

## Cordt Kassner

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## May 2nd, 2024

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## Headlines

### **Elara Caring agrees to pay \$4.2 million to settle False Claims Act allegations that it billed Medicare for ineligible hospice patients**

*Office of Public Affairs, U.S. Department of Justice; Press Release; 5/1/24*

Elara Caring, and its wholly owned subsidiaries JHH/CIMA Holdings Inc., CIMA Healthcare Management Inc., CIMA Hospice of Texarkana L.L.C., CIMA Hospice of East Texas L.L.C. and CIMA Hospice of El Paso L.P., have agreed to pay \$4.2 million to resolve allegations that they violated the False Claims Act by knowingly submitting false claims and knowingly retaining overpayments for the care of hospice patients in Texas who were ineligible for the Medicare hospice benefit because they were not terminally ill.

### **Hospice care scam has FBI issuing warning after 'huge increase in complaints'**

*ABC TV 13, Houston, TX; by Samica Knight; 4/29/24*

The Federal Bureau of Investigation is warning about a scam in which crooks sign people up for hospice care without their knowledge. The FBI has received numerous reports from victims in the Houston area about this costly scam. "It's a little bit more egregious and distasteful than some of the other Medicare frauds we typically deal with," FBI Supervisory Special Agent Shannon Brady said. "We've

had a huge increase in complaints." Fraudsters are actually signing mostly elderly victims up for end-of-life hospice care when they don't need it and without the victim even knowing about it.

## Hospice Provider News

### **Judi Lund Person: Unleashed**

*TCN Talks; by Chris Comeaux; 4/18/24*

Judi Lund Person, former vice president of regulatory and compliance at NHPCO, shares her journey into the hospice industry and her passion for ensuring patients and families receive the care they need and want. Judi emphasizes the importance of addressing bad hospice care and uncovering fraud and abuse in the industry. She discusses the proposed changes in the 2025 Hospice Wage Index and Payment Conditions; ... the HOPE tool and the revised hospice survey; ... the sunset of the VBID demonstration; and the need to focus on accountable care organizations and quality reporting. This is a great listen for staff, leaders, and boards of hospice and palliative care organizations. Here's a great quote from the discussion: "You never know when something you do or somebody you talk to changes the course of your life."



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### **Hospice of the Chesapeake selects Netsmart myUnity® to propel organizational growth and advance value-based care initiatives**

*StreetInsider.com; Business Wire; 4/30/24*

Netsmart and Hospice of the Chesapeake, a premier provider of hospice and palliative care services in Maryland, announce an advanced collaboration through the successful implementation of the myUnity® electronic health record (EHR) system. This move underscores Hospice of the Chesapeake's commitment to enhancing patient care, supporting organizational growth and embracing value-based care models. "Selecting myUnity fulfilled a strategic necessity for us," said Hospice of the Chesapeake CEO Rebecca Miller. "We needed a platform that

could not only support our current infrastructure but also grow with us as we expand our services. ..."

## Clinical News

### **Postpandemic, telehealth preferred in outpatient palliative care setting**

*Rheumatology Advisor; by Lisa Kuhns, PhD; 5/1/24*

Even after the SARS-CoV-2 vaccine against COVID-19 became available, patients preferred outpatient palliative care visits via video rather than in person, according to study results published in the *Journal of Pain and Symptom Management*. ... The researchers ... added, "Although telehealth may be preferable for reasons beyond social distancing, this survey found that COVID-19 transmission was still a [postpandemic] concern for some patients, where telehealth can be a dvantageous. These concerns reflect [an] ongoing sentiment [that] patients with advanced cancer, who are often immune-compromised, have with regards to the pandemic even after widespread vaccine availability and end of COVID-19 restrictions.

### **DEA tells court that Right to Try law doesn't supersede CSA in psilocybin case**

*PsychedelicNewsWire; 4/30/24*

The U.S. Drug Enforcement Administration (DEA) is claiming that a federal law that affords severely ill individuals the right to try investigational medications doesn't apply to drugs classified under the Controlled Substances Act. This is in response to a lawsuit filed by a doctor in Washington state who sought permission to legally administer psilocybin as treatment for patients in end-of-life care with cancer. The agency argues that because drugs classified under Schedule I are said to have no accepted medical use, the law prevents them from being dispensed, even by professionals.



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## **Medical marijuana may be sold in pharmacies, but it is not a medicine**

*Psychiatric Times; by Yi-Lang Tang, MD, PhD and Elizabeth McCord, MD; 4/29/24*

Commentary: Georgia will soon be the first state in the nation to allow independent pharmacies to sell medical marijuana products, with more than 100 pharmacies already applying to participate. This raises serious health concerns. The public should be aware that medical marijuana is not a medicine and that it differs from US Food and Drug Administration (FDA)-approved medications in several key ways. ...

