CHARITY
HOME HEALTH SERVICES

Palliative Care and Hospice Care

A plain-language comparison for patients and families

Both approaches support comfort, communication, and quality of life, but they are not the same.

	Palliative care	Hospice care
Main purpose	Relieve symptoms and support quality of life during serious illness.	Provide comfort-focused care near the end of life.
Treatment	May be provided alongside treatment intended to cure or control the illness.	Focuses on comfort rather than treatment intended to cure the terminal illness.
Timing	May begin at any stage of serious illness, based on need and program eligibility.	Begins when a physician certifies a terminal prognosis and the patient elects hospice. Medicare generally uses a prognosis of six months or less if the illness runs its normal course.
Where care occurs	Home, clinic, hospital, or another setting.	Often where the person lives, with an interdisciplinary hospice team.

Home-based palliative care

Home-based palliative care combines symptom support, medication review, caregiver education, and coordinated clinical follow-up to help patients live more comfortably while continuing appropriate treatment.

Questions to discuss with the care team

- ☐ What symptoms or daily challenges need the most support?
- ☐ What treatments does the patient want to continue?
- ☐ Who will coordinate with the patient's physicians and family?
- ☐ Which services are covered by the patient's insurance plan?
- ☐ Would palliative care, hospice, or another home health service best fit the patient's current goals?

Sources: National Institute on Aging - Palliative Care and Hospice Care | Medicare Hospice Care Coverage

Educational use: Follow your individualized care plan and instructions from your physician, nurse, therapist, or pharmacist. Call 911 for a medical emergency.