#### **Cordt Kassner**

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### February 16th, 2024

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### **Hospice Provider News**

## **Essentia Health-Fosston Home Care and Hospice team recognized for excellence**

Essentia Health Newsroom, by Caitlin Pallai; 2/14/24

The Essentia Health-Fosston Home Care and Hospice Team has been recognized for providing exceptional patient experiences. The team was named a 2023 Human Experience Guardian of Excellence Award winner by Press Ganey, which works with more than 41,000 health care facilities — including Essentia — to solicit patient feedback and create meaningful change. To receive a Guardian of Excellence Award, a team must rank in the top 5% of health care providers on patient surveys conducted by Press Ganey.

# Umatilla County resident finds comfort in hospice care amid disparity study

BNN, by Muhammad Jawad; 2/14/24

In the heart of Umatilla County [Oregon], Lila Transue, an 86-year-old Pendleton resident, has found solace in the care provided by Vange John Memorial Hospice. A recent study highlights the underutilization of hospice care, particularly for minority groups and patients with certain types of cancer, but Transue's experience offers a glimmer of hope.

## Chippewa Co. Health Department announces end of Home Health and Hospice services

9and10news.com, by Logan Kassuba; 2/14/24

The Chippewa County Board of Commissioners announced their decision to end the health department's Home Health and Hospice division. ... CCHD was the only health department in Michigan that still had a Home Health and Hospice division. In the absence of Home Health and Hospice services, CCHD said hospice patients can choose to spend their final days at Ball House, Pennington Home, Harbor View Home and White-Wiles Home. Patients are also able to remain in their own homes and receive care there.



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# United States: Buying or selling a hospice? The 36-month rule prohibiting change of ownership now applies

GreenbergTraurig, by Sonya C. Penley and Christopher E. Gottfried; 2/15/24 Effective Jan. 1, 2024, the Centers for Medicare and Medicaid Services (CMS) extended the so-called "36-month rule" to hospices, prohibiting a change in majority ownership of a hospice, as well as the transfer of a Medicare provider agreement and Medicare billing privileges, in the 36 months after Medicare enrollment or a prior change of majority ownership. The 36-month rule previously only applied to home health agencies.

#### **Palliative Care Provider News**

Tier - Palliative Care: A population-based care delivery model to match evolving patient needs to palliative care services for community-based patients with heart failure or cancer [This link goes to the more detailed National Institutes of Health (NIH) description of this clinical trial.] *Genomics & Genetics Daily, by a news reporter-staff news editor; 2/14/24* Staff editors report on the newly launched clinical trial, NCT06228209, which has the following summary description: "TIER-PC is an adaptive model of delivering

palliative care that provides the right level of care to the right patients at the right time. It represents an adaption of the Mount Sinai PALLIATIVE CARE AT HOM E (PC@H) program, which delivers home-based palliative care. TIER-PC increases the number and intensity of disciplines added to the patient's care team as their symptoms worsen and function declines."

#### Scaling palliative care requires adherence to best practices

AJMC, by Tina Basenese, MA, APN, ACHPN; 2/14/24

An important milestone came January 1, 2024, when a new add-on code [G2211] took effect for reimbursement for complex Medicare patient visits, including palliative care. ... Having patients map out their wishes through advance directives is an important metric, but it's not the goal of palliative care, nor is it the only way to measure whether a program works. Rather, comprehensive palliative care must be truly patient centered. This requires building trust and training palliative care specialists in a manner similar to other subspecialties to create and scale processe s that are infused with a culture of communication.



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### Gentiva engineers unique palliative care payment system via AIM program

Hospice News, by Jim Parker; 2/12/24

Gentiva Health Services has committed to expanding its recently established Advanced Illness Management (AIM) palliative care model in 2024, including its unique approach to reimbursement.

# Chapters CEO Andrew Molosky: Building an ecosystem of care around the seriously ill

Hospice News, by Jim Parker; 2/13/24

Going forward, hospice and other post-acute providers are preparing to operate within a value-based ecosystem, and Florida-based nonprofit Chapters Health System is no exception. ... The organization has been hard at work in recent

years to position itself for risk-based relationships and build out a continuum of care for chronically and terminally ill patients, while maintaining positive employee engagement.

### **Clinical News**

# Understanding the discordance about prognosis between clinicians and terminally ill patients and their surrogates

The ASCO Post, by Jo Cavallo; 2/14/24

A Conversation with Douglas B. White, MD, MAS

Research shows that about half of adults near the end of life in the United States are too ill to participate in decisions about whether to accept life-prolonging treatment, requiring family members and other proxies to serve as surrogate decision-makers for their critically ill loved ones. However, research also shows that surrogates of patients with advanced illness often have optimistic expectations about progn osis, which often lead to the increased use of invasive treatment (including life support) in dying patients and delays in the integration of palliative care.



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## Advance planning values and end-of-life care among patients on dialysis docwirenews, by Victoria Socha; 2/12/24

... Patients treated with dialysis are also more likely to die in the hospital and less likely to receive hospice care. [Researchers] conducted a survey designed to examine the association between patients' health care values and engagement in advance care planning and end-of-life care. Analyses of survey responses were reported in *JAMA Internal Medicine*.

#### Palliative care's psychedelic future

Truthdig, by Jane C. Hu; 2/14/24

In Oregon, hospice doctors are expanding the menu of treatments for end-of-life anxiety and depression.

