

Application for Funds from VHHP

Patient Name: _____

Enrolled in Hospice Program with: _____

Proof of Enrollment included (one of the following):

- _____ copy of enrollment form
- _____ Doctor note showing hospice eligible
- _____ Hospice staff signature on this form
- _____ confirmed by Hospice staff (Nurse, social worker, etc....) via phone call or email to VHHP Director.

Request is for:

- _____ Patient
- _____ Family

Request details & Amount: _____

Request should be sent to (name and address if a check were to be mailed): _____

- Please include any supporting documents such as bills, receipts or other.
- If there is a deadline the request is needed by please include that information.

All requests will be reviewed ASAP. VHHP Program Director will contact you if more information is needed or requested.

Signature and Date of applicant _____

Signature & Print name and Date of hospice staff if applicable. _____

Submit via:

Email: vhhpdirector@gmail.com

Mail: PO Box 244 Cook, MN 55723

Checklist to make applying easier:

- ☐ Proof of hospice enrollment or Dr. note showing hospice eligibility
- ☐ A need/request to match criteria
- ☐ Request application and return it via mail or e-mail.
- ☐ Specific details as possible



Where does our funding come from?

- Lights of Love Fundraiser
- Membership Drive
- Movie Nights
- Memorials
- Donations
- Grants

Virgie Hegg Hospice Partners, Inc.

If your loved one is enrolled in hospice or determined to be hospice eligible, we are here for you and your family by offering comfort care, last wishes and other supportive assistance.



PO Box 244
Cook, MN 55723
www.vhhp.org
vhhpdirector@gmail.com

What we offer to patients and families already enrolled in hospice or hospice eligible...

Massages

Gas/grocery cards

Last wish trips or visits

Comfort baskets

Family needs

Encouragement Cards

Requirements for making a request:

- 1) Patient must be enrolled in hospice or deemed hospice eligible.
- 2) Fill out included form or contact our Program Director for an application to be filled out and returned with a specific need that fits the above criteria.
- 3) A decision will be made within 48 – 72 hours and your request will be processed in another 48-72 hours.



HOSPICE IS...
WHY WE DO WHAT WE DO

"I have learned Hospice is more about quality of life than it is about death."

"You matter because you are you, and you matter to the end of your life."

~ Dame Cicely Saunders Founder of Hospice Movement

How did we get started?

Friends and family of Virgie Hegg established Virgie Hegg Hospice in 1990 to provide volunteer hospice services in the greater Cook area.

Through the years we have transformed our services from what was hands on at one time to now strictly supportive financially to hospice patients or hospice eligible patients and their families.

We understand that when a loved one enters hospice care, there are certain comfort care services that insurance will not cover. We understand that when a loved one enters hospice care, there may be a last wish that can't be fully funded by the family. We understand that with

hospice care of our loved ones comes a change, a transition and perhaps a time where not all needs can be met.

VHHP exists to offer hospice patients and their families an opportunity to apply for funds to cover specific comfort care needs, last wishes and other supportive needs.

Who are we today?

VHHP is a nonprofit 501(c)(3) corporation located in Cook, Minnesota, and serving hospice and hospice eligible patients and their families in the Cook, Orr and Tower areas. Day to day operations are conducted by a Board of Directors elected by VHHP members at the Annual Meeting.