Hospice provides expert medical, emotional and spiritual care and support – focusing on comfort and quality of life – to terminally ill patients and their caregivers. Caregivers are often family members. Typically, services are offered in the home, but they may be provided wherever the person calls home – whether that be an assisted living facility or a nursing home or hospice house. The Medicare Hospice Benefit began in 1983 and provides interdisciplinary team services that include medical, spiritual, personal care, volunteer and bereavement services for beneficiaries with a life expectancy of six months or less and their caregivers.

The purpose of this summary is to highlight important contributions and characteristics specifically of nonprofit hospices in Maine.

**For Additional Information, Please Contact Home Care & Hospice Alliance of Maine**

Laurie J. Belden, Executive Director
207-213-6125 • laurie@homecarealliance.org • www.HomeCareAlliance.org
Nonprofit, community-integrated hospices benefit their patients, patient families and their communities in unique and recognizable ways. Nevertheless, hospice providers face some barriers that lawmakers and regulators could address or eliminate. By supporting nonprofit, community-based hospices and the services they offer, policymakers and other payers will not only support the survival of these hospices but raise the bar for high-quality hospice care for all patients, families and communities across the U.S. Hospice providers, families who benefit from comprehensive hospice services, and other advocates and stakeholders, must continue to educate policymakers and decision makers about the value of their work.

Maine Nonprofit Hospices Need Your Support
For Maine to be the Leader Providing Access to Hospice

- Maine hospices strive to offer education, awareness, and services to all eligible Mainers. Specifically, we believe at least 1,500 additional Mainers can benefit from hospice services by 2025
- Meeting the needs of Maine’s aged demographic
- Legislative and regulatory changes to address gaps in Maine’s end-of-life care services
- Community participation in our organizations and events
- Financial support

Maine Has 4 Hospice Houses
All Administered by Nonprofit Hospices

Hospice houses provide important specialized care to people with severe or complex needs in a home-like setting.
Hospice provides expert medical, emotional and spiritual care and support – focusing on comfort and quality of life – to terminally ill patients and their caregivers. Caregivers are often family members. Typically, services are offered in the home, but they may be provided wherever the person calls home – whether that be an assisted living facility or a nursing home or hospice house. The Medicare Hospice Benefit began in 1983 and provides interdisciplinary team services that include medical, spiritual, personal care, volunteer and bereavement services for beneficiaries with a life expectancy of six months or less and their caregivers. This paper highlights important contributions and characteristics specifically of nonprofit hospices in Maine, including:

1. Growth in Hospice Utilization
2. Hospice Quality Ratings
3. Innovative Practices
4. Hospice Houses

Nonprofit, community-integrated hospices benefit their patients, patient families and their communities in unique and recognizable ways. Nevertheless, hospice providers face some barriers that lawmakers and regulators could address or eliminate. By supporting nonprofit, community-based hospices and the services they offer, policymakers and other payers will not only support the survival of these hospices but raise the bar for high-quality hospice care for all patients, families and communities across the U.S. Hospice providers, families who benefit from comprehensive hospice services, and other advocates and stakeholders, must continue to educate policymakers and decision makers about the value of their work.

**Growth in Hospice Utilization**

Hospice utilization is a measure of both access to hospice services and a quality measure. Hospice Utilization is the percentage of Medicare Hospice Deaