

Case Study

Mrs. Smith is an 84-year old female who has had a diagnosis of dementia for 12 years. She has lived with and been cared for by her 62-year old daughter, Marie for the past 5 years. Though the care had been exemplary, Mrs. Smith has had three hospitalizations for recurrent aspiration pneumonia in the last ten months. She is no longer able to communicate effectively and has been losing weight steadily.



Marie is unsure of her ability to manage her mother's care anymore. Although she would like her to remain at home, she is feeling stress in every facet of her life. After careful consideration, Marie has begun to research placement options at facilities that specialize in dementia care.

Despite discussions with friends, family members, and medical professionals, Marie remains confused, stressed, and unsure of the options. She believes that comfort is the most appropriate healthcare goal in this situation, but doubts her own feelings, and does not know where to turn...**Hospice can help.**

Special Challenges of Dementia

Hospice is a well-known option for people living with cancer, yet it is rarely utilized for people living with advanced dementia. Patients with advanced dementia are frequently not recognized as having a terminal illness, and there is a common misperception that such patients do not benefit from Hospice care.

Did you know:

- An estimated 4.5 million Americans have Alzheimer's Disease
- In 2001, an estimated 50,000 deaths were attributed to dementia (8th leading cause of death in the U.S.)
- The disease process can last between 2 to 20 years, (average is 4 to 8 years)
- The "end-stage" of dementia often lasts between 1 and 3 years
- Approximately 50% of nursing home residents are thought to have some sort of dementia
- In 2003, just 91,000 of the 950,000 Hospice patients (9.6%) had a dementia diagnosis
- **Pain** – careful assessment, especially the use of nonverbal clues, is vital for proper pain management
- **Agitation** – behavioral issues are often problematic, but effective management techniques exist
- **Nutritional concerns** – swallowing problems often cause concern among family members
- **Infections** – recurring urinary tract or respiratory infections become increasingly difficult to treat
- **Delirium** – changes in environment, including hospitalizations, can be especially disorienting



How Hospice Can Help Your Practice

Answers to Questions Physicians Often Ask About Hospice Care

Most Physicians know that Hospice is designed to help terminally ill patients and their families with relief from cancer pain and other symptoms. But here are answers to questions physicians often ask about Hospice care and how it can help busy physicians and their office staff cope with the demanding problems seriously ill patients can present.

How do we know if a patient is Hospice appropriate?

The National Hospice & Palliative Care Organization has published Guidelines for Prognosis in Non-Cancer Diseases. We use these to help primary care physicians and specialists manage patients with end-stage heart, lung, Alzheimer's, and other non-malignant conditions. For a copy, please call (716) 989-2009.

Can I bill Medicare or commercial insurance for services once my patients are referred to Hospice?

Yes, you can. Primary attending physicians continue to bill Medicare Part B and other carriers for the patient's regular office visits or for all covered services. New billing codes are also available for care plan oversight, so reimbursement can be obtained for telephone calls to nurses, as well as patients.

Do commercial insurance plans have Hospice benefits?

Most third-party payers now have a Hospice benefit, similar to the Hospice Medicare Benefit.

Do you offer a Hospice evaluation service?

Yes. Hospice Buffalo staff are available to meet with, evaluate, and educate patients and families who you believe are appropriate for Hospice services. *There is no fee for this service.* If, during the evaluation, your patient chooses Hospice care and you approve of this decision, admission to the program can start right away. Contact Hospice Buffalo Admissions at (716) 686-8000.

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- Myths & Facts of Hospice Care
- Delivering Bad News in a Good Way
- Coping with Grief and Loss (Life Transitions Center)

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