



Raising the Standard of Care

A FAMILY GUIDE & CHECKLIST

Is It Time for Hospice?

A gentle guide to recognizing changes, understanding hospice eligibility, and knowing when it may be time to ask questions.

Stonewood Hospice | Southeast Texas

409.351.3262 • stonewood-hospice.com

Educational resource. Individual hospice eligibility must be determined by qualified clinicians.

You do not have to be certain before you ask.

Families often wait because they think hospice is only for the final days of life, or because no one has clearly explained when it may be appropriate. The truth is simpler: if you are noticing a pattern of decline, repeated medical crises, or a growing need for comfort and support, it is reasonable to ask about hospice.



The basic Medicare guideline

Hospice is generally available when physicians certify that a person has a life expectancy of about six months or less if the terminal illness follows its normal course, and the patient elects comfort-focused hospice care for that illness.

The six-month guideline is not a deadline. A person may continue hospice beyond six months when they remain eligible and are recertified.

WHAT HOSPICE FOCUSES ON

Hospice is about comfort, dignity and quality of life.

- Comfort & symptom support
Managing pain, shortness of breath, nausea, anxiety and other distressing symptoms.
- Care for the whole family
Emotional, practical and spiritual support can help both the patient and the people who love them.
- Care wherever home is
Hospice is often provided in a private home, senior living community, assisted living setting or nursing facility; short-term inpatient care may be used when needs are more intense.

Changes Worth Discussing

This checklist does not determine hospice eligibility. It is a tool to help you notice patterns and prepare for a conversation with a physician or hospice professional.

Health & medical changes

- ☐ Repeated ER visits or hospital stays
- ☐ An illness continues to progress despite treatment
- ☐ Increasing pain, shortness of breath, nausea, agitation or other difficult symptoms
- ☐ Recurrent infections or complications
- ☐ Recovery from each illness or hospitalization seems harder or takes longer

Daily function & independence

- ☐ More help is needed with bathing, dressing, eating, toileting or moving around
- ☐ More time is spent in bed, sleeping or resting
- ☐ Increasing weakness, fatigue or falls
- ☐ Less interest or ability to participate in usual activities
- ☐ Walking or transferring has become more difficult

Eating, weight & communication

- ☐ Noticeable loss of appetite or reduced food/fluid intake
- ☐ Unintentional weight loss
- ☐ Difficulty chewing or swallowing
- ☐ Increasing confusion, communication changes, or progressive decline related to dementia / neurological illness

Goals, caregiving & quality of life

- ☐ The patient says comfort is more important than additional aggressive treatment
- ☐ The family is increasingly overwhelmed by caregiving needs
- ☐ Medical visits feel more burdensome than helpful
- ☐ The patient wants more time at home and fewer hospital trips

If you checked several items - or if one change feels especially significant - you do not need to wait for a crisis to ask questions. A hospice conversation can help you understand what support may be available.

The pattern matters more than a single symptom.

Hospice eligibility is based on the person's overall condition, prognosis and disease progression. A diagnosis by itself does not automatically mean hospice is appropriate - and no single checklist item can make that decision.

Life-limiting illnesses commonly seen in hospice may include:

Cancer

Advanced heart disease / CHF

COPD / lung disease

Alzheimer's & other dementias

Stroke & neurologic disease

Parkinson's / ALS

Kidney disease

Advanced liver disease

Other progressive illnesses



Questions that can clarify what is changing

- Are hospital or ER visits becoming more frequent?
- Is the person getting weaker or needing more help day to day?
- Are symptoms harder to control at home?
- Has eating, weight or alertness changed?
- Are treatments helping as much as they once did?
- What matters most now - more treatment, comfort, time at home, or fewer hospital trips?

A common misconception

“If we call hospice, we are committing to it.”

You can ask questions before making a decision. A conversation can simply help your family understand eligibility, services and next steps.

If you call Stonewood, here is what comes next.

The first call does not need to be complicated. You do not need perfect records, the “right” words, or certainty that hospice is the answer.

1

We listen

Tell us what has been happening, what has changed, and what your family is worried about.

2

We help review the situation

Our team can help you understand whether a hospice evaluation may be appropriate.

3

We coordinate when needed

If you choose to move forward, the hospice team works with the appropriate physicians on the medical certification and plan of care.

4

You stay part of the decision

We explain options and answer questions so your family can decide what feels right.



Helpful information to have nearby

- | | |
|--|---|
| ☐ Primary diagnosis and other major health conditions | ☐ The name of the patient’s doctor or specialist |
| ☐ Recent hospitalizations, ER visits or infections | ☐ Insurance / Medicare information, if available |
| ☐ Current medications and symptom concerns | |

You are allowed to ask before you are sure.

If something feels different, harder, or more fragile than it did a few months ago, you do not have to wait for another emergency to ask what hospice support might look like for your family.

Questions to ask a hospice provider

- ☐ What services are included?
- ☐ What support is available after hours?
- ☐ How are medications and equipment handled?
- ☐ Where can hospice care be provided?
- ☐ What happens if symptoms suddenly worsen?
- ☐ How do you support family caregivers?

Ready to talk?

Call Stonewood or scan below.



SCAN TO LEARN MORE

Notes / questions for our care team



Stonewood Hospice

409.351.3262 • stonewood-hospice.com

Raising the Standard of Care Across Southeast Texas



Comfort begins with a conversation.

Call 409.351.3262 • stonewood-hospice.com

About this guide

This guide is intended for general education and conversation planning. It is not a diagnosis, medical advice, or a determination of hospice eligibility. Hospice eligibility depends on an individual clinical assessment and required medical certification.

Information reviewed August 2026 using current Medicare and CMS hospice guidance. Under the Medicare Hospice Benefit, physicians certify that the patient is terminally ill with a life expectancy of six months or less if the illness runs its normal course. Hospice may continue beyond six months when eligibility continues and required recertification is completed.

Sources

Medicare.gov - Hospice Care Coverage

Centers for Medicare & Medicaid Services (CMS) - Hospice Services / Medicare Hospice Benefit

Stonewood Hospice - current service and contact information

Stonewood Hospice

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Honoring Life • Bringing Comfort • Offering Hope

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