

Hospice Coverage

Insurance coverage for hospice care is available through:

- Medicare
- Medicaid
- Private Insurance

Medicare regulations require that patient care be provided in a home setting, which can include nursing homes and assisted living facilities. Short stays in inpatient facilities are allowed when medically indicated.

In order to qualify for the Medicare Hospice Benefit, a physician must certify that the patient has less than six months to live, and the patient must sign an elective statement that he or she understands the nature of the illness and of hospice care. Under Medicare and Medicaid guidelines most hospice care is covered with little or no out of pocket expense.

Most private insurance companies include hospice as a benefit and the Horizon Home Health and Hospice staff can assist patients in learning more about their coverage options. If coverage is not available or is insufficient, the patient and family can engage providers and pay for service out of pocket. Horizon Hospice will provide most services without charge if the patient has limited or no financial resources.

It is the responsibility of the family to provide

- Caregivers for the patient. Horizon can provide a list of caregivers available for hire, but does not provide for routine 24 hour care.
- Room and board in nursing homes, residential care facilities or shelter homes unless the patient qualifies under Medicaid guidelines.
- Drugs, nutritional supplements, and equipment not related to the terminal diagnosis or those considered inappropriate for palliative care.
- Active, curative treatment that is not deemed appropriate by the Horizon Hospice Medical Director.
- Housekeeping, shopping or delivery services other than assistance that volunteers are willing and able to provide.
- Personal supplies.
- Continuous nursing coverage that is not medically indicated.
- Ambulance transport to a hospital or nursing home unless it is arranged by Horizon Hospice.
- Resuscitative efforts by emergency medical personnel or artificial life support, which includes artificial hydration and nutrition that does not maintain or improve the patient's quality of life.
- Respite care when there are ample family members or friends to provide assistance to the primary caregiver.
- Payment for physician services when the attending physician is not employed by Horizon Hospice. Office visits and treatments provided by the attending physician in his office may be partially reimbursed under Medicare Part B.