#### **Bristol Hospice's quest to help patients sleep**

Hospice News, by Jim Parker; 2/14/24

Salt Lake City-based Bristol Hospice has developed a branded program designed to help their patients get better sleep, which can significantly impact quality of life.



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#### **Post-Acute Care News**

#### The nexus between palliative care and PACE programs

Hospice News, by Jim Parker; 2/14/24

Palliative care is becoming an increasingly prevalent component of Programs for All-Inclusive Care of the Elderly (PACE) programs. PACE programs offer a comprehensive approach to care for participants who meet certain eligibility criteria, mainly to seniors who have significant medical and non-medical needs to help them age in place and avoid the hospital or nursing homes. PACE allows hospices to offer services to address social determinants of health, such as homemaking, transportation, home modification and others.

#### **Care Guide Partners PACE Center secures \$500,000 grant**

The News-Enterprise; 2/14/24

Care Guide Partners, an affiliate of Hosparus Health, recently was awarded a \$500,000 lead grant from the Legacy Foundation of Kentuckiana. This contribution supports the launch of the Care Guide Partners PACE Center, at 109

Buffalo Creek Drive in Elizabethtown. Scheduled to open next quarter, the PACE Center will increase accessibility to comprehensive health care services for seniors in and around the region, a news release from the organization said.

### Experts see for-profit firms, rural areas as drivers of future PACE growth

McKnights Home Care, by Adam Healy; 2/14/24

InnovAge, the only publicly traded Program of All-Inclusive Care for the Elderly company, revealed last week that it continues to grapple with regulatory challenges. But its stumbling blocks of late are not curbing interest in PACE. The program — funded by Medicare and Medicaid — has continued to grow in recent years, leading states to explore new and innovative ways to bring PACE to a greater share of residents.

#### 418 rural hospitals at risk of closure, breakdown by state

Becker's Hospital CFO Report, by Laura Dyrda; 2/14/24
There are about 418 rural hospitals at risk of closure, according to a new report from Chartis, a healthcare advisory services firm. ... The states with the most hospitals vulnerable to closures include:

Texas: 45
 Kansas: 38

3. Nebraska: 294. Oklahoma: 22

5. North Carolina: 19

6. Georgia: 18

7. Mississippi: 18

The percentage of rural hospitals at risk of closure by state is as follows:

- More than 41% of hospitals: Florida, Tennessee, Nebraska
- 31% to 40%: Utah, South Dakota, Kansas, Oklahoma, Alabama, North Carolina, South Carolina

## **Technology / Innovations News**

Virtual reality is a tool for education, relaxation for nurses and patients
Oncology Nursing News, by Darlene Dobkowski, MA; 2/13/24

Simulated experiences using virtual reality (VR) can help oncology nurses alleviate a patient's anxiety before undergoing treatment, provide comfort in palliative care settings, and serve as an educational tool for both nurses and patients.

Editor's Note: To the section that asks,"Can this technology be used for all patients, or are there certain patients who may not be suited for this?", I add caution for use with palliative /hospice patients who cope with dementia.

#### **General News**

#### The state of caregiving for 2024

McKnights Home Care, by Lance A. Slatton; 2/13/24

A significant discrepancy has formed over the past decade between the number of people needing care and the number of professional caregivers available. This was significantly exacerbated in 2023, with caregivers becoming more exhausted than ever. Whether due to financial constraints or the struggling economy, almost 1 in 5 Americans who were providing care in 2023 were going unpaid.

### What 54% of physicians want enough to take a pay cut

Becker's Hospital Review, by Erica Carbajal; 2/13/24

Many physicians feel conflicted in their personal lives due to the demands of the job, and more than half say they would take a pay cut for a better work-life balance, according to *Medscape*'s "2024 Physician Lifestyle & Happiness Report." The findings, released Feb. 13, are based on a survey of 9,226 practicing U.S. physicians across 29 specialties.

### **Other News**

#### Mayo steps up to plug care gaps as HSHS exits Wisconsin

Becker's Hospital CFO Report, by Alan Condon; 2/12/24

Mayo Clinic is striving to help close a significant gap in patient care in Western Wisconsin, where two hospitals and almost 20 clinics are expected to close in the coming months. The move comes as Springfield, Ill.-based Hospital Sisters Health System, currently a 15-hospital system, announced plans to ab ruptly exit the Wisconsin market.

#### 9 recent hospital, health system CEO moves - updated Feb. 14

Becker's Hospital Review, by Alexis Kayser; 2/14/24

[Click on the title above for] ... hospital and health system CEO moves recently reported by *Becker's* 

#### Other Business Headlines of Interest, updated 2/15/24 per nasdaq.com

Adus HomeCare (ADUS: \$92.85)

Amedisys (AMED: \$93.32)

BrightSpring Health (BTSG: \$11.06)

• Encompass (EHC: \$73.79)

• Enhabit (EHAB: \$9.26),cin

• Ensign Group (ENSG: \$119.11)

HCA Healthcare (HCA: \$307.82)

Humana (HUM: \$363.96)

Pennant Group (PNTG: \$15.87)

Vitas / Chemed Corp (CHE: \$582.08)

## **Today's Encouragement**

Diversity is not about how we differ. Diversity is about embracing one another's uniqueness. - Ola Joseph

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