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**HOSPICE &
PALLIATIVE CARE
TODAY**

May 5th, 2024

Sunday newsletters focus on headlines and top read stories of the last week (in order) - enjoy!

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Headlines

[Measuring decision aid effectiveness for end-of-life care: A systematic review](#)

PEC Innovation; M. Courtney Hughes, Erin Vernon, Chinenye Egwuonwu, Oluwatoyosi Afolabi; 4/24

A total of 715 articles were initially identified, with 43 meeting the inclusion criteria. Outcome measures identified included decisional conflict, less aggressive care desired, knowledge improvements, communication improvements, tool satisfaction, patient anxiety and well-being, and less aggressive care action completed. The majority of studies reported positive outcomes especially when the decision aid development included International Patient Decision Aid Standards.

Publisher's note: Also by these co-authors, please see [The effectiveness of community-based palliative care program components: A systematic review](#) (Age and Ageing, 2023) and [Measuring effectiveness in community-based palliative care programs: A systematic review](#) (Social Science & Medicine, 2022).

[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.

Examining how improper payments cost taxpayers billions and weaken Medicare and Medicaid

HHS-OIG; by Christi A. Grimm, Inspector General, Office of Inspector General, U.S. Department of Health and Human Services; 4/16/24

HHS Inspector General Christi A. Grimm Testifies Before the U.S. House Committee on Energy and Commerce, Subcommittee on Oversight and Investigations on April 16, 2024. IG Grimm briefs members on HHS-OIG's work to address improper payments in Medicare and Medicaid managed care programs. [Click here to watch the testimony.](#)



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45 top healthcare workplaces for mental well-being: Newsweek

Becker's Hospital Review; by Alexis Kayer, 4/22/24

Newsweek has named 45 hospitals and health systems among its 750 greatest employers for mental well-being. The publication partnered with data researchers Plant-A to rank the top U.S. workplaces "making a positive difference in the mental wellness of their workers," according to a five-stage evaluation. ... Here are the 45 hospitals and health systems included on the list, excluding organizations that exclusively provide long-term, hospice, rehabilitative and medical care, or staffing and management services: [Click on the title's link for the list.]

Editor's Note: Is your organization on the list? Or perhaps a colleague's organization? Forward this to them with your congratulations! Invite them to join our newsletter for free at www.HospicePalliativeCareToday.com/registration.

Executive Personnel Changes - 5/3/24

- [AccentCare appoints Andy Johnston as President, Hospice Personal Care Services \(PCS\)](#)

- Ascension (St. Louis-based) named Saurabh Tripathi Executive Vice President and CFO
- Concierge Care names Jeff Bevis as its next CEO
- Kaiser Permanente (Oakland, CA) names Sam Glick as Executive Vice President for Enterprise Strategy and Business Development
- Kaiser Permanente (Oakland, CA) names Shelby Decosta as Chief Business Development Officer
- Providence Oregon names Jennifer Burrows, RN as Chief Executive, effective May 6
- Opelousas General Health System (OGHS) names Shelly Soileau as the Chief Financial Officer, effective June 3
- St. Luke's Health System taps Michelle Lewis as VP of Revenue Cycle

E-book: "Combating loneliness in senior living residents: A call to action"

McKnights Senior Living; 4/24/24

Discover in [this] e-book:

- Effects of loneliness on senior residents' health
- Modern solutions for identifying and supporting at-risk individuals
- Innovative strategies for alleviating loneliness
- Engaging volunteers in the solution

Editor's Note: In March, one of the articles you--our readers--most read was "Rising suicide risk among seniors due to loneliness, mobility, financial insecurity, study finds," posted in our 3/7/24 and 3/17/24 (Sunday's "most read") issues.



Accelerate Impact
Accelerate Influence
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Hospice Claims Edits for Certifying Physicians

Centers for Medicare & Medicaid Services (CMS); Related CR Release Date 4/18/24;

Effective Date: 5/1/24; Implementation Date: 10/7/24

Related CR Title: Additional Implementation Edits on Hospice Claims for Hospice

Certifying Physician Medicare Enrollment

Starting May 1, 2024, we'll deny hospice claims if the certifying physician, including hospice physician and hospice attending physician, isn't on our PECOS hospice ordering and referring files. This addresses hospice program integrity and quality of care per Section 6405 of the Affordable Care Act.

Affected Providers

- Hospices
- Physicians and other providers billing Medicare Administrative Contractors (MACs) for hospice services they provide to Medicare patients

Action Needed

- CMS will pay for hospice services if certifying physicians, including hospice physicians and hospice attending physicians, are enrolled in or opted-out of Medicare
- The hospice attending and certifying physicians will be subjected to ordering and referring denial edits

HHS issues new rule to strengthen nondiscrimination protections and advance Civil Rights in health care

HHS Press Office; 4/26/24

Today, the U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR) and the Centers for Medicare & Medicaid Services (CMS) issued a final rule under Section 1557 of the Affordable Care Act (ACA) advancing protections against discrimination in health care. By taking bold action to strengthen protections against discrimination on the basis of race, color, national origin, sex, age, and disability, this rule reduces language access barriers, expands physical and digital accessibility, tackles bias in health technology, and much more.

Signify Health President: 'We're just scratching the surface' on what can be done in the home

Home Health Care News; by Andrew Donlan; 4/26/24

Signify Health was purchased by CVS Health for \$8 billion in March 2023. Now, it's one of the core tenants of CVS Healthspire, the health care services segment that CVS executives are banking on to drive future growth for the

company. Paymon Farazi, the president of Signify Health, recently joined Home Health Care News' Disrupt podcast to talk about Signify's direction over a year after the CVS deal was closed, how the company could work with traditional home-based care providers in the future and where Farazi sees Signify – and health care – headed in the near- and long-term future.



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End-of-life and palliative care for lesbian, gay, bisexual, transgender, queer or questioning, or another diverse gender identity older adults

Clinics in Geriatric Medicine; by Evie Kalmar MD, MS, Jeffrey Mariano MD; 5/24

Lesbian, gay, bisexual, transgender, queer or questioning, or another diverse gender identity (LGBTQ+) people are more likely to have alternative family structures. It is important to engage in advance care planning to understand their values, clarify surrogate decision makers, and contribute to goal-concordant care at the end of life. Clinicians can follow recommendations in this article to ensure they are providing LGBTQ-inclusive palliative and hospice care.

Quality in Motion: Acting on the CMS National Quality Strategy

CMS - Centers for Medicare & Medicaid Services; 4/22/24

In 2022, the Centers for Medicare & Medicaid Services (CMS) launched the CMS National Quality Strategy (NQS), a plan aimed at improving the quality and safety of health care for everyone, with a special focus on people from underserved and under-resourced communities. ... The CMS National Quality Strategy has four priority areas, each with two goals. This action plan provides details on how CMS is putting these eight goals into action.

- Equity and Engagement
- Outcomes and Alignment
- Safety and Resiliency
- Interoperability and Scientific Advancement

Editor's Note: Download this CMS April 2024, 54-page PDF.

Drug discount program is exploiting poor patients while corporate giants profit

Minnesota Reformer; by David Balto; 4/26/24

... The federal 340B drug discount program was created three decades ago to help economically vulnerable Americans access affordable prescription medications and providers in underserved areas expand and improve services. Under the program, drug companies participating in Medicaid — known in Minnesota as Medical Assistance — provide sizeable discounts as high as 50% to these 'safety net' health care facilities. ... Unfortunately, over time, the tens of billions of dollars flowing through this program have proven irresistible to for-profit corporate entities, including giant health systems and big box chain pharmacies — and there is no guarantee those discounts are reaching patients.



Today's Encouragement

Preservation of one's own culture does not require contempt or disrespect for other cultures. — Cesar Chavez

Editor's Note: Happy Cinco de Mayo!



TURNING DATA INTO INFORMATION – TO IMPROVE PATIENT CARE

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