#### **Cordt Kassner**

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<subscriptions@hospicepalliativecaretoday.com>

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# August 29th, 2024

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# **Hospice Provider News**

## Southern California doctor sentenced in \$2.8 million hospice fraud scheme

Los Angeles Daily News; by Sydney Barragan; 8/27/24

A Southern California doctor was sentenced Tuesday to 37 months in prison for his role in a \$2.8 million fraud scheme in which Medicare was billed for unneeded services, the U.S. Department of Justice announced. John Thropay, 75, of Arcadia was the medical director for several hospice companies, including Blue Sky Hospice Inc. in Van Nuys. From October 2014 to March 2016, Thropay certified terminal illnesses that patients did not have in order to bill Medicare for hospice services, officials said. According to the indictment, the owners of Blue Sky paid recruiters illegal kickbacks in exchange for referring "beneficiaries," or patients. These recruiters paid the patients approximately \$300 to \$400 of the kickbacks for every month they remained on hospice care with Blue Sky.

## LobsterFest raises more than \$115,000 for a good cause

Steamboat Pilot & Today; by Eli Pace; 8/28/24

Celebrating its 50th anniversary, the Rotary Club of Steamboat Springs served up

more than 300 fresh lobsters Saturday at the Steamboat Springs Airport as Rotarians held to tradition while supporting Northwest Colorado Health's Home Health and Hospice Services. Northwest Colorado Health is the only provider of Home Health and Hospice in the Yampa Valley, ... "In an average year, we care for more than 250 patients and provide support to their family members," said Steph Einfeld, CEO of Northwest Colorado Health. ... The Rotarians had 310 lobsters flown in Thursday evening from Maine for the event that sells out every year, and a silent and live auction augmented table sales and sponsorships. According to the Rotary Club, this year's LobsterFest raised more than \$100,000 to support Northwest Colorado Health's program and \$15,000 for other Rotary charities.

## **Unity Hospice expands service into Outagamie and Winnebago counties**

Seehafernews.com; by Ryan Brahm; 8/27/24

De Pere-based healthcare provider is expanding its service into two nearby counties. Unity Hospice recently announced that they would begin providing services in Outagamie and Winnebago Counties beginning September 1st. The expanded territory enables Unity to support patients and families wherever they call home, including private residences, nursing homes, and assisted living facilities. Unity Executive Director Alisa Gerke said of the expansion, "We're excited to expand our footprint to enhance the quality of life for more patients a nd families. Our experienced, local care team knows the community well and is aligned with area pharmacies and agencies to ensure outstanding, prompt, and dignified care."



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### LifeTouch Hospice still providing end-of-life care in South Arkansas

El Dorado News-Times; by Keturah Smith; 8/28/24

LifeTouch Hospice said Monday they would like the South Arkansas community

to know the company remains fully operational and continues to offer care to terminally ill patients after merging with Little Rock-based Arkansas Hospice last year. "There has been some misconception in El Dorado with the closing of the hospice house," said Hannah Odell, LifeTouch provider relations representative, at the El Dorado Rotary Club meeting. "LifeTouch Hospice is very much still around." While the physical location of LifeTouch has closed, Odell mentioned their services can be pro vided at the nursing home, local hospital, assisted living, home or wherever care is needed. "We're contracted with South Arkansas Regional Hospital for [general inpatient care] for the most critical patients," Odell said. ...

## **Palliative Care Provider News**

#### Editorial: Palliative care can drive change via new payment models

Hospice News; by Jim Parker; 8/27/24

A range of emerging payment model demonstrations are integrating principles traditionally associated with "palliative care" into their structures, but without using that term. The Center for Medicare & Medicaid Innovation's (CMMI) has unveiled a series of models that incorporate elements designed to provide patient-centered care to improve seriously ill patients' quality of life. Examples include the Guiding an Improved Dementia Experience (GUIDE), the Kidney Care Choices and Enhancing Oncology models. The GUIDE model, for example, includes language requiring "person-centered care meant to improve quality of life, delivered by interdisciplinary teams." Thus, one could argue that palliative care principles are becoming more integrated into the larger system, even if stakeholders are not using the same terminology. ...

