

## Eli's Hospice Insider

### Studies & Surveys: Nursing Homes And Hospices May Mix Better Than Authorities Think, Study Says

**'Crossover' patients see longest stays, highest costs.**

Nursing home residents receiving hospice services have become one of the feds' favorite fraud hot spots, but that thinking may be misguided, a new study contends.

Researchers at the **Regenstrief Institute** and the **Indiana University Center for Aging Research** set out to compare the characteristics of hospice patients in nursing homes with hospice patients living in the community, says a release about a new study, "Hospice Use Among Nursing Home and Non-Nursing Home Patients."

Instead, researchers led by physician **Kathleen Unroe** found that data broke down along four main groups: (1) Patients receiving hospice care only in nursing homes; (2) Individuals who received hospice services only in non-nursing-home settings; (3) Crossover patients who used hospice in both settings; and (4) A transition group who received hospice care within 30 days of transition in or out of a nursing home.

Medicare spending on crossover and transition hospice patients was higher than Medicare costs for hospice patients in nursing homes or in the community, according to the new study scheduled for publication in the *Journal of General Internal Medicine*. "While nursing home patients have longer hospice stays compared to individuals living in the community, the number of days on hospice was significantly higher for the crossover group than for any other group," the study found. "Nearly a third of crossover patients had hospice stays greater than six months."

"Hospice is a poor fit for many people in nursing homes due to the way eligibility criteria currently are configured," Unroe says in the release. "Yet nearly a third of hospice patients in the United States live in nursing homes, and the number is growing. Our goal is to understand more about who uses hospice and where they live so that policymakers can make informed decisions as they contemplate redesign of the hospice benefit."

**Bottom line:** "The impact of changes to the hospice benefit on patients who live or move through nursing homes near the end of life should be carefully considered," urges the study's abstract.

The study, which examined data from 3,771 hospice patients from 1999-2008, is at <http://link.springer.com/article/10.1007/s11606-014-3080-x>.