



SETTING THE RECORD STRAIGHT

# Myths vs. Facts of Hospice

Misunderstandings about hospice can keep families from care that could help them. Here are the facts behind the most common myths.



*“Ask us anything — the more you know, the more confident your choices.”*

**MYTH** If you have heart failure and secondary renal failure, you must stop dialysis to receive hospice, because it's an aggressive intervention.

**FACT** As long as the kidney failure is **not related** to the terminal heart failure, you can continue dialysis. Hospice covers the terminal diagnosis; anything unrelated stays covered by your primary insurance as it always has.

**MYTH** When you sign onto hospice, all medications except comfort meds must stop, and morphine is added — hastening the end of life.

**FACT** You have the right to **continue any medications** of your choosing, including over-the-counter and supplements. Hospice covers medications for the terminal diagnosis; unrelated conditions — like diabetes and insulin — remain covered by your primary insurance.

**MYTH** On hospice, physical therapy is limited to a set frequency and duration — for example, once a week for three weeks.

**FACT** Physical therapy is a **required hospice benefit**. Treatment follows the therapist's professional evaluation of the patient's individual needs — not an arbitrary limit set by the hospice.

**MYTH** If you're on Medicaid in a facility, signing onto hospice means Medicaid won't pay your room and board.

**FACT** Medicaid **still pays room and board** if you previously qualified. The only change is billing routing — Medicaid reimburses through the hospice to the facility.

**MYTH** Starting morphine will kill people faster, and hospice shortens a person's life.

**FACT** Morphine is one of the oldest, most stable medicines in western medicine — 5 mg oral is roughly one 5/325 Norco tablet. Used appropriately it can improve oxygenation. Statistically, **people on hospice live about 7 days longer** than those with the same diagnosis without it, because staff monitor and fine-tune care regularly.

**MYTH** You can only enroll in hospice if your physician refers you, and you must use the provider a facility recommends.

**FACT** **Anyone can refer** to hospice — including the patient. And regardless of any facility's preferred provider, you have the right to choose any hospice you feel is the best fit. **The choice is yours.**



Have a question about your coverage?

Call us and we'll walk you through it — starting with a simple informational meeting.

**(313) 551-4626**

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