

Medicare's Hospice Benefit for Beneficiaries with Alzheimer's Disease

This Medicare topic sheet was prepared by Leslie Fried, Director of the Alzheimer's Association Medicare Advocacy Project.

What is hospice care?

Hospice is a special way of caring for people who are terminally ill, and for their family. This care includes physical care and counseling. Hospice provides palliative or comfort care for an individual at the end-of-life. The primary purpose of hospice care is to manage the pain and other symptoms of the terminal illness, rather than provide treatment for the illness.

How does my father become eligible to receive hospice under Medicare?

Medicare covers hospice care if:

- Your father has Medicare Part A;
- His physician and a hospice medical director certifies that he is terminally ill, that is, his life expectancy is six months or less, if the illness runs its normal course; and,
- He chooses or elects to receive hospice care and gives up (waives) the right for Medicare to pay for any other services to treat the terminal illness. Instead, Medicare pays the hospice and any related physician expenses. Medicare will continue to pay for your father's care for any services not related to the terminal illness.

Are there guidelines to determine if someone with Alzheimer's disease is terminally ill?

The National Hospice and Palliative Care Organization has published guidelines to help identify which dementia patients are likely to have a prognosis of six months or less, if the disease runs its normal course. Remember, these are only guidelines to assist doctors in determining whether a patient may be appropriate for hospice care. Some Medicare contractors, that are responsible for paying the hospice claims, have specific rules for payment of hospice for dementia patients.

What services can my wife receive from a hospice under Medicare?

Under the hospice benefit, Medicare will pay for your wife's:

- physician's services
- nursing services
- physical, occupational and speech therapy
- medical social services
- home health aide and homemaker services

- counseling services for your wife and your family
- short-term inpatient care
- respite care
- prescription drugs
- medical appliances and supplies
- and bereavement counseling for your family.

Where can my mother receive these services?

Your mother can receive hospice care at home, in a free-standing hospice facility, or in a hospital or nursing facility. If your mother is a resident of a nursing facility, Medicare will only pay for the hospice services provided, not for her room and board.

What will hospice care cost my husband?

There will be no deductibles and only limited coinsurance payments for his hospice services. Your husband will have to pay 5 percent of the cost of a drug or biological, not to exceed \$5. For respite care, there is a coinsurance payment of 5 percent of the Medicare payment for each respite care day.

How long can my wife receive hospice services?

Your wife may elect to receive benefits for two periods of 90 days each, and an unlimited number of periods of 60 days each. If at any time she changes her mind, she can decide to stop receiving hospice care and immediately begin to receive her other Medicare benefits.

For additional information

Centers for Medicare and Medicaid Services

<http://www.cms.hhs.gov>

Medicare Web site

<http://www.medicare.gov>

National Hospice and Palliative Care Organization

<http://www.nhpco.org>

The Alzheimer's Association is the leading voluntary health organization in Alzheimer care, support and research.

Updated November 2011