*Editor's Note: This article contains a list of what is approved (or not) in each state (with Washington D.C. and Puerto Rico); a brief history of medical marijuana; and differences between medical marijuana and FDA-approved medications.*

## **Regulatory News**

### **[FL] Attorney General Moody announces arrest of two Seminole County residents for Medicaid fraud**

*Office of Attorney General Ashley Moody [Florida]; by Kylie Mason; 4/23/24*

Attorney General Ashley Moody's Medicaid Fraud Control Unit, ... announced the arrest of Debora Behnke and Suman Bhattacharjee ... [They] ran Pioneer Medical Transportation LLC and submitted fraudulent claims for nonemergency medical transportation for Medicaid recipients, stealing more than \$250,000 from the Medicaid program. "Instead of transporting vulnerable Medicaid recipients, these individuals falsely billed the taxpayer-funded program for services never completed. In some instances, they even convinced patients to move across the state—with no regard for the best interest of the patients—and still charged Medicaid for transporting them from the original, longer distance. ..."

## **Mergers & Aquisition News**

### **Deciphera Pharmaceuticals to be acquired by Ono Pharmaceutical for \$2.4 billion**

*LevinPro HC; 4/30/24*

Deciphera Pharmaceuticals announced on April 29 that it has entered into a definitive merger agreement with Ono Pharmaceutical Co., Ltd. to be acquired for a total equity value of \$2.4 billion. Upon completion, Deciphera will operate

as a standalone business of Ono, from its headquarters in Waltham, Massachusetts.

*[Access to full article may require registration]*



## **TRU Community Care and St. Paul's Senior Services explore strategic partnership to transform senior care landscape**

*My Prime Time News, Lafayette, CO; 4/29/24*

TRU Community Care and St. Paul's Senior Services are exploring affiliation as two well-established nonprofit healthcare providers in Colorado and California, respectively. Under the leadership of Scott Gresser, President and CEO of TRU Community Care and Michael McHale, President and CEO of St. Paul's Senior Services, organizational integration would allow TRU and St. Paul's to expand the serious illness continuum of care that each currently provides, including senior services from independent living to memory care, PACE (Program of All-Inclusive Care for the Elderly), palliative and hospice care, and community support programs such as bereavement services.

## **Premier Physician Network partners with Empatia on palliative care**

*Hospice News; by Jim Parker; 4/30/24*

Premier Physician Network (PPN) has launched an integrated palliative program among its medical group operations, in partnership with agilon health (NYSE: AGL) and its palliative arm Empatia. The program, branded as Senior Health Connect, will provide a palliative care program for Medicare Advantage patients who suffer from serious illnesses. Senior Health Connect is based on agilon's palliative care model. "Our role there is as a partner. We bring technology. We bring insights. We can bring powerful data and care pathways," Dr. Benjamin Kornitzer, agilon's chief medical officer, previously told Hospice News.

## **Post-Acute Care News**

### **Southern states fare worst in USA Today's searchable staffing level database**

*McKnights Long-Term Care News; by Josh Henreckson; 4/26/24*

Many US skilled nursing facilities currently meet some provisions of the new federal staffing rule at least some of the time, but only 160 — slightly more than 1% — consistently meet all requirements, according to a new analysis. Facilities located in southern states had the most ground to make up on staffing, based on a review of summer 2023 Centers for Medicare & Medicaid Services data by *USA Today*. The analysis, published Wednesday, includes a searchable database with information on individual facilities — including the facility's name, address and the average hours of care per resident per day compared to the new national standard of 3.48.



## **Why health systems should embrace advanced in-home care models**

*McKnights Home Care; by Marcy Carty, MD, MPH; 4/25/24*

Over the next two decades, the adult demographic over 50 years of age will increase by 25 million, and with over 75% expressing a strong desire to age in place, it's imperative to champion care models that support safe, high-quality care within the home. Despite proactive care models to support aging in the home, acute needs still arise. Health systems stand to gain manifold by embracing the paradigm shift to care in the home. By moving more advanced care delivery into peoples' homes, systems can effectively curb acute healthcare utilization, decreasing hospital-acquired conditions and drastically improving patient and family experience.

## **20 states with most rural hospital closures**

*Hospital CFO Report; by Molly Gamble; 4/29/24*

Since 2005, 192 hospitals in rural America have shut down, and the COVID-19 pandemic only accelerated rural hospitals' risk of closure. Eight rural hospitals closed in 2023, as many as in 2022 and 2021 combined, according to the report.

This followed a landmark 18 rural hospital closures in 2020, more than any year in the previous decade. [Click on the title's link for]

- a listing of the states that have seen the greatest number of rural hospital closures over the past 19 years
- ... 25 states ranked by the percentage of their rural hospitals at risk of closure in the next two to three years maximum
- The report from CHQPR assessing each state's rural hospital health and risks.

