OAKRIDGE
HOSPICE

Supporting the Last Moments with Compassion.

A GUIDE FOR PATIENTS, FAMILIES & CAREGIVERS

A Family Guide to *Hospice Care*

Comfort, support and clear answers for every step of the journey, so you never have to face it alone.

ALWAYS HERE WHEN YOU NEED US MOST

(480) 508-8588

Oakridge Hospice cares for people living with a life-limiting illness, and for everyone who loves them, wherever they call home.

Accredited by The Joint Commission

Oakridge Hospice
13416 N. 32nd Street, Suite 109B
Phoenix, AZ 85032

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Secure eFax (480) 999-5212

WELCOME

You don't have to navigate this *alone.*

When someone you love is facing a serious illness, the questions can feel endless: What is hospice? Is it time? Who pays? What happens next? This guide answers them in plain language, so you can focus on what matters most.

Hospice isn't giving up. It's choosing comfort, connection and quality of life, and living on your own terms, surrounded by the people and places that matter most. At Oakridge Hospice, our team of physicians, nurses, aides, social workers, chaplains and volunteers shares one plan of care built around your loved one's goals, and we support the whole family before and after a loss.

Keep this guide close, share it with family members, and call us anytime. There's no question too small, and no obligation.

With care, the Oakridge Hospice team

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KEEP THIS NUMBER HANDY

(480) 508-8588

Clinical support is available 24 hours a day, 7 days a week for patients and families on service.

On hospice service? Call Oakridge first, before 911, for symptoms or changes. For a life-threatening emergency unrelated to the hospice diagnosis, call 911.

UNDERSTANDING HOSPICE

Care focused on *comfort*, *dignity* and time together.

Hospice is specialized care for people with a life-limiting illness, generally when a physician believes life expectancy is six months or less if the illness runs its usual course. The focus shifts from curing the illness to easing pain and symptoms and supporting the whole family.

What hospice provides

- Expert pain and symptom management
- Regular visits from nurses, aides and your care team
- Medications, medical equipment and supplies related to the hospice diagnosis
- Emotional and spiritual support for the patient and family
- Teaching and support for caregivers
- Grief support for loved ones, before and for a year after a loss

Where care happens

Hospice comes to wherever the patient calls home:

- A private residence
- An assisted living community or group home
- A skilled nursing facility

When symptoms can't be managed at home, short-term inpatient care is available.

Myths & facts

Myth: Choosing hospice means giving up.
Fact: Hospice shifts the focus to comfort and quality of life. Many families wish they had started sooner because of the support it brought.

Myth: Hospice is only for the last few days.
Fact: Hospice can help for months. Care continues as long as a physician recertifies that the patient remains eligible.

Myth: Hospice is only for cancer.
Fact: Hospice also helps people with dementia, heart, lung, kidney, liver and neurological conditions, and general decline.

Myth: We'll lose our own doctor.
Fact: Your physician can stay involved, and our team keeps them informed.

Hospice and palliative care: what's the difference?

Palliative care is comfort and symptom care that can begin at any stage of a serious illness, even alongside treatment meant to cure. **Hospice** is palliative care for people who have chosen to focus on comfort rather than cure, generally with a prognosis of six months or less.

IS IT TIME?

Signs it may be time *to start the conversation.*

Many families tell us they wish they had called sooner. Asking questions is free and carries no obligation. A conversation may help when you notice:

01
Frequent hospital or ER visits

02
More falls or declining mobility

03
Unplanned weight loss

04
Worsening symptoms or pain

05
Repeated infections

06
A growing need for help with daily care

Signs to discuss with a doctor, by illness

DEMENTIA & ALZHEIMER'S

Unable to walk without help, speech limited to a few words, needs help with all daily care, trouble swallowing or weight loss, recurrent infections.

COPD & LUNG DISEASE

Breathless at rest or with minimal effort, frequent ER visits or hospitalizations, continuous oxygen use, unintended weight loss.

KIDNEY DISEASE

Choosing to stop or forgo dialysis, worsening fatigue, nausea or confusion, fluid buildup that is hard to control.

LIVER DISEASE

Not a transplant candidate or choosing not to pursue one, recurrent fluid buildup or confusion, repeated hospitalizations.

HEART FAILURE

Short of breath or chest discomfort at rest, repeated hospital stays despite treatment, fatigue that limits nearly all activity.

CANCER

Cancer has spread despite treatment, side effects outweigh the benefits, spending most of the day in bed or a chair, increasing pain or fatigue.

STROKE, PARKINSON'S & ALS

Rapid decline in function or mobility, difficulty swallowing or breathing, weight loss or recurrent infections.

GENERAL DECLINE

Significant weight loss, increasing falls and weakness, needing more help with daily activities.

You don't need a doctor's referral to call.
Patients, family members, friends and professionals can all call us. We'll coordinate with the physician.

(480) 508-8588

Eligibility is always determined by a physician. These lists are general guides, not diagnostic criteria.

YOUR CARE TEAM

One plan. *One team.*

Medicare requires every hospice to provide care through an interdisciplinary team. At Oakridge, that team meets regularly, shares one plan of care, and keeps your own physician informed.

Hospice physician

Our medical director oversees the plan of care and works alongside your doctor.

Registered nurse

Your case manager: visits regularly, manages pain and symptoms, and teaches your family.

Hospice aide

Helps with bathing, grooming and personal care.

Social worker

Emotional support, advance directives, and help with benefits and community resources.

Chaplain

Optional spiritual support for any faith, or none.

Bereavement & volunteers

Companionship, respite and grief support for families.

Four levels of care

Medicare defines four levels of hospice care. Our team decides with you which level fits your loved one's needs at any given time.

MOST COMMON

Routine home care

Scheduled visits from the hospice team wherever the patient lives, with nurse support by phone 24/7.

DURING A CRISIS

Continuous home care

For short periods of crisis, a nurse or aide stays in the home for extended hours to manage severe symptoms.

WHEN HOME ISN'T ENOUGH

General inpatient care

Short-term care in a hospital or facility when pain or symptoms can't be managed at home.

FOR CAREGIVERS

Inpatient respite care

Up to five days of care in a facility so the family caregiver can rest and recharge.

> **Good to know:** hospice provides scheduled visits and 24/7 phone support, plus continuous care during a crisis. It doesn't provide round-the-clock caregivers long-term. Our social worker can help you explore options for added help at home.

PAYING FOR HOSPICE

The Medicare hospice benefit, *in plain language.*

For most patients, hospice care costs little or nothing out of pocket. Hospice is also covered by Arizona Medicaid (AHCCCS) and many private insurers. Our team will verify coverage for you at no cost.

Who qualifies

- Has Medicare Part A (Original Medicare or a Medicare Advantage plan)
- A hospice doctor and your regular doctor (if you have one) certify a life expectancy of six months or less if the illness runs its normal course
- The patient chooses comfort care instead of treatment to cure the illness, and signs a statement choosing hospice

What's covered

- Nursing, physician and aide services
- Social work, chaplain and grief support
- Medical equipment and supplies
- Drugs for pain and symptom management
- Short-term inpatient and respite care
- Therapy and dietary counseling, if needed

What it costs

- Nothing for covered hospice care, for most patients
- Up to $5 per prescription for pain and symptom drugs
- 5% of the Medicare-approved amount for inpatient respite care

What isn't covered

- Treatment intended to cure the terminal illness
- Care for the hospice diagnosis from other providers, ambulance or hospital care that isn't arranged by hospice
- Room and board at home, in assisted living or in a nursing facility

How benefit periods work

90 days	90 days	60 days
First benefit period	Second benefit period	Then unlimited 60-day periods

At the start of each period, a hospice physician recertifies that the patient remains eligible. Hospice is not limited to six months. Medicare still covers care for conditions unrelated to the hospice diagnosis under your regular coverage.

> **Your choices:** you may stop hospice at any time and return to regular Medicare coverage, and choose hospice again later if eligible. You may change hospice providers once in each benefit period, and you may keep your own doctor.

Summarized from Medicare's published hospice benefit (medicare.gov). Individual coverage varies. Call us to verify your benefits.

QUESTIONS FAMILIES ASK

Straight answers to *hard questions.*

Does choosing hospice mean giving up?

No. Hospice shifts the focus from curing the illness to comfort and quality of life. Many families say they wish they had started sooner.

Who pays for hospice?

Medicare Part A, Arizona Medicaid (AHCCCS) and many private insurers cover hospice for eligible patients. For most patients, there's little or no out-of-pocket cost.

Can we keep our own doctor?

Yes. Your physician can stay involved, and our team keeps them informed.

Can we stop hospice?

Yes, at any time, for any reason. Regular Medicare coverage resumes.

How soon can care begin?

After you call, we confirm eligibility with the physician and schedule an admission visit, usually within a day or two, and sooner when needed.

Do I need a doctor's referral to call?

No. Anyone can call us: patients, family members, friends or professionals. We'll coordinate with the physician.

Where is hospice care provided?

Wherever the patient calls home: a private residence, an assisted living community, or a skilled nursing facility.

What if my loved one lives longer than six months?

Hospice continues as long as a physician recertifies eligibility. Some people improve and "graduate" from hospice, and can return later if needed.

Is someone available at night and on weekends?

Yes. Clinical support is available 24 hours a day, 7 days a week for patients and families on service.

What does Oakridge's accreditation mean?

Oakridge is accredited by The Joint Commission with Medicare deemed status: an independent, on-site evaluation of our care against national standards for quality and safety.

Still have questions?

Call us anytime. A member of our care team will listen, explain your options, and help you decide what's right for your family.

(480) 508-8588

WHAT TO EXPECT

The hospice journey, *step by step.*

Every person's path is different. Knowing what's common can replace fear with confidence, and help you know when to reach out.

Starting hospice

After you call, our team confirms eligibility with your loved one's physician and schedules an admission visit, usually within a day or two, and sooner when needed. During that visit, a nurse will:

- Talk with you about goals, wishes and what matters most
- Review medications and order needed equipment and supplies
- Explain the hospice benefit and your rights
- Give you the 24/7 number to call with any question

Over the following days you'll meet the rest of your team: aide, social worker, chaplain if you'd like, and volunteers.

During the final weeks or months of life

As the body begins to slow down, you may notice your loved one:

- Sleeping more and having less energy
- Eating and drinking less. This is a natural part of the process; the body needs less fuel.
- Withdrawing from activities and wanting fewer visitors
- Talking about the past, or reflecting on life and relationships

Final days and hours

Not everyone experiences all of these changes. Your hospice nurse will help you understand what you're seeing.

BREATHING CHANGES

Breathing may become irregular, with pauses, or noisy from secretions. This usually isn't distressing to the patient. Repositioning can help.

SKIN & TEMPERATURE

Hands and feet may feel cool, and skin may look blotchy or bluish as circulation slows.

SLEEP & RESPONSIVENESS

Long periods of sleep and difficulty waking are common.

RESTLESSNESS

Some people become restless or confused. Let your nurse know, because medications and calming measures can help.

LESS URINE

Urine output decreases and may become darker.

HEARING

Hearing is believed to be one of the last senses to fade. Keep talking, reading or playing favorite music.

This guide is general education and isn't a substitute for medical advice. For anything specific to your loved one, call your Oakridge nurse.

How you can help, and *when to call us.*

Comfort at the bedside

- **Offer mouth care.** Moisten lips and mouth with swabs or balm. Don't force food or fluids.
- **Reposition gently** every few hours and keep bedding clean and dry.
- **Create calm:** soft lighting, familiar music, a gentle touch.
- **Say what's in your heart.** Many families find comfort in saying "thank you," "I love you," and "it's okay to rest."

Caring for yourself

- Accept help when it's offered, and ask for it when it isn't.
- Rest, eat and step outside when you can.
- Ask us about **respite care**: up to five days of facility care so you can recharge.
- Talk with our social worker or chaplain about how you're feeling.

Medication safety

- Store medications safely and use them only as prescribed.
- Follow your nurse's guidance for safe disposal.

Call Oakridge anytime, day or night

(480) 508-8588

Call us if your loved one has:

- Pain or shortness of breath that isn't relieved
- A fall, new agitation, or a sudden change
- Trouble with medications or equipment

Call too with any question, or when you believe your loved one has died. We'll guide you through every next step.

Call Oakridge first, before 911. For symptoms related to the hospice diagnosis, call us before going to the emergency room, calling 911 or seeing another provider. Care for the hospice diagnosis that isn't arranged by hospice may not be covered by Medicare. In a life-threatening emergency unrelated to the hospice diagnosis, call 911.

IF YOU HAVE A DNR ("ORANGE FORM")

Keep it where emergency responders can see it, such as on the refrigerator or by the bed.

PLANNING AHEAD

Make your wishes known, *while you can.*

Advance directives let you say what care you want, and who should speak for you, if you can't speak for yourself. They're one of the greatest gifts you can give your family.

Arizona's advance directives

CHOOSE A DECISION-MAKER

Health care power of attorney

Names a person you trust (your "agent") to make medical decisions for you if you can't make them yourself.

YOUR TREATMENT WISHES

Living will

Records your wishes about end-of-life treatment, such as life support, CPR and artificial nutrition.

THE "ORANGE FORM"

Prehospital medical care directive (DNR)

Tells emergency responders not to perform CPR. In Arizona it must be printed on orange paper and signed by you, a licensed health care provider and a witness.

FOR SERIOUS ILLNESS

POLST

A medical order you complete with your provider that turns your wishes into orders that travel with you across care settings.

Arizona also has a **mental health care power of attorney** for mental health treatment decisions.

Five simple steps

1 **Reflect**
Think about what matters most, and the care you would and wouldn't want.

2 **Talk**
Share your wishes with family, your doctor and the person you choose as your agent.

3 **Complete the forms**
Free Arizona forms, in English and Spanish, are available from the Arizona Attorney General at azag.gov.

4 **Share copies**
Give copies to your agent, family, doctors and hospice team.

5 **Register (optional)**
Store documents in the free Arizona Healthcare Directives Registry at azhdr.org.

Our social workers are glad to help you understand your options and complete the forms.

Your care never depends on whether you have an advance directive. You can change or cancel your directives at any time. This page is general information, not legal advice.

THE OAKRIDGE BUCKET LIST PROGRAM

Every life still holds *wishes worth fulfilling.*

A sunset drive through the desert. One more family dinner. A favorite song played live. Our care team helps patients turn meaningful wishes, big or small, into cherished moments.

From a wish to a memory

1 **Share the wish**
Tell your nurse or social worker, or share it at www.oakridgehospice.com.

2 **Plan it together**
We consider comfort, safety, equipment and timing so it's a joy, not a strain.

3 **Make it happen**
Staff, volunteers and community partners bring the wish to life, often right at home.

4 **Keep the memory**
With permission, we help capture it through photos, a keepsake or a letter.

> **What research shows:** a 2025 University of Texas at Arlington review, published in *Palliative & Supportive Care*, found that fulfilling bucket-list wishes supports well-being, strengthens family bonds, and brings gratitude and closure.

Ideas to get started

TIME WITH LOVED ONES

A family gathering, reconnecting with an old friend, a video call with family far away.

FAVORITE FLAVORS

A meal from a beloved restaurant, cooking a family recipe together.

ARIZONA EXPERIENCES

A sunset drive through the Sonoran Desert, a visit to a favorite park or old neighborhood.

MUSIC, ART & FAITH

A favorite song performed, a creative project, a worship service or blessing.

LEGACY & KEEPSAKES

A memory book, recorded stories, letters for future birthdays, handprints.

For current Oakridge patients and families. Wishes are planned with the patient's care team and fulfilled as health, safety and resources allow.

GRIEF & BEREAVEMENT SUPPORT

Grief is love with *nowhere to go.*

There's no right way or timeline to grieve. Our bereavement team supports families before a loss and for a year after.

What grief can feel like

Grief affects the whole person. It's common to experience:

- Sadness, numbness, anger, guilt or relief, sometimes all in one day
- Trouble sleeping, eating or concentrating
- Waves of emotion triggered by holidays, songs or places

Caring for yourself

- Be patient with yourself. There's no deadline.
- Keep simple routines: rest, meals, short walks.
- Talk about your loved one with people who listen well.
- Put off major decisions when you can.

Oakridge bereavement support

- Regular check-ins by phone and mail
- One-on-one support with our bereavement team
- Educational materials on grief and coping
- Referrals to community support groups and counselors

Reach out if grief feels overwhelming

Call our bereavement team at **(480) 508-8588**. We're here for you.

If you have thoughts of harming yourself, call or text **988** (Suicide & Crisis Lifeline), available 24/7.

You don't have to carry grief alone. We're here to walk beside you.

YOUR RIGHTS

Your rights, *protected and respected.*

Before care begins, we review your rights and responsibilities with you in a language and manner you understand, and give you a written copy. As a hospice patient, you have the right to:

- ✓ Effective pain management and symptom control
- ✓ Be involved in developing your plan of care
- ✓ Refuse care or treatment, and choose your attending physician
- ✓ A confidential clinical record
- ✓ Be free from mistreatment, neglect, abuse and misappropriation of property
- ✓ Clear information about covered services and limitations
- ✓ Be treated with respect
- ✓ Voice concerns without fear of discrimination or reprisal

> **Have a concern?** Tell any team member or call our Administrator at (480) 508-8588 (TTY: 711), or email info@oakridgehospice.com. You'll never be treated differently for speaking up.

Helpful contacts

Oakridge Hospice (24/7)	(480) 508-8588 · TTY 711 · info@oakridgehospice.com
Medicare	1-800-MEDICARE (1-800-633-4227) · TTY 1-877-486-2048 · medicare.gov
Medicare quality-of-care concerns	Beneficiary and Family Centered Care QIO · cms.gov/bfcc
Arizona Dept. of Health Services (Licensing complaints)	(602) 364-2536 · azdhs.gov
Arizona Adult Protective Services	1-877-SOS-ADULT (1-877-767-2385) · des.az.gov
The Joint Commission (patient safety concerns)	jointcommission.org
Arizona advance directive forms	Arizona Attorney General · azag.gov/seniors/life-care-planning
Arizona Healthcare Directives Registry	azhdr.org
988 Suicide & Crisis Lifeline	Call or text 988 (24/7)
Emergency	911

KEEP IT HANDY

My care team *& notes.*

Oakridge 24/7 line	(480) 508-8588
Patient name	
Hospice start date	
Nurse case manager	
Hospice aide	
Social worker	
Chaplain	
Attending physician	
Pharmacy	
Equipment company	
Family contact	
Usual visit days	

Questions for our next visit

Hospice terms, explained

Hospice: comfort-focused care for people with a life-limiting illness, generally a prognosis of six months or less if the illness runs its usual course.

Palliative care: comfort and symptom care that can begin at any stage of a serious illness, even alongside curative treatment.

Plan of care: the written plan your hospice team creates with you, covering visits, medications, equipment and goals.

Interdisciplinary team: the physician, nurse, aide, social worker, chaplain and others who share one plan of care.

Advance directive: legal documents, such as a living will and health care power of attorney, that record your wishes.

Respite care: a short inpatient stay, up to five days, so the family caregiver can rest.

Recertification: a physician's confirmation, at the start of each benefit period, that the patient remains eligible.

Bereavement: the period of grief after a loss. Hospices support families through it.

NOTICE OF NONDISCRIMINATION

Everyone deserves compassionate, *respectful care.*

Oakridge Hospice complies with applicable federal civil rights laws, including Section 1557 of the Affordable Care Act, and does not discriminate on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability or sex. Oakridge Hospice does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

We provide, free of charge, reasonable modifications and appropriate auxiliary aids and services, such as qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats), and language assistance services, such as qualified interpreters and information written in other languages. To ask for these services, call (480) 508-8588 (TTY: 711), email info@oakridgehospice.com, or ask any member of your care team.

