

YOU HAVE QUESTIONS. WE HAVE ANSWERS.

Call 231.722.0382 if you have more questions



WHAT IS PALLIATIVE CARE?

Palliative care improves the quality of life of patients and their loved ones by relieving the acute pain, and symptoms of a serious illness. Designed to help patients feel better, palliative care can help to relieve symptoms such as loss of appetite, pain, shortness of breath, nausea/vomiting, diarrhea, constipation and sleeplessness. Palliative care educates patients and their loved ones to aid in health care decision-making. Palliative care is a supportive type of health care designed to help patients remain as active and comfortable as possible. Palliative care practitioners take the time to get to know each patient, which helps to define their individual goals and design care specifically for them.

If palliative care is new to you, you may have questions for your physician and Harbor Palliative Care. Below are answers to frequently asked questions about palliative care.

HOW DOES PALLIATIVE CARE WORK? WHO QUALIFIES?

A physician at the onset of a serious illness or the onset of uncomfortable symptoms related to the serious illness refers individuals to palliative care. Palliative care is for anyone with a serious illness such as; cancer, heart and lung diseases like CHF and COPD, end stage renal disease, advanced liver disease, dementia, ALS, HIV/AIDS and others. Palliative care can be provided to patients at any stage of their illness. The intention of palliative care is to provide symptom relief and information to the patients and their loved ones so they can determine personal goals and desired outcomes. Many times, education is provided about the course of a serious illness and its possible treatment. This education helps deliver an informed perspective so patients can make choices about the future medical care. Palliative care clients can still pursue aggressive/curative treatments while receiving Harbor Palliative Care. If your provider does not mention palliative care, you can ask about Harbor Palliative Care.

WHAT SERVICES ARE INCLUDED?

A team of specially trained professionals provides the services from Harbor Palliative Care. Physicians, nurse practitioners, RNs and social workers provide clinical evaluations and care discussions.

Harbor Palliative Care includes the following services:

- Exceptional pain and symptom management.
- Care coordination with your current physicians and anyone else who is part of your healthcare team to provide an “extra” layer of support.
- Completion of your advance directive so that your family and physicians are aware of the kind of care you want or do not want to receive.

WHAT IS NOT COVERED?

Harbor Palliative Care is a consult service; patients will continue their relationships with their PCP/ specialists or the community health system for urgent needs as our practitioners are available M-F 8am to 4:30pm. Harbor Palliative Care treats acute pain associated with a serious illness; it does not treat chronic pain or provide primary care services.

Although we can discuss and refer patients to home care agencies and community services, Harbor Palliative Care does not provide personal care, homemaking services nor transportation.

WHERE DO PATIENTS RECEIVE PALLIATIVE CARE?

Most Harbor Palliative Care visits are completed in a client’s home or where they call home such as an assisted living, rehabilitation center, or skilled nursing facility. Harbor Palliative Care also partners with Cancer and Hematology Centers of West Michigan (CHCWM) to service their clients directly at their Muskegon cancer center. Harbor Tele-Health is an option for visits allowing flexibility in location and scheduling.

WHO PAYS FOR HARBOR PALLIATIVE CARE?

Palliative care is a medical specialty that is covered the same way as other consulting physician specialties. Most insurance plans, including Medicare and Medicaid, cover all or part of Harbor Palliative Care consult with little or no copay.

HOW FREQUENTLY WILL THE PALLIATIVE CARE TEAM SEE ME?

The Harbor Palliative Care team will work with you to decide the timing of your visits. Some clients with acute pain, for example, may have appointments that are more frequent. Many clients have contacts that may include follow up phone calls and other care coordination activities such as prior authorizations for a recommended treatment. Other clients have one consult and are comfortable with the goals established after the initial visit.

DO I HAVE TO GIVE UP MY OWN DOCTOR?

The Harbor Palliative Care team provides support and works in partnership with your primary doctor or specialist. We communicate with them regularly throughout your treatment with us. Your primary doctor will continue to direct your care and play an active role in your health care.

HOW DO I ASK FOR PALLIATIVE CARE?

You do not have to wait until your physician brings up palliative care. Ask your physician to explain your illness and any current or future treatments and procedures that you may require as your disease progresses. Telling your physician exactly what quality of life means to you will assist you, your physician and loved ones in making an informed decision about the care you want.

HOW IS HARBOR PALLIATIVE CARE DIFFERENT FROM HARBOR HOSPICE?

Hospice focuses on the needs of patients who are in the end stages of life – where efforts to manage a condition focus on comfort care and not a cure. Under hospice care, a physician must certify a patient to have a life expectancy of six-months or less. Because of sensitive nature of a hospice patient, hospice provides home health aide visits in the home, a 24-hour on call service and multiple visits each week, as necessary.

Palliative care, on the other hand, is effective when doctors and patients are actively treating a serious illness, but not necessarily life threatening in the short term. For example, palliative care might help a patient with heart failure by treating shortness of breath or helping a cancer patient with fatigue and pain. Palliative care is also different from hospice as palliative care patients can continue to receive aggressive and curative kinds of treatment like chemotherapy, radiation, dialysis and surgery while receiving palliative care. However, palliative care does not provide a home health aide, nor the various visits or on call services. Harbor Palliative Care does partner with a variety of home health agencies or specialty therapies as appropriate.

IF THE TIME COMES, CAN I TRANSITION TO HOSPICE CARE?

Harbor Palliative Care works closely with Harbor Hospice and can easily transition patients from one program to another. A patient considering hospice care or wondering about the increased services hospice provides can request a hospice informational visit at any time, and without cost or obligation.

WHAT IS ADVANCE CARE PLANNING?

Advance care planning is making decisions about the healthcare you would want to receive or not want to receive if you are facing a medical crisis. These are your decisions to make based on your personal values, preferences, and discussions with your loved ones. During the advance care planning process, an individual elects an advocate and the subsequent conversation helps the advocate understand your goals and values. This conversation can also lead to a completion of a Durable Power of Attorney for Healthcare (also called an Advance Directive). Harbor Palliative Care offers advance care planning to each patient and family.