

The following questions^{*} are designed to help you identify factors that may be important to you and your loved ones when choosing a hospice provider. Hospice providers are eager to meet with you, answer your questions, and help you decide if their hospice can meet your needs. **PCHPCA has developed a list of hospice providers serving Putnam County for your convenience.**

OVERALL PROGRAM - ORGANIZATION

SPEAKING UP FOR YOUR CARE

- 1. What do others say about this hospice? Get references from people you know and from people in the field, such as hospitals, skilled nursing facilities, and clinicians.
- 2. Does the hospice accept my insurance? What services and treatments will be covered by my insurance? What services and treatments will not be covered by my insurance?
- **3.** Is the hospice Medicare certified? Most hospices are certified by Medicare and are therefore required to follow Medicare standards, rules, and regulations. This is especially important if you wish Medicare/Medicaid to cover the cost of hospice care.
- **4.** If the patient is a veteran, ask if the hospice has a contract with the VA to provide services. Veterans may have additional benefits covered by the VA.

PATIENT AND CAREGIVER SERVICES

- 1. What services does the hospice provide? All Medicare-certified hospices are required to provide education, medical care, emotional and spiritual care, medicines, medical supplies and equipment, volunteers, and grief support after the death of a loved one.
- 2. What "extra" services does the hospice offer? In addition to required services, some hospices offer specialized programs for children, for people with specific diseases, "pre-hospice" care for individuals not yet medically ready for hospice care, and other "extra" services that may benefit your family.
- 3. What is the expectation about the family's role in caregiving, such as feeding, toileting, bathing, medication administration, etc.? See if what the hospice expects is consistent with what the family is able to do. Ask how the hospice will teach family members how to care for their loved one.
- 4. Can the hospice meet the patient's specific needs? Are there any treatments that the patient is currently receiving that the hospice will not provide? Mention any specific treatment needs and concerns about care, and ask how the hospice will address those concerns.
- 5. Can the patient continue taking current medications? What medications will the hospice provide? Will Medicare, the VA, or other insurance cover the cost of other medications and vitamins? What medications is the family responsible for paying for?
- **6.** How will the family and patient be involved in making care decisions? If the family disagrees with a care plan being proposed by the hospice, what is the process for resolving the disagreement?
- 7. How does the hospice provider generally manage pain and anxiety?
- 8. How many times per week will a hospice nurse visit the patient?
- 9. How many hours of aide support can be expected each week?
- 10. If the patient needs special equipment and supplies to be safe and comfortable, what will the hospice provide?

(See other side)

*Based on questions developed by the National Hospice and Palliative Care Organization, the American Hospice Foundation, the Indiana Hospice and Palliative Care Organization, and the Centers for Medicare and Medicaid.



- **11. What services do volunteers offer, and if requested, how quickly will a volunteer be available?** If available, volunteers can provide a variety of services. If you need additional support that a hospice volunteer might provide, ask how quickly one can be assigned and what services might be provided.
- 12. If a patient's symptoms cannot be controlled at home, where does the hospice provide inpatient care for its patients? Patients being cared for at home may need to go to an inpatient unit for management of complicated symptoms. Some hospice providers have their own private inpatient facilities, and others lease beds in a hospital or nursing home. Visit the facilities, if possible, to ensure that they are conveniently located and that you are comfortable with them.
- **13.** If family caregivers are not able to manage due to illness or exhaustion, how does the hospice determine whether to provide respite care? Ask how much and how often respite care is available.
- 14. What happens if family members are unable to take care of their loved one at home?
- 15. How will the hospice team keep the patient and family informed about the patient's condition?
- 16. How does the hospice team prepare families for the death of a loved one in the event that a member of the hospice team is not on site?
- **17. What support does the hospice offer to the family after the patient dies?** Hospice provides thirteen months of bereavement support. Ask what types of bereavement support are provided by the hospice.

STAFFING AND AVAILABILITY

- 1. Can I still see my regular doctor if I am on hospice? At the time of referral, hospice will confer with your doctor to ensure continuity of care. If continuing to see a specific physician is something that is important to you, he/she can become part of the hospice care team. Ask your physician if he/she is willing and able to do this, and ask how the hospice team will coordinate care with your doctor. Many physicians are not able to make the necessary commitment to be available for the patient's care 24 hours per day. All hospices have a physician who oversees care.
- 2. Will I be assigned to just one primary hospice nurse? If I am assigned to more than one, who will coordinate and provide oversight for care?
- **3.** How many patients at any one time are assigned to each hospice nurse who will be caring for the patient? Some hospices assign a maximum number of patients to each staff member and may be willing to share that information with you. Caseload numbers might influence your decision about which hospice to choose.
- 4. When the family calls with an urgent need, how long will it take for someone from the hospice team to respond? Hospices are available by phone to help you 24 hours a day, seven days a week.
- 5. If there is a crisis, will staff come to the home at any time of the day or night, on weekends, and on holidays? Ask what services are available in the home in a crisis situation during nights, weekends, and holidays.
- 6. If there is a crisis, how quickly can the family expect hospice staff to arrive at the home? If the family needs someone to come to the home at 3 AM on Saturday, where would that person come from? What would be the average response time?
- **7.** How are patient/family concerns handled? Who can you call with questions or complaints? What is the process for sharing concerns and making sure they are addressed, including a process for escalation if the concern is not adequately addressed at lower levels?

ADMISSIONS

- 1. How quickly can the intake/admissions staff come to begin the admissions process? Is someone available at night or on weekends? If the patient is referred to hospice late in the day or on the weekend, a hospice's ability to start services quickly might be very important.
- 2. Upon acceptance/admission, how soon will hospice services begin?
- 3. What type of orientation and education will the family receive?
- 4. How will the hospice team prepare the family for what to expect?