PALLIATIVE CARE vs HOSPICE CARE

**PHILOSOPHY**

**Palliative care**
- Provides treatment that enhances comfort and improves the quality of a person’s life.
  - Provided at the same time as treatment
  - Not always related to death or progress to death
  - Focuses on treatment and comfort
  - Not all palliative care is hospice care
- Patients at any stage of advanced and life-threatening illness, without time restrictions
- Throughout the illness, including the active treatment phase

**Hospice care**
- Provides support and care for persons in the last phase of an incurable disease so that they can live as fully and as comfortably as possible.
  - Takes place after active treatment
  - Progresses to death
  - Provides support and comfort
  - All hospice care is palliative care
- Patients with a prognosis of six months or less, if the disease continues its normal course
- When treatment is not desired or not an option

**CARE TEAM**

**Palliative care**
- May include
  - Doctor specializing in palliative care
  - Nurse
  - Aide
  - Dietician
  - Social Worker
  - Pharmacist
  - Spiritual Counselor
  - Therapist
  - Volunteer

**Hospice care**
- May include
  - Doctor specializing in palliative care
  - Bereavement Counselor
  - Pharmacist
  - Spiritual Counselor
  - Therapist
  - Volunteer

**INSURANCE**

**Palliative care**
- Paid for by the following
  - Medicare – coverage provided under Medicare Part B, with applicable co-pays and fees.
  - Medicaid – coverage provided by standard Medicaid benefits, with applicable co-pays and fees.
  - Private Insurance – coverage is dependent upon insurance.

**Hospice care**
- Paid for by the following
  - Medicare – services related to the terminal illness are paid for in full by the Medicare Hospice Benefit Part A.
  - Medicaid – paid for in full by the Medicaid Hospice Benefit.
  - Private Insurance – most insurances cover hospice services in full or with minimal co-pays.

**SIMILARITIES**

- Provides relief from pain and other symptoms
- Offers a support system to help patients improve their quality of life
- Provides care for psychological and spiritual needs
- Offers a support system to help the family and caregivers cope during the patient’s illness
- Uses a team approach to address the needs of patients, families, and caregivers