Care for ALL
Endowment Campaign
“There are certain things that should be available for everyone, and one of them is the opportunity to have a decent death. We feel that everyone has the right to die with dignity, regardless of their position in life.”

—G. Linn Roth and Jean Martinelli, co-chairs of the Care for All Endowment Campaign
Beth and Andy* and their two small children were leading a modest Midwestern life when Andy learned he had brain cancer. As his disease progressed, Andy was in and out of the hospital, often in pain. He had to give up his job, and the stress left the couple emotionally drained. On Beth’s salary alone, they struggled to keep food on the table—and still the medical bills kept coming.

When Andy’s cancer became terminal, Beth felt utterly helpless: Andy was too young to qualify for Medicare’s hospice benefit, and the hospice coverage in their health insurance policy was inadequate. Andy wanted to be at home, but Beth feared she couldn’t afford his care.

When Andy enrolled with Agrace HospiceCare and qualified for Care for All, Agrace’s charitable care program, their financial fears eased. Andy spent his last 15 days at home with his wife and children, knowing his hospice care would not create more medical bills for his family.

* Name changed to preserve privacy.
Everyone deserves access to Agrace’s care, regardless of who they are or whether they can pay.

While Medicare, Medicaid and private health insurance cover the cost of basic hospice services for most patients, too many others lack this coverage and have no way to pay for the compassionate, comprehensive care they need at the end of life.

Agrace’s Care for All Endowment Campaign will create a sustained source of funding that enables Agrace to continue to provide free or discounted care to all hospice-eligible patients who need financial assistance to pay for their care.

Agrace offers comprehensive, nonprofit hospice care.

Our care is for people with a life expectancy of six months or less and a primary goal of comfort, rather than cure. A team of specially trained physicians, nurses, nursing assistants, spiritual & grief counselors, social workers and volunteers works together to meet the patient’s unique physical, emotional and spiritual needs. Support for the patient’s family is an essential part of this care.

Who do we serve?

Agrace cares for people of all ages, incomes and ethnicities with any type of life-limiting condition.

Hospice Patient Diagnoses

- Cancer, 32%
- Life-limiting illnesses such as ALS, stroke, and AIDS, 25%
- Alzheimer’s/dementia, 21%
- Heart disease, 14%
- Lung disease, 5%
- Kidney disease, 2%

Where are services provided?

Most patients receive care in their own homes, or in residential facilities, such as nursing homes, assisted living communities and the Ellen & Peter Johnson HospiceCare Residence in Madison. When patients’ symptoms cannot be managed at home, Agrace provides short-term, acute care at our two hospice inpatient units in Madison and Janesville.
Agrace Reimbursement Sources

- Medicare, 75%
- Commercial insurance and self-pay, 11%
- Community donations, 10%
- Medicaid, 1%
- Other, 3%

**Who pays for Agrace’s care?**
The daily cost of Agrace’s hospice care is typically covered by reimbursement sources—Medicare, Medicaid and private insurance. But when patients are not eligible for those programs or do not have an adequate hospice benefit through private insurance, the daily cost becomes an insurmountable financial barrier. This barrier is even greater when patients require more expensive inpatient care to manage urgent or complex symptoms, or when they need to receive services at the Agrace Residence.

**Who receives financial help through Care for All?**
Care for All offers free or discounted care to Agrace patients who lack the means to pay for the care they need and qualify financially. Care for All is almost entirely funded by community donations to the Agrace Foundation.

