

Physician's guide to hospice referrals

Our hospice team approach

Our goal is to function as an extension of your medical practice. The broad and diverse needs of hospice patients have led us to build a multidisciplinary team of specially trained medical professionals with extensive hospice experience. This structure enables us to maintain a high-quality continuum of care.

Our hospice team includes:

- Physicians/medical directors
- Registered nurses
- Certified nursing assistants
- Medical social workers
- Physical therapists
- Speech pathologists
- Registered/licensed dietitians-certified nutrition support
- Bereavement specialists
- Spiritual support professionals
- Respite care

Our hospice patients receive a wide range of services, including:

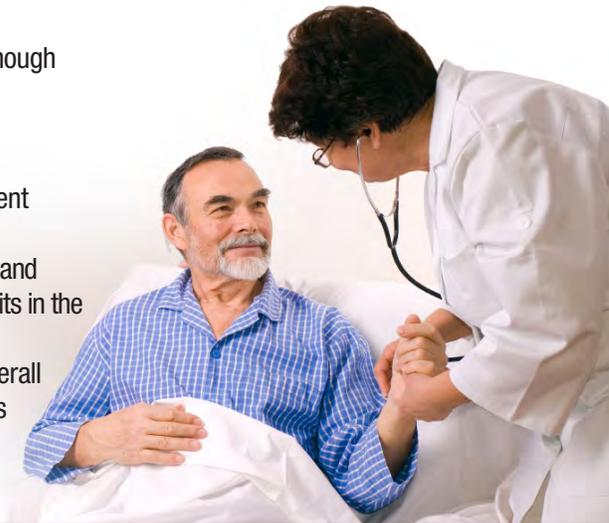
- Pain and symptom management
- Bereavement counseling
- Emotional support and spiritual counseling
- Assistance with personal care, feeding and light housekeeping
- Medical supplies, equipment and medication
- Professional social work

Our hospice program is perhaps the best example of our mission in action — to provide exceptional care and unparalleled service to patients and families who have placed their trust in us.

Evaluating the need for hospice care

It may be time to consider hospice care as an option if a patient:

- Is not eating or drinking well enough to sustain weight
- Receives optimal treatment, but health continues to decline
- Exhibits weight loss of 10 percent or more in six months
- Experiences recurrent infections and frequent hospitalization or ER visits in the past six months
- Shows significant decline in overall health due to multiple problems
- Has an ejection fraction of 20 percent or less.



Medicare/Medicaid information for physicians – Because it can be difficult for a physician to determine the exact prognosis for end-stage illnesses, Medicare has clarified its position to broaden patients' access to hospice.

"The Medicare program recognizes that terminal illnesses do not have predictable courses; therefore, the benefit is available for extended periods of time beyond six months provided that proper certification is made at the start of each coverage period."

Reference: Department of Health and Human Services Center for Medicare and Medicaid Services



PHYSICIAN'S GUIDE TO HOSPICE SERVICES

Living with dignity

When a cure is no longer possible for a patient, hospice may be an option to support your program of care. Hospice is a form of compassionate care, often provided at home, for patients facing a life-limiting illness or injury. Qualifying patients often have a life expectancy of six months or less if the illness is left to run its natural course. Hospice care enables you to make a valuable difference in the quality of your patient's life experience as it nears its end. If you have diagnosed a patient with a terminal illness, let us help you provide care, comfort and support for your patient and his or her family.

Referring a patient to hospice

Referring your patient to hospice does not mean you are giving up on care, rather, you are recognizing that there is no further curative treatment possible and that a new phase of care is more appropriate for your patient's needs. The focus can now shift to improving your patient's quality of life and encouraging your patient to live the remaining time left to its fullest.

For more information on hospice, visit LHCgroup.com.

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