



Myths About Hospice Care

Hospice is a place.

Hospice is not just a place. Hospice is a specialized, compassionate approach to caring for those with advanced illness so they may live more fully, in comfort and in control, when life expectancy may be measured in months, rather than years.

Hospice is a place you go when there is nothing more that can be done.

There may no longer be a cure available for your illness, but so much can still be done to relieve pain and symptoms, keep you comfortable and enhance quality of life.

Hospice care is only for cancer patients.

Anyone who has been diagnosed with a life limiting illness and a life expectancy of six months or less can be referred for hospice care.

Once you are in hospice care, you can't get out.

If you change your mind or feel that hospice care is not for you, you may revoke hospice care at any time. Sometimes, after being on hospice care, a patient gets stronger and can resume curative treatments, your doctor may discharge you from hospice.

To be eligible for hospice, I have to be in the final stages of dying.

A patient is eligible for hospice if a doctor and the hospice medical director certify that the life expectancy is six months or less, if the disease runs its normal course. If a patient lives beyond six months, he/she can continue to receive hospice care as long as a physician recertifies the terminal diagnosis.

When you are in hospice, you can't see your doctor anymore.

Your primary care physician works together with your JourneyCare team to develop a plan of care based on your wishes and goals and will continue to be involved in your care.

If you are in hospice, you have to give up all treatments for your illness.

The care that hospice provides focuses on relieving pain and symptoms, making each day the best it can be, how you define it. If you have a co-existing illness (like diabetes) along with your life-limiting illness, you can continue to receive medication to manage that condition while also receiving hospice care.

Hospice pays for all your medicines.

Hospice only pays for medication, equipment and supplies related to the hospice diagnosis to manage pain and symptoms. If you have private insurance, it may continue to pay for other medications.

Hospice care is only provided in the home.

Hospice care is provided wherever the patient calls home: a private residence, assisted living community, nursing home, long term care facility or hospital. When pain and symptoms become difficult to manage at home, short term care can be provided in one of JourneyCare's five Hospice CareCenters.

Hospice nurses give 24-hour care and administer all your medicine.

Your JourneyCare team can be reached 24 hours a day, seven days a week and can provide care in emergency situations. However, the patient's family members and/or caregivers are responsible for providing or obtaining 24-hour care, if needed. While JourneyCare staff may administer medication during regular visits, they will not make a special visit to administer routine medications. JourneyCare volunteers cannot administer medicine, either.

All hospices are the same.

Not all hospices are the same, and you are free to choose your hospice care provider. There are thousands of hospices in the United States, and if they participate in Medicare, they are required to provide certain services to the patient and document them to the government.

A hospice may be not-for-profit or for profit; community based or serving many communities, cities or states; independent or part of another organization, such as a hospital or health system.