



Photo Courtesy: LPETTET/Getty Images If you or someone you love has been diagnosed with a terminal illness, it's natural to worry and wonder about what kind of medical care will be needed in the final months of life. Depending on the illness and the estimated time remaining, hospice care may be an option. The term actually covers a range of care methods, usually depending on the wishes of the patient and the immediate family, although some illnesses may require very specific types of care. Care examples include professional care provided around the clock at home and professional care provided at a hospice care facility. Regardless of the specifics, the primary purpose of hospice care is to make the patient as comfortable as possible in the final days, weeks or months of life. However, to receive this much-needed assistance, patients must meet a certain level of medical need based on specific requirements for inpatient facilities and payment. Breaking Down the Four Types of Hospice Care Hospice care actually includes four different types of care designed exclusively for terminally ill patients — usually those with six months or less to live. Families don't necessarily choose a care type based on the seriousness of the patient's current condition. In many cases, the patients are seniors with Medicare insurance, and their insurance may dictate the type of care that is covered by the policy. In other cases, specific type of care to keep the patient comfortable. Photo Courtesy: laflor/Getty Images Level one hospice care is routine home care that allows the patient to remain at home with family. A skilled nurse or hospice worker visits regularly to provide help with personal care and make sure the patient is comfortable. Level two hospice care involves continuous home care for anywhere from eight hours a day to the full 24-hour period. During these periods, at least 50% of the patient's care is provided by a nurse. Families sometimes alternate between level one and level two hospice care as the patient's need for care improves or worsens. Level three hospice care refers to care that takes place in an inpatient setting at a hospice care facility. The care needs of a level three hospice patient may be similar to those of a level two patient, such as assistance with severe pain, nausea and vomiting, shortness of breath, anxiety and panic, or other problems that are harder to care for at home. Level four hospice care is respite care that occurs when a family temporarily admits a patient to an inpatient facility to give family members who are acting as primary caregivers a break. It could be that the family can't care for the patient, but it does benefit the patient by providing ongoing care when their family can't do it themselves. Paying for Hospice Care CoverageRegardless of the type of hospice care chosen by your family, the care will be too costly for most people to pay the full expense out of pocket. Patients who are older than 65 should be receiving Medicare insurance benefits. Medicare Part A (hospitalization insurance) includes a Medicare Hospice Benefit to help cover costs for patients officially diagnosed as terminal by a physician. Photo Courtesy: LPETTET/Getty Images Patients who have served in the military can use Veterans' Administration (VA) benefits to pay for hospice care. Those with low income and minimal resources may qualify for Medicaid insurance benefits to help pay for services. Medicaid eligibility varies by state and must be applied for through the state. Private insurance often includes provisions for hospice care, but this coverage can vary as well. Qualifying for Inpatient Hospice Care Services. Medicaid eligibility varies by state and must be applied for through the state. suffer from some form of dementia like Alzheimer's disease — they are often more comfortable in their own homes. For that reason, level one and level two hospice care are usually preferred over inpatient services, but if a patient's health begins to deteriorate quickly and the nurse or the patient's family can't properly provide comfort and care at home, then the patient should be moved to an inpatient setting. Photo Courtesy: LPETTET/Getty Images In general, a patient needs to be experiencing serious health complications with uncontrollable pain, respiratory distress, uncontrollable seizures, acute anxiety, severe depression, progressive delirium or a need for intravenous (IV) medications. In some cases, the symptoms could be temporary, with patients only needing inpatient care for a short period of time. In those cases, they may be able to complete hospice care back in their home environment for maximum comfort. MORE FROM SYMPTOMFIND.COM CCO/StockSnap/Pixabay Plants are a great addition to any home, and caring for plants is an enjoyable hobby for many people. Indoor plants allow year-round access to gardening, and can even improve air quality. Many houseplants are easy to grow, but they must receive the appropriate care to thrive. Proper watering and lighting are the most important aspects of indoor plant care, while temperature and humidity also play a role. Cacti and succulents prefer hot, dry climates, while tropical plants thrive in warm, humid environments. The tricky part is to mimic the plants came from. Watering plants thrive in warm, humid environments. in a dish of water. When watering the plant try not to wet the foliage, while ensuring the entire soil is moistened. If there is water coming out of the pot in water and the roots will pull up whatever they need. Check the saucer and dump any water that's still standing after an hour. Providing too much water for certain plants, such as cacti, can easily kill them, so be sure to learn proper watering technique for these types. LightingLighting is not as serious of an issue as giving the wrong amount of water, although it's still important for promoting plant health. Some plants do prefer direct sunlight, but it may be hard to provide inside a house. Placing a plant in a window in a south or west direction should provide enough light, but some plants may need extra light from a grow lamp. Succulents need a lot of direct sunlight, and placing them in a sunny window sill allows them to thrive. Most plants, however, prefer to be in a brightly lit spot out of direct sunlight. Placing them near an east, west, or south facing window is a good choice. The basics of plant care come down to knowing which plants like full sunlight, bright light without direct sun, or low light conditions and shade. Temperature The majority of plants do well in average indoor temperatures of 60°F to 75°F, but not below 50°F to 55°F. Of course, each species of plant has its own likes and dislikes, so it's important to know your plant's ideal temperature needs. Humidity Many indoor plants originate from tropical climates, which means they're used to high levels of humidity. Most plants tend to adjust well to indoor humidity levels, but some will require extra measures. This can be achieved by misting them, providing a humidifier. Feeding Plants need food for extra nutrition and to look healthy. Feeding plants is easy and can be done when you're watering them. You can buy a generic plant food that's formulated for most plants, or purchase food formulated for specific types. It's important to follow the feeding instructions carefully, since over-feeding is as bad as not giving enough. MORE FROM QUESTIONSANSWERED.NET By its very nature, hospice care is holistic. This means attention is given to the physical, emotional, social, psychological and spiritual needs of patients. This care is offered at three levels, including routine care, respite care and inpatient care. Routine Care Delivered at home or wherever the patient may call home (possibly a nursing home or other assisted living facility). Medication may be given to alleviate symptoms. A nurse may visit a few times a week to provide a higher level of care, but the majority of care is provided by family and friends, if the patient is at home. Social workers, chaplains and hospice volunteers may visit. Respite care offered when a patient's family or other close caregivers to rest or attend to other areas of their lives. Provided occasionally for a maximum of five days every 90 days. Can be provided in a hospital, long-term facility or short-term hospice home. General Inpatients may be admitted to a higher level of care for aggressive symptom management. May be given in a hospital or dedicated hospice facility.