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Hospice Provider News

Hospice care for those with dementia falls far short of meeting people's needs at the end of life

University of Michigan; by Maria J. Silveira; 8/18/24

... Strikingly, only 12% of Americans with dementia ever enroll in hospice. Among those who do, one-third are near death. This is in stark contrast to the cancer population: Patients over 60 with cancer enroll in hospice 70% of the time. In my experience caring for dementia patients, the underuse of hospice by dementia patients has more to do with how hospice is structured and paid for in the U.S. than it does patient preference or differences between cancer and dementia.

... In the U.S., ... Medicare's rules and regulations make it hard for dementia patients to qualify for hospice when they and their families need support the most – long before death. In Canada, where hospice is structured entirely differently, 39% of dementia patients receive hospice care in the last year of life.

...

Destitute and dying: Interventions and models of palliative and end of life care for homeless adults – a systematic review

BMJ Supportive & Palliative Care; United Kingdom; by Megan Rose Coverdale and Fliss

Murtagh; 8/24

We identified key components of care to optimise the support for homeless adults needing palliative and end of life care: advocacy; multidisciplinary working; professional education; and care in the community. Future research must include the perspectives of those who are homeless.

A friend until the end: The impact of hospice volunteers

Parkview Health, Fort Wayne, IN; 8/16/24

The presence of a hospice volunteer offers a unique form of support that complements the efforts of a care team consisting of physicians, nurses, social workers and chaplains. While these specialists focus on a patient's physical, logistical and spiritual needs, volunteers contribute the element companionship during an emotionally difficult time. Jane Sandor, retired schoolteacher and principal, and Sally Stuckway, former executive director of a medical practice in Lafayette, IN, share how their personal experiences with hospice care shaped their desire to give back.



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Hospice's post-VBID value-based outlook

Hospice News; by Holly Vossel; 8/15/24

The post-Medicare Advantage hospice carve-in landscape could include wider value-based reimbursement avenues in the hospice space, leading providers to pivot into MA payer relationships. The forthcoming end of the hospice component of the value-based insurance design (VBID) demonstrative takes effect Dec. 31. Launched in 2021, the carve-in was designed to test coverage of hospice care through Medicare Advantage, as well as coverage of palliative and transitional care. Hospices will need a strong value-based payment negotiation strategy to prepare for the unknowns that lie ahead, according to Melinda Gaboury, co-owner and CEO of Healthcare Provider Solutions Inc., a hospice and home care consulting company.

Honest conversations and cherishing the day: Leadership advice from oncology leaders

Becker's Hospital Review; by Elizabeth Gregerson; 8/16/24

Leaders from two of the top five cancer centers, as ranked by *U.S. News & World Report*, shared with *Becker's* the best leadership advice they have received. ...

- Peter Pisters, MD. President of the University of Texas MD Anderson Cancer Center (Houston): To cultivate a personal board of directors as you chart your path toward leadership. ...
- Jonathan Watkins, President of City of Hope Cancer Center (Atlanta): ... The advice that resonates with me the most is to never become so consumed with work, titles and material things that you neglect your family — particularly your parents! You never know what tomorrow has in store, so cherish today with them.

Regulatory News

Humana will pay \$90 million in Medicare drug fraud settlement

Bloomberg Law; by Daniel Seiden; 8/16/24

Humana Inc. agreed to pay \$90 million to the federal government to settle a whistleblower's False Claims Act suit alleging that the company submitted fraudulent bids for Medicare Part D prescription drug contracts. Whistleblower Steven Scott alleged that, since 2011, Humana began offering its Medicare Part D prescription drug plan, known as the basic Walmart Plan, and "knowingly provided benefits under that plan that have been significantly less valuable than Humana promised in its bids," according to Scott's suit filed in 2016 in the US District Court for the Central District of California. ... This suit was among several in 2016, including suits against Humana, United Health, Cigna Corp., and Optum RX Inc., accusing health insurers of secretly overcharging for prescription drugs.

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YoloCares: Overregulated California skips key regulations

Our Community Now (OCN); by Craig Dresang, Special to The Enterprise; 8/17/24

California is the most heavily regulated state in the country. According to the Mercatus Center at George Mason University, the Golden State has 420,434 regulatory restrictions which is more than double the national average. ... So, it seems ironic that certain critically important sectors in California that impact the well-being, health and quality of life for millions of seniors are grossly unchecked and mis-regulated. My husband, who has owned and operated salons for nearly 30 years, pointed out that California's Board of Barbering and Cosmetology (BBC) appears to have more rigorous rules and regulations for nail technicians than it does for board-and-care (B&C) owners or privately owned hospice companies. ... [Click on the title's link to continue reading.]

Busted: The top fraud schemes of Q2 2024

Cotiviti; by Erin Rutzler; 8/16/24

As we move through 2024, fraud, waste, and abuse (FWA) continue to be significant issues within healthcare. ... Here's a rundown of notable FWA cases from April to June 2024.

- Nationwide healthcare fraud bust: \$2.75 billion ...
- Pharmacy Medi-Cal fraud scheme: \$300 million ...
- Telemarketer fraud: \$174 million ...
- Physical therapy fraud: \$80 million ...
- Durable medical equipment fraud: \$70 million ...
- COVID-19 testing fraud: \$36 million ...

- Genomic testing fraud: \$25 million ...
- Fraudulent hospice Medicare claims: \$15 million ...
- Genetic testing fraud: \$12 million ...
- Non-covered services fraud: \$1.9 million ...

Wisconsin DHS to create an HCBS minimum fee schedule

Open Minds, Gettysburg, PA; 8/15/24

The Wisconsin Department of Health Services (DHS) is developing a minimum fee schedule for a subset of Medicaid home- and community-based services (HCBS) for which no specific rates exist in fee-for-service Medicaid. The minimum fee schedule will apply to adult family homes, community-based residential facilities, residential apartment complexes, supportive home care (SHC) agencies, and self-directed SHC. The affected programs include Family Care, Family Care Partnership, and Program of All-Inclusive Care for the Elderly (PACE), which together serve nearly 57,000 older adults and adults with disabilities.



Mergers & Acquisition News

Why Optum thrives where other companies failed

Becker's ASC Review; by Patsy Newitt; 8/16/24

UnitedHealth Group's Optum, parent company of Deerfield, Ill.-based ASC chain SCA Health, has seen massive growth in the last few years as other big healthcare networks face obstacles in reaching large-scale profitability. ... A key to Optum's success is its affiliation with a large insurance business. The *Journal* pointed to the "several financial incentives for an insurer to own a health provider, including that it pays itself." ... And Optum keeps growing. The company spent \$31 billion on acquisitions in the last two years, *The Oregonian* reported May 13. ... *UnitedHealth Group is facing scrutiny regarding the Change Healthcare ransomware attack in February. The attack delayed payment and claims processing for healthcare providers around the country, as UnitedHealth subsidiary Change Healthcare handles an estimated one in three healthcare transactions.*

HCA pushed out providers, downgraded care after acquiring Mission Health: report

Healthcare Dive; by Susanna Vogel; 8/16/24
Dive Brief:

- A new working draft study from Wake Forest University alleges HCA has driven doctors away from Mission Hospital and drastically decreased nurse and emergency department staffing since acquiring North Carolina-based Mission Health in 2019.
- The analysis, which draws on dozens of interviews, alleges doctors left Mission following HCA's \$1.5 billion acquisition due to care quality concerns.
- HCA is currently being sued by the North Carolina's attorney general's office over allegations the for-profit giant degraded services at Mission following its acquisition.

4 health systems shrinking their hospital portfolios

Becker's Hospital Review; by Alan Condon; 8/14/24

Merger and acquisition activity is *picking up steam* this year after a decline in deal volume during the pandemic, with some large health systems reorganizing their portfolios and offloading hospitals in various markets. Four health systems that have sold or plan to sell multiple hospitals this year:

1. Tenet Healthcare ...
2. Ascension ...
3. Community Health Systems ...
4. Prospect Medical Holdings ...



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Post-Acute Care News

34 hospitals, health systems raising workers' pay

Becker's Hospital Review; by Kelly Gooch; 8/15/24

The following hospitals and health systems have announced or shared plans for raising workers' pay this year. This is not an exhaustive list. This webpage was last updated on Aug. 15.

- ... Resident physicians and fellows at the University of New Mexico ...
- ... California Nurses Association/National Nurses United approved a new labor contract with ... part of the Providence system ...
- ... Resident physicians and fellows at Kern Medical Center ... 30% increase ...
- ... Members of National Nurses United at SSM Health Saint Louis University Hospital ...
- [More ...]

General News

Cognitive impairment in the workplace

Alzheimer's Association; email 8/14/24, webpage posted 8/8/24

Due to the aging of the U.S. population, rates of cognitive impairment and dementia in the workplace are on the rise. This creates challenges for employers, many of whom may not know how to best support employees who are experiencing symptoms of cognitive impairment. Conversely, employees may be hesitant to share with their employer the challenges that they're experiencing. ... Recommendations Regarding Dementia in the Workplace ... [Click on the title's link for this excellent HR information.]

Today's Encouragement

Many of life's failures are experienced by people who did not realize how close they were to success when they gave up. ~ Thomas Edison





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