






## CARE COMPARISON

	SUPPORTIVE CARE	HOSPICE CARE
<b>DEFINITION</b> 	<p>An interdisciplinary consult service focused on providing primary care for patients with a serious illness. <b>Services can be provided along either curative, life-prolonging care, if desired.</b></p>	<p>An interdisciplinary approach to providing care for patients at the end of life; focused on pain and symptom management. <b>Comfort is the primary goal.</b></p>
<b>ELIGIBILITY</b> 	<p>Diagnosis of an advanced illness <b>at any stage</b> of a disease; ideally early in the course of the illness.</p>	<ul style="list-style-type: none"> <li>• <u>Physician's order</u></li> <li>• <u>Diagnosis of a terminal illness</u></li> <li>• <u>Certification by a physician of likely prognosis of less than 6 months</u></li> </ul>
<b>GOALS OF CARE</b> 	<ul style="list-style-type: none"> <li>• Disease education</li> <li>• Assistance determining <b>treatment options for improved quality of life</b></li> <li>• Pain and symptom management</li> <li>• Help to cope with the stressors of living with an illness including psychosocial and sociological</li> </ul>	<ul style="list-style-type: none"> <li>• Pain and symptom management</li> <li>• <u>Improved quality of life</u></li> <li>• Support the natural dying process</li> </ul>
<b>LOCATION SERVICES PROVIDED</b> 	<ul style="list-style-type: none"> <li>• <u>Home</u></li> <li>• <u>Skilled Nursing Facility</u></li> <li>• <u>Assisted Living Facility</u></li> <li>• Hospital</li> </ul>	<ul style="list-style-type: none"> <li>• <u>Home</u></li> <li>• <u>Skilled Nursing Facility</u></li> <li>• <u>Assisted Living Facility</u></li> <li>• <u>Inpatient Hospice House</u></li> <li>• Hospital</li> </ul>
<b>PAYOR SOURCE</b> 	<p>Insurance is billed for the physician/nurse practitioner services. Medicare Part B will pay 80% of charges; the remainder is billed to a secondary insurance or to the patient.</p> <p><b>Transitions Supportive Care is committed to providing services regardless of insurance coverage or patient's ability to pay.</b></p>	<p>Patients elect hospice Medicare benefit, with most services and equipment paid at 100%. There may be out-of-pocket expenses for room &amp; board at a facility. Many private insurances also offer a hospice benefit.</p> <p><b>Big Bend Hospice is committed to providing services regardless of insurance coverage or patient's ability to pay.</b></p>



# CARE CONTINUUM

Transitions Supportive Care provides specialized medical care focused on pain and symptom relief for people with a serious illness. The goal is to improve quality of life for both the patient and the family.

With our team of doctors, nurses, social workers, trained volunteers, and other specialists, we work together with a patient's physician to provide an extra layer of support. Supportive care is appropriate at any age and at any stage in a serious illness - and can be provided along with curative treatment.

## How to know if you or someone you know may benefit from Supportive Care:

### Frequent hospital readmissions

▶ *"In the last 3 months, Mom has been back and forth to the hospital, for the same reason at least 2 times."*

### Persistent symptoms despite treatment

▶ *"Despite following doctor orders, my wife's pain and symptoms haven't gotten better."*

### Artificial nutrition/hydration request

▶ *"Grandma is getting a feeding tube even though it won't improve her condition or prolong her life."*

### Significant weight lost in last 3-6 months

▶ *"My husband keeps losing weight. He has no appetite left. Three months ago he weighed 150 lbs and now he weighs 135 lbs."*

### No advance directive + advanced disease progression

▶ *"We didn't have a talk with Grandpa before he got sick. We have no idea what he would want us to do if he can no longer communicate with us."*

### Function decline

▶ *"Just 6 months ago my aunt was independent. Then she needed a walker. Now she requires even more help to get around"*

### Metastatic Cancer

▶ *"My sister's cancer has spread from the place they originally found it to another location."*

### Chronic care need

▶ *"My husband was admitted from the nursing home to the hospital. He now depends on the nurses and aides for everything and his condition has worsened."*

### 70+ with 2 comorbidities

▶ *"Dad is 70 and has congestive heart failure and now his doctor is saying his kidneys aren't functioning properly."*

### Dementia diagnosis

▶ *"We are so confused and feel helpless since my uncle was diagnosed with Dementia/Alzheimer's. We feel alone and without proper tools to deal with this."*



For more information on palliative services

**Call (850) 446-1077**

[www.TRANSITIONS-SUPPORT.ORG](http://www.TRANSITIONS-SUPPORT.ORG)