

Palliative Medicine and Hospice: What's the Difference?

	Palliative Medicine	Hospice Care
Definition	Aggressive pain and symptom management while seeking treatment.	Aggressive pain and symptom management without seeking treatment.
Admission Criteria	Patient has a chronic disease and the need for pain or other type of symptom management. Symptoms can include shortness of breath, nausea, anxiety and depression. Patient can continue curative treatment such as chemo or radiation therapy.	Patient has a life-limiting illness and chooses comfort rather than curative care. Patient can, in some cases, continue to receive physical, occupational and speech therapy for increased quality of life.
Life Expectancy	Average life expectancy is 1-2 years if the chronic disease process were to progress in the "normal" way.	Average life expectancy is 6 months or less if the life-limiting illness were to progress in the "normal" way.
Nursing Care	Advance Practice Nurse (APN) makes visits on a regular basis to provide treatment and support for pain and symptom management.	Registered nurse makes visits at least weekly to provide support for pain and symptom management.
Medications	The cost of medications is the patient's responsibility.	The cost of medications related to the life-limiting diagnosis, as well as medications for comfort, is covered at 100%.
Durable Medical Equipment	The cost for oxygen, hospital bed, wheelchair, etc. is covered under the patient's health insurance benefit with the possibility of out-of-pocket expense.	All equipment is covered at 100%.
Aide Services for Personal Care	Aide services are not covered under palliative care but can be obtained from a private duty company as an out-of-pocket expense.	Aide services are provided based on patient need ; up to seven days per week.
Social Worker	Social worker is not routinely covered under palliative care but can be provided as an out-of-pocket expense.	A social worker provides regular visits for advance care planning, financial review, extended counseling and family support.
Spiritual Care	Spiritual care is not routinely covered under palliative care but can be provided as an out-of-pocket expense.	Spiritual care is provided for the patient and family as needed and bereavement is provided to the family for 13 months following the patient's death.
Volunteers	Volunteers are not covered under palliative care.	Volunteers are provided as needed to support the patient and family.
Deductibles and Co-Pays	Advance Practice Nurse visits are billed as a specialty physician office visit with a 20% patient co-pay which may be an out-of-pocket expense.	Deductibles and co-pays do not apply for hospice related diagnosis.



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