If you believe we have failed to provide these services or discriminated in another way, you can file a grievance with our Section 1557 Coordinator: Oakridge Hospice, LLC, 13416 N. 32nd Street, Suite 109B, Phoenix, AZ 85032; (480) 508-8588 (TTY: 711); info@oakridgehospice.com. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at ocrportal.hhs.gov, by mail at 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201, or by phone at 1-800-368-1019, 800-537-7697 (TDD).

HELP IN YOUR LANGUAGE

ENGLISH
ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call (480) 508-8588 (TTY: 711).

繁體中文
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 (480) 508-8588（TTY: 711）。

TAGALOG
PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa (480) 508-8588 (TTY: 711).

DEUTSCH
ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: (480) 508-8588 (TTY: 711).

فارسی
توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 508-8588 (480) (TTY: 711) تماس بگیرید.

ภาษาไทย
เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร (480) 508-8588 (TTY: 711).

ESPAÑOL
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (480) 508-8588 (TTY: 711).

TIẾNG VIỆT
CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (480) 508-8588 (TTY: 711).

한국어
주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. (480) 508-8588 (TTY: 711) 번으로 전화해 주십시오.

РУССКИЙ
ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (480) 508-8588 (телетайп: 711).

ﻟُﻐَﺔُ ﺍﻟﻀِّﺎﺩ
ﻭِﺿَّﺎﺩ: ﺇِﻥ ﻛُﻨﺖَ ﺗَﺘَﺤَﺪَّﺙُ ﺍﻟﻠُّﻐَﺔَ ﺍﻟﻌَﺮَﺑِﻴَّﺔَ، ﻓَﺈِﻧَّﻪُ ﻳُﺘَﻮَﻓَّﺮُ ﻟَﻚَ ﺍﻟﻤُﺴَﺎﻋَﺪَةُ ﺍﻟﻠُّﻐَﻮِﻳَّﺔُ ﺑِﺎﻟﻤَﺠَّﺎﻥ. ﺍﺗَّﺼِﻞ ﺑِﺮَﻗﻢ 508-8588 (480) (ﺭﻗﻢ ﻫﺎﺗﻒ ﺍﻟﺼﻢ ﻭﺍﻟﺒﻜﻢ: 711).

DINÉ BIZAAD
Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee aká'ánída'áwo'dęę́', t'áá jiik'eh, éí ná hóló, kojį́' hódíílnih (480) 508-8588 (TTY: 711).

العربية
ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 508-8588 (480) (رقم هاتف الصم والبكم: 711).

FRANÇAIS
ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le (480) 508-8588 (ATS : 711).

日本語
注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。(480) 508-8588（TTY: 711）まで、お電話にてご連絡ください。

SRPSKO-HRVATSKI
OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite (480) 508-8588 (TTY - Telefon za osobe sa oštećenim govorom ili sluhom: 711).

OAKRIDGE
HOSPICE
Supporting the Last Moments with Compassion.

We're here when *you're ready.*

Whether you're exploring options for a loved one or need support today, our team will listen, answer your questions, and help you decide what's next. There's no cost and no obligation to talk.

(480) 508-8588

CALL ANYTIME · 24 HOURS A DAY, 7 DAYS A WEEK

VISIT & WRITE

13416 N. 32nd Street, Suite 109B
Phoenix, AZ 85032
Monday–Friday, 9:00 a.m.–5:00 p.m.

ONLINE

www.oakridgehospice.com
info@oakridgehospice.com
Secure eFax (480) 999-5212

Accredited by The Joint Commission with Medicare deemed status. Verify at jointcommission.org.

Scan to visit our website

This guide is general education and isn't a substitute for medical, legal or financial advice. Coverage summaries are based on Medicare's published hospice benefit; individual coverage varies. Free language assistance and auxiliary aids are available: call (480) 508-8588 (TTY: 711). Available in other formats on request. © 2026 Oakridge Hospice, LLC. Version 1.0 · Last reviewed November 2026.