**When patients need help paying for hospice care, it is often due to:**
- Lack of any health insurance (often related to job loss, age, homelessness or disability)
- Insufficient hospice benefit within their health insurance policy
- Depleted financial resources due to expensive curative treatment
- Inability to afford the out-of-pocket expenses of insurance, such as deductibles and copayments, without sacrificing basic needs like food, medicine or housing

**Financial assistance is also often needed by patients who:**
- Do not have a safe living environment where they can receive hospice care
- Have no family caregivers and cannot remain at home
- Are considered complex cases that other health care providers cannot or will not accept

Agrace relies on community donations in order to serve patients in circumstances like those described above. Although we have both the clinical expertise and facilities to meet the needs of these vulnerable patients, we need your financial support to cover the gaps in payment for their care.
Michael's Agrace Story

Michael,* a veteran who served in Vietnam, had a difficult time keeping a job and a place to live. For nearly 15 years, he was a regular at local homeless shelters. When he was dying, local shelters couldn’t meet his needs, and he couldn’t afford care at an assisted living home. He had no family in the area to help, either.

To provide Michael with a decent place to live, Agrace partnered with Porchlight and Adult Protective Services to secure temporary housing at a local motel, where Agrace delivered hospice services until Michael was able to move to a VA home in Milwaukee. This is the impact of Care for All.

* Name changed to preserve privacy.
What’s driving the need for charity care?
The number of people in our community who cannot afford the cost of basic hospice services is increasing dramatically, due to factors like these:

A rise in the rate of some cancers, including colorectal, thyroid and testicular cancers, in people ages 20 to 39 (who are too young to qualify for Medicare)

High deductibles associated with private insurance, which sometimes force low-income patients to choose between those costs and basics like food, medicine and housing

Longer waiting lists for those seeking medical assistance; Care for All dollars are often needed to tide patients over while they await transfer to a nursing home, which cannot take place until they are officially accepted for medical assistance

Projected growth in end-of-life care needs, related to anticipated population growth in Dane County, the center of Agrace’s service area

Agrace’s commitment—as the community’s nonprofit hospice—to serve ALL people in our service area who need compassionate end-of-life care, including those who are indigent, homeless or undocumented

In 2012, Agrace reevaluated our eligibility criteria and application process for Care for All, removing unnecessary barriers for applicants. In doing so, we discovered that the true annual need for this program is approximately $750,000.

To sustain access to Agrace for all prospective patients going forward, we are embarking on a $15 million campaign to create the Care for All Endowment Fund. Agrace has committed $2 million to this project (approximately 1/3 of the agency’s net revenue from 2015 through 2017). The Agrace Foundation is committed to raising the remaining $13 million by 2019.

How the endowment works: An endowment is a permanent fund that is invested to generate long-term financial support for a specific purpose. The endowment corpus (the principal) is maintained in perpetuity. The income generated by investing the corpus can be used by a charitable organization to meet annual financial needs—in this case, the need for charitable care.

From a $15 million total investment, Agrace plans to generate $750,000 in income each year, which will be used solely to fund Care for All.
How you can help

By making a gift to the Agrace Care for All Endowment Campaign, you can help ensure that patients receive the compassionate end-of-life care they need, even if they have no means to pay. Gifts can be made in several ways, as described below. Please consult with your financial professional to determine which method of giving is best for you.

Cash: Gifts of cash (usually made by check) are tax-deductible if you itemize your deductions. You may deduct up to 50 percent of your adjusted gross income; any excess may be deducted over the next five years. Generally, the higher your tax rate, the greater your savings.

Pledges: A pledge enables you to stretch payments over up to five years, which makes it easier to contribute a larger amount. Your pledge can be paid on a schedule convenient to you. Agrace benefits by having a predictable income based on your support.

Matching gifts: Many corporations will make a matching gift when an employee donates to a charity. Matching gifts usually equal the donor’s gift, although some companies match on a 2-to-1 ratio. If you have this benefit, you may need to ask for your company’s matching gift form and send it with your gift to Agrace.

Appreciated securities: Making an outright gift of appreciated securities held 12 months or more can bring you significant tax advantages. It is usually more beneficial to donate appreciated securities directly to Agrace rather than selling them and giving the proceeds. If you are interested in this option, please discuss it with your investment consultant or call Agrace with your questions.

Your gift of any amount will bring us closer to our $15 million goal—making it possible to meet the growing needs of the most vulnerable patients in our community.