An Overview of Hospice Care

Presented by

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• Who What When Where & How’s of Hospice

• Nationwide Snapshot of Hospice

• What Has Worked Well

• Advancing Healthcare that Cares More & Costs Less

• Delaware Snapshot of Hospice
Who  What  When  Where & How’s of Hospice

• Who is hospice for?
• What is it?
• When is hospice appropriate?
• Where is care provided?
• How is hospice administered?
• Who pays for hospice care?
Who is it for?

Patients who are facing a life-limiting illness.
What is hospice?

• A model for quality, compassionate care for people facing a life-limiting illness, which helps patients and families live as fully as possible, according to their wishes.

• The focus is on caring, not curing.
When is hospice appropriate?

When patient’s life expectancy is six months or less and a decision is made to opt out of the traditional care delivery system.
Where is care provided?

• In the home environment: private residence, nursing home or residential facility.

• Free-standing center or facility-based (for higher levels of hospice care).

• A Gallup poll indicates 9 out of 10 adults prefer to be in their own homes at end-of-life.
How is care administered?

• **FOUR LEVELS OF CARE**
  - Routine Home Care (96% at this level)
  - Continuous Home Care
  - General Inpatient Care
  - Inpatient Respite Care
HOW IS CARE ADMINISTERED?

• INTERDISCIPLINARY CARE TEAM

 Physician, Registered Nurse, Certified Nursing Assistant, Social Worker, Spiritual Counselor, Bereavement Counselor and Volunteer.

 Provides medical care, symptom management, emotional and spiritual support according to patient and family’s needs and preferences.
How is care administered?

• **FOCUS ON ENTIRE FAMILY**

- Support is provided to the patient and their caregivers.
- Caregiver burden relieved through provision of medications and supplies, training on medical equipment, education about symptoms or future expectations.
WHO PAYS FOR HOSPICE CARE?

• Payments on per diem basis include all medications, equipment and supplies

• Medicare - largest payor since 1981

• Medicaid coverage since 1988

• Private Insurance – 83%
Nationwide Snapshot
(Source: NHPCO Facts and Figures for 2010)

• Est. 1.58 million patients received hospice services
• Average length of service: 67.4 days
• Majority in home environment: 66.7%
• Primary diagnosis:
  Cancer 35.6%
  Non-Cancer 64.4% (Heart, Debility, Dementia, Lung)
• Hospice providers in U.S.: 5,150
• Not-for-profit hospice providers: 36%;
  For-profit hospice providers: 58%
What has Worked Well

- Choice
- Coordinated Care Delivery
- Comfort of Home
- Inpatient Care
- Cost Effectiveness (Duke Study 2007)
- Caregiver Support
- High Levels of Patient/Family Satisfaction
Advancing Health Care that Cares More and Costs Less

• Expansion of service to variety of diagnoses/settings. “Old” criteria examined.

• Research on cost of hospice vs. traditional.

• Effective dialogue about end-of-life care expenses.

• Mandatory Quality Reporting.
Advancing Health Care that Cares More and Costs Less

• Earlier utilization of hospice model in care continuum.
  ➢ Concurrent care
  ➢ Palliative care
  ➢ PACE
Advancing Health Care that Cares More and Costs Less

• INCLUSION IN THE ESSENTIAL BENEFITS PACKAGE

➤ Offering should mirror Medicare
Access to Hospice in Delaware

• DELAWARE HOSPICE
  ➢ Established in 1982
  ➢ Delaware’s only not-for-profit hospice
  ➢ Serving the state from three offices
  ➢ More than 3,000 patients/families annually
  ➢ Satisfaction: 98% of families served
Access to Hospice in Delaware

Transitions
Access to Hospice in Delaware

New Hope
Access to Hospice in Delaware

Delaware Hospice Center
Access to Hospice in Delaware

Family Support Services
Jessica Harper’s Story

“Stopping treatment does not mean giving up on life.”
Delaware Hospice will provide the highest quality hospice and health care services and serve as a trusted community partner in end-of-life education and support.