver, it is not absolutely necessary.

8. MYTH: Hospice is expensive.

The TRUTH is that Medicare, Medicaid and most private insurances have Hospice benefits that cover almost all the costs of care.

9. MYTH: Hospice is only for people who can accept death.

The TRUTH is that acceptance of death is a very personal matter. The hospice team works with patients and families who are struggling emotionally and spiritually with their own mortality.

10. MYTH: You have to choose between hospice and palliative care

The TRUTH is that palliative care is the treatment of pain and symptoms and it is an integral part of hospice care. Some people, who do not have a limited life expectancy and/or are still seeking curative treatment options for their condition or illness, may choose to receive palliative care services only. These services help individuals manage pain and symptoms such as nausea, insomnia, anxiety or other unpleasant side effects from their illness or treatment regime.

Question? Call 229-0579