

Eli's Hospice Insider

Demonstration Projects: These Stats May Determine Concurrent Care's Fate

Demo enrollees averaged 64 days in MCCM.

Medicare officials will be making major decisions about whether hospice services still must go to patients who forego curative care based on the Medicare Care Choices Model demonstration project.

Take a look at the facts and figures included in a recent MCCM evaluation report by demo contractor **AbtAssociates**:

- One-quarter (26.2 percent) of hospices have withdrawn from MCCM.
- About 24 percent of MCCM-eligible referrals elected to go directly into traditional hospice care. Abt views this as "a positive outcome" since the program aims to increase access to hospice services, it says.
- MCCM enrollees tended to be younger than MCCM-eligible beneficiaries not enrolled (age 78, on average, in MCCM, versus age 83 among those not).
- Enrollees were also more likely to live in the Northeast or the Midwest.
- Enrollees were more likely to be diagnosed with cancer than with the other MCCM conditions (CHF, COPD, or HIV/AIDS).
- Enrollees who died prior to June 30, 2017, remained in MCCM for 64 days and received an average of 10.6 visits, phone check-ins, and/or mail-email contacts per month. In-person visits comprised about 75 percent of contacts.
- Nearly 40 percent of MCCM-enrolled benes who died prior to June 30, 2017, had also received services from home health agencies.
- In the last 90 days of life, MCCM enrollees on average had 1.5 emergency department visits, 1.2 inpatient hospitalizations, and \$30,741 in total Medicare expenditures.
- Physicians' offices referred about half of MCCM enrollees, followed by HHAs, hospitals, EDs, and skilled nursing facilities.
- More than 40 percent of the physicians referring MCCM enrollees were oncologists; and nearly 40 percent were internists and family medicine physicians.
- MCCM hospices that had the highest enrollment "tended to have one centralized process for determining eligibility for MCCM and all other programs the hospice offers."
- Eight out of 71 hospices were responsible for the majority of enrollment (58.6 percent).
- The majority of MCCM hospices in the two groups (cohorts 1 and 2) are nonprofit (66.2 and 71.4 percent, respectively), compared with only 22.3 percent nonprofits nationwide. Therefore, MCCM may "be less generalizable to for-profit hospices, which are more numerous in the hospice industry," Abt suggests.
- Abt considers about 80 percent of hospices in MCCM as large, 15 percent as medium, and 5 percent as small, but only 30 percent of non-MCCM hospices as large. Again, that may present problems in generalizing the model's findings.
- As of June 30, 2017, 38 percent (27) of participating hospices had 10 or fewer referrals.
- Of the 1,092 beneficiaries that enrolled, 54.5 percent had died by June 30, 2017, and their median length of stay in MCCM prior to death was 42 days (1.4 months).
- Of the 769 beneficiaries who enrolled in MCCM and subsequently left, 75.7 percent transitioned to the Medicare Hospice Benefit.
- MCCM enrollees who died prior to June 30, 2017, had an average of 10.6 encounters per month under the model; of these, 3.7 were with a care coordinator, 2.7 with a nurse, and 2.4 with a social worker. There was also about one encounter per month for aides, and about one encounter every two months, on average, for chaplains.
- In-home respite was rare with 3.5 percent of enrollees receiving these services under the model.

- Most enrollees who died prior to June 30, 2017, had encounters with a social worker (77.5 percent), a care coordinator (70.8 percent), and a nurse (62.9 percent). Almost one-fifth were visited by a chaplain (18.5 percent). Other providers were less common - just 20 decedents (3.4 percent) met with a bereavement counselor and only three decedents (0.5 percent) met with a pharmacist.