### **To stay open, rural nursing homes in the Midwest prioritize nurses**

*NPR KCUR 89.3; by Aaron Bonderson; 5/1/24*

... Not enough nurses. Nursing home closures are creeping across Nebraska and other parts of the Midwest. Since 2020, 13 Nebraska nursing homes have shuttered, according to the [American Health Care Association](#) (AHCA). During that time, 25 Kansas nursing homes, 27 in Missouri, and 36 in Iowa closed their doors. According to the Center for Medicare Advocacy (CMA), 22 nursing homes in Iowa closed in 2022 alone because of poor quality of care and low occupancy. ... Staffing shortages and quality of care concerns are the leading reasons long-term care facilities shut down, according to the AHCA and the [CMA](#). The pandemic didn't help matters, stretching employees and resources to their limits. *Editor's Note: Click on the title's link and scroll down for a US map of states with data for rank, nurse staff hours per resident per day (HRPD), total nurses, and total providers.*



## **Technology / Innovations News**

### **Nurses have reservations about use of AI on the job: survey**

*McKnights Senior Living; by Kathleen Steele Gaivin; 4/29/24*



More than half of the nurses responding to a new survey by Cross Country Healthcare said they have reservations about the potential benefits of artificial intelligence in the nursing field. The online survey of 1,127 nursing professionals and students at hospitals and other healthcare facilities was conducted Jan. 18 to March 11. Respondents who said they are uncomfortable using AI expressed concerns about the potential absence of empathy and diminished patient connection. Those who said that they are comfortable with using AI on the job expressed a belief that the technology enhances efficiency, documentation, data analysis and research, upskilling opportunities and automated monitoring systems.

### **Generative AI: A roadmap for healthcare leaders**

*Curate; 4/30/24*

... As the capabilities of generative AI continue to expand, healthcare leaders are tasked with harnessing its potential while navigating the ethical, regulatory, and operational challenges it brings. This article offers a comprehensive roadmap for healthcare C-suite and senior leaders to incrementally adopt generative AI, emphasizing the strategic approach and expertise provided by Curate in healthcare consulting and technology modernization.

## **General News**

### **The cost of dying is going up, leaving some Florida families scrambling**

*Tampa Bay Times; by Lauren Peace; 5/1/24*

Christina Nall sat in the hospital parking lot gasping for air. Four hours earlier, her father, Bill Burke, had been alive. He'd eaten Golden Grahams for breakfast and wrapped his grandkids in tight hugs before school. He was putting on his shoes to leave the house when Nall, 33, found him slouched over on the couch. Doctors said it was a blood clot. He was 56 years old. Now, outside the Zephyrhills hospital, a fog of grief hung over Nall as the funeral director's words cut into her. To get her dad back to his home in Misso uri would cost upward of \$2,000. The service and burial he wanted would cost another \$6,000.

## **International News**

### **UK survey finds 65% of adults are worried about access to palliative care**

*Medical Xpress; by King's College London; 4/30/24*

A survey commissioned by King's College London, and carried out by YouGov, has found that 65% of people across the U.K. are worried about access to palliative and end of life care, and 41% think there is too little NHS resource allocated to palliative care. The [survey](#) of 2,164 adults across the U.K. was commissioned by the Florence Nightingale Faculty of Nursing, Midwifery & Palliative Care at King's to explore people's knowledge and experiences of palliative and end of life care. ... Findings from the [survey](#) conducted in January 2024 show that nearly a quarter of people (24%) across the U.K. say they don't know much about or have not heard of palliative care, with disparities in knowledge between white and ethnic minority groups.

## Other News

### [Walmart Health is closing](#)

*Walmart; 4/30/24*

Back in 2019, we launched Walmart Health centers. During our five-year journey, we made meaningful impacts with patients while continuing to learn, pivot and evolve. While our mission to help people save money and live better remains, today we are sharing the difficult decision to close Walmart Health and Walmart Health Virtual Care. Through our experience managing Walmart Health centers and Walmart Health Virtual Care, we determined there is not a sustainable business model for us to continue.

### [34 recent hospital, health system executive moves](#)

*Becker's Hospital Review; by Kelly Gooch and Alexis Kayser; updated 4/26/24*

The following hospital and health system executive moves have been shared with or reported by *Becker's* this year: [Click on the title's link; 34 executive moves are listed for the week of April 20-26.]

## Today's Encouragement

**You never know when something you do or somebody you talk to changes the course of your life. - Judi Lund Person**

*Editor's Note: This quote is from today's post, "Judi Lund Person: Unleashed," from a pivotal, spontaneous life moment that called her to join a brand new movement called "hospice."*

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