Medicare Hospice Benefit

CASA DE LA LUZ

More than 90% of hospices in the United States are certified by Medicare. Medicare defines a set of hospice care services, which many hospices surpass through voluntary, community-based efforts.

The Medicare Hospice Benefit, initiated in 1983, is covered under Medicare Part A (hospital insurances). Medicare beneficiaries who choose hospice care receive a full scope of non-curative medical and support services for their terminal illness. Hospice care also supports the family and loved ones of the patient through a variety of services, enhancing the value of the Medicare Hospice Benefit.

The Medicare Hospice Benefit Provides:

- Physician services
- Nursing care
- Medical equipment and supplies
- Medications for symptom management and pain relief
- Short-term inpatient and respite care
- Home health aide services
- Counseling
- Social work services
- Volunteer participation
- Bereavement services
- Physical therapy, occupational therapy and speech/language pathology services

Who is Eligible?

Medicare has three eligibility criterias:

- The patient's doctor and the hospice medical director use their best clinical judgement to certify that the patient is terminally ill with a life expectancy of six months or less, if the disease runs its normal course
- The patient chooses to receive hospice care rather than curative treatments for their illness; and
- The patient is enrolled in a Medicare-certified hospice program.

Payment for Hospice

- Medicare pays the hospice program a per diem rate that is intended to cover virtually all expenses related to addressing the patient's terminal illness.

Casa de la Luz
7740 N. Oracle Rd.
Tucson, AZ 85704
Casahospice.com
520.544.9890