## **Clinical News**

## Not intervening as a form of care: Negotiating medical practices at the endof-life

AnthroSource, by the American Anthropological Association; by Simon Cohn, Eric Borgstrom, and Annelieke Driessen; 8/27/24

... The story of Keith, a patient living with multiple sclerosis but now with limited time left, introduces a common feature of biomedicine; once set on a particular trajectory, clinicians are often committed to a cascade of options without really

questioning their ultimate value: "When I saw the doctor, the first thing he said was, 'Oh, we can do this, or we can do that...' So I said, 'No, you won't. You won't do any of those things, thank you very much.&rsqu o; And then when he suggested a drug that will give me 'an extra few months', I replied 'Does that give me an extra few months now, or an extra few months at the end? Because I want the few months now, I don't want them at the end." Here, Keith recounts how his doctor seemed compelled to suggest one treatment after another with the intention of prolonging his life, rather than acknowledge that because he was dying, a different approach might be more appropriate. ...



# **Mergers & Acquisition News**

## For-profit Idaho home health powerhouse seeks expansion in Oregon

The Lund Report; by Nick Budnick; 8/27/24

Pennant Group wants to acquire home health and hospice agencies from Signature Group, an affiliate of Avamere Health. State health officials are reviewing a giant for-profit Idaho-based home health care company's \$80 million effort to buy home care and hospice companies around Oregon operated by Signature Group, also known as Avamere Health Care. Officials in the Health Care Market Oversight office of the Oregon Health Authority announced a 30-day public comment period on Aug. 23.

## **Post-Acute Care News**

AHCA's Access to Care report provides grim assessment of nursing home trends

McKnights Long-Term Care News; by Jessica R. Towhey; 8/22/24

Nearly 800 nursing homes closed between February 2020 and July 2024, displacing nearly 30,000 residents, according to a new report from the sector's largest provider advocacy group. The American Health Care Association/National Center for Assisted Living added in its annual Access to Care report that the consequences to rural communities have been devastating. "It's not hyperbole to say access to care is a national crisis," Mark Parkinson, president and CEO of AHCA/NCAL, said in a press re lease announcing the report on Thursday. "Nursing homes are closing at a rate much faster than they are opening, and yet with each passing day, our nation grows older. Providers are doing everything they can to protect and expand access to care, but without support from policymakers, access to care remains under threat."

# High Desert PACE Program launches in Victorville to provide comprehensive care for seniors

Victor Valley News Group (VVNG), Victorville, CA; 8/25/24

The Victor Valley region now has a new, innovative resource for its senior population with the launch of the High Desert PACE (Program of All-Inclusive Care for the Elderly). This new program is dedicated to offering comprehensive and personalized care to elderly individuals, helping them maintain their independence and quality of life while living in the comfort of their own homes.



# **Technology / Innovations News**

# CareXM and Enhabit increase clinician capacity by 250% using virtual visits amid staffing shortages

GlobeNewswire; by CareXM; 8/27/24

CareXM ... is proud to announce some of the exciting results with Enhabit in their quick connect Virtual Visits platform. ... "We saw an increase in clinician capacity, allowing us to do more with less," says Vice President of Care Management Shelley Baker of Enhabit, which provides care annually to 228,000

patients. "Completing visits virtually, when appropriate, has freed up our clinicians to better manage their schedules so they can be with patients who need hands-on care." "While virtual visits do not replace the need for in-home visits, they do offer the ability to connect with patients more frequently, supplementing the visits that do need to be in-person," said Si Luo, CEO at CareXM, "We see a growing need not just for visit utilization but for visit prioritization- let's save our field nurses for those visits that truly do need to be in-person. ..."

### How 3 health systems decide when to buy or build AI

Modern Healthcare; by Gabriel Perna; 8/27/24

As health systems invest in artificial intelligence, executives are deciding when they should buy a vendor's AI product and when they should build their own models... "AI requires more of a data science experience, which is very expensive in the market," Pupo said. "It also requires a lot of actual data and many hospitals do not have that or are able to afford access to large amounts of data." Here is how three health systems are weighing their options.

- Providence: Too big to buy many Al solutions
- Ochsner Health searches for AI talent
- Hartford HealthCare looks in-house

## **General News**

## Healthcare leaders navigate pushback to health equity programs

Modern Healthcare; by Mari Devereaux; 8/27/24

Brewing opposition to health systems' programs on equitable care for patients of color could make health systems need to justify or reframe their efforts. A nonprofit conservative law firm earlier this month filed a federal civil rights complaint with the Health and Human Services Department against Cleveland Clinic, alleging its minority stroke program and minority men's center discriminate against other patients. The center and program offer treatments, prevention services and specialist referrals tailored to meet the needs of Black and Latino patients... [Alter natively...] "There's a war on DEI and health equity right now, because people don't really understand what's happening in these programs," said Dr. Georges Benjamin, executive director of the American Public Health Association. Health equity programs aren't giving more care to one

patient versus another based on race or ethnicity, Benjamin said. Instead, they are identifying high-risk patients with a likelihood for poor outcomes, who are often people of color, and putting together resources to help those individuals get the same care as others, he said.



#### The DEI Dilemma: Separate teams or embedded methods?

Clinical Leader; by Denise N. Bronner, PhD; 8/28/24

In recent years, diversity, equity, and inclusion (DEI) has become a focal point in many industries, with the pharma sector being no exception. As political forces shift the societal climate to be increasingly DEI-averse, pharma sponsors face critical decisions regarding the implementation of DEI initiatives: Should DEI efforts be managed by a separate, dedicated DEI team or woven into the fabric of existing processes and departments? To answer that question, we must examine the advantages and drawbacks of both strategies, focusing on key factors like resource al location, implementation efficiency, cultural integration, and the long-term impact on trial inclusivity. ... Integrating DEI into all aspects of a business is a complex task that requires careful planning and coordination. Without a clear strategy, efforts can become fragmented and ineffective. Editor's Note: While this DEI discussion is written to the pharma industry, its DEI structures, strategies and outcomes apply to hospice and palliative care services.

## Majority of Mission nurses pledge support for strike vote

The Biltmore Beacon, Asheville, NC; by Andrew R. Jones; 8/28/24

Nursing leaders at Asheville's Mission Hospital said they have the pledges needed to call for a strike vote, increasing the likelihood of a significant labor action at the HCA Healthcare-owned facility if an agreement wasn't reached this week. Local nursing representatives said that more than 800 of the approximately 1,600 registered nurses, including members of the Mission Hospital United union and non-union members, signed pledges agreeing to vote on a possible strike at the Asheville hospital, the only Level II trauma center in WNC. The vote will be held over four days, Aug. 25, 26, 28, and 29. Nurse union leaders told Asheville Watchdog that they anticipate most of the nurses covered

by the union contract will authorize a strike that could last from one to three days. ... Several other unions at HCA hospitals across the nation — including those in Nevada, Florida, Texas and Kansas — are moving toward strike votes right now, nurses said. ...

### **International News**

### [UK] Couple marry at hospice hours before husband dies

BBC; by Chris Craddock; 8/24/24

A couple were married in Jersey Hospice's garden hours before the husband died. David and Alison Bothwell had a ceremony on 15 August with family, friends and staff in attendance. Mrs. Bothwell said it was "absolutely wonderful" and the "perfect ending for his life". She has praised hospice staff for organising the wedding on just a few hours' notice after Mr. Bothwell proposed towards the end of his life.



# **Today's Encouragement**

August: When we discover that even the sun can have an attitude problem. ~ Anonymous



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