

Medicare Minute Script – April 2019 Medicare Coverage of Hospice Care

Today we will learn some of Medicare’s rules for coverage of hospice care.

Point 1: Understand how the Medicare hospice benefit works.

Hospice is a program of end-of-life pain management and comfort care for those with a terminal illness. Medicare’s hospice benefit is primarily home-based and offers end-of-life palliative treatment, including support for your physical, emotional, and other needs. Services covered under the hospice benefit include skilled nursing and skilled therapy services, hospice aides and limited homemaker services, medical supplies, durable medical equipment, respite care, short-term inpatient care, and other services. It is important to remember that the goal of hospice is to help you live comfortably, not to cure an illness.

To elect hospice, you must:

- Be enrolled in Medicare Part A
- Have a doctor certify that you have a terminal illness, meaning a life expectancy of six months or less if the illness runs its normal course
- Sign a statement electing to have Medicare pay for palliative care, rather than curative care unless your provider is participating in a special demonstration program.
- And, receive care from a Medicare-certified hospice agency.

Once you choose hospice, all of your hospice-related services are covered under Original Medicare, even if you are enrolled in a Medicare Advantage Plan. Your Medicare Advantage Plan will continue to pay for any care that is unrelated to your terminal condition. Hospice coverage includes any prescription drugs you need for pain and symptom management related to your terminal condition, while your Part D plan may cover medications that are unrelated to your terminal condition.

Point 2: Learn how to elect the hospice benefit and begin receiving services.

If you are interested in Medicare’s hospice, ask your doctor whether you meet the eligibility criteria for Medicare-covered hospice care. If so, ask your doctor to contact a Medicare-certified hospice on your behalf. There may be several Medicare-certified hospice agencies in your area. If the first one you contact is unable to help you, contact another. Once you have found a Medicare-certified hospice, the hospice medical director (and your doctor if you have one) will certify that you are eligible for hospice care. Afterwards, you must sign a statement electing hospice care and waiving curative treatments for your terminal illness. Your hospice team must consult you—and your primary care provider, if you wish—to develop a plan of care. Your team may include a hospice doctor, a registered nurse, a social worker, and a counselor. Medicare covers hospice care for two 90-day benefit periods, followed by an unlimited number of 60-day benefit periods, pending certification by a doctor

Point 3: Learn how to end the hospice benefit if you would like to receive curative treatment

If you decide you want curative treatment (instead of only palliative treatment), you have the right to stop hospice at any time. Speak with your hospice doctor if you are interested in stopping. If you end your hospice care, you will be asked to sign a form that confirms you are taking back your hospice election and includes the date your hospice care will end. Afterwards, you will again receive Medicare the way you did before choosing hospice, either through Original Medicare or a Medicare Advantage Plan. If you choose to end hospice care, make sure you provide your Part D plan with written proof of the change so that it can update your status in its system. You can elect hospice again later if you continue to meet the eligibility requirements.

Take Action:

1. Contact your doctor if you are considering electing hospice care to learn about your eligibility and local Medicare-certified hospice care providers.
2. Contact your State Health Insurance Program (SHIP) to learn more about the services covered under the hospice care benefit.
3. If you suspect a provider of hospice care fraud, errors, or abuse, contact your Senior Medicare Patrol (SMP). Your SMP can provide you with information to protect yourself from Medicare fraud, errors, and abuse and to report your concerns to the proper authorities.

Local SHIP Contact Information	Local SMP Contact Information
<p>SHIP toll-free:</p> <p>SHIP email:</p> <p>SHIP website:</p> <p>To find a SHIP in another state: Call 877-839-2675 or visit www.shiptacenter.org.</p>	<p>SMP toll-free:</p> <p>SMP email:</p> <p>SMP website:</p> <p>To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org.</p>
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