

Hospice care

If you have Medicare Part A (Hospital Insurance) and meet all of these conditions, you can get hospice care:

- Your hospice doctor and your regular doctor (if you have one) certify that you're terminally ill (with a life expectancy of 6 months or less).
- You accept palliative care (for comfort) instead of care to cure your illness.
- You sign a statement choosing hospice care instead of other Medicare-covered benefits to treat your terminal illness and related conditions.

Your costs in Original Medicare

- You pay nothing for hospice care.
- You may need to pay a copayment of no more than \$5 for each prescription drug and other similar products for pain relief and symptom control while you're at home. In the rare case your drug isn't covered by the hospice benefit, your hospice provider should contact your Medicare drug plan to see if it's covered under Part D.
- You may need to pay 5% of the Medicare-approved amount for inpatient respite care.
- Medicare doesn't cover room and board when you get hospice care in your home or another facility where you live (like a nursing home).

Note

To find out how much your test, item, or service will cost, talk to your doctor or health care provider.

The specific amount you'll owe may depend on several things, like:

- Other insurance you may have
- How much your doctor charges
- Whether your doctor accepts assignment
- The type of facility
- Where you get your test, item, or service

What it is

Depending on your terminal illness and related conditions, the plan of care your hospice team creates can include any or all of these services:

- Doctor services
- Nursing care
- Medical equipment, like wheelchairs or walkers
- Medical supplies, like bandages or catheters
- Prescription drugs for symptom control or pain relief
- Hospice aide and homemaker services
- Physical therapy services
- Occupational therapy services
- Speech-language pathology services
- Social work services
- Dietary counseling

- Grief and loss counseling for you and your family
- Short-term inpatient care for pain and symptom management
- Short-term respite care . If your usual caregiver (like a family member) needs a rest, you can get inpatient respite care in a Medicare-approved facility (like a hospice inpatient facility, hospital, or nursing home). Your hospice provider will arrange this for you. You can stay up to 5 days each time you get respite care. You can get respite care more than once, but it can only be provided on an occasional basis.
- Any other Medicare-covered services needed to manage your pain and other symptoms related to your terminal illness and related conditions, as recommended by your hospice team

Things to know

Only your hospice doctor and your regular doctor (if you have one) can certify that you're terminally ill and have a life expectancy of 6 months or less. After 6 months, you can continue to get hospice care as long as the hospice medical director or hospice doctor recertifies (at a face-to-face meeting) that you're terminally ill. Hospice care is usually given in your home but may also be covered in a hospice inpatient facility. Original Medicare will still pay for covered benefits for any health problems that aren't part of your terminal illness and related conditions, but this is unusual. When you choose hospice care, you decide you no longer want care to cure your terminal illness and/or your doctor determines that efforts to cure your illness aren't working. Once you choose hospice care, your hospice benefit will usually cover everything you need.

Medicare **won't** cover any of these once your hospice benefit starts:

- **Treatment intended to cure your terminal illness and/or related conditions.** Talk with your doctor if you're thinking about getting treatment to cure your illness. As a hospice patient, you always have the right to stop hospice care at any time.
- **Prescription drugs to cure your illness** (rather than for symptom control or pain relief).
- **Care from any hospice provider that wasn't set up by the hospice medical team.** You must get hospice care from the hospice provider you chose. All care that you get for your terminal illness must be given by or arranged by the hospice team. You can't get the same type of hospice care from a different hospice, unless you change your hospice provider. However, you can still see your regular doctor or nurse practitioner if you've chosen him or her to be the attending medical professional who helps supervise your hospice care.
- **Room and board.** Medicare doesn't cover room and board if you get hospice care in your home or if you live in a nursing home or a hospice inpatient facility. If the hospice team determines that you need short-term inpatient or respite care services that they arrange, Medicare will cover your stay in the facility. You may have to pay a small copayment for the respite stay.
- **Care you get as a hospital outpatient (like in an emergency room), care you get as a hospital inpatient, or ambulance transportation**, unless it's either arranged by your hospice team or is unrelated to your terminal illness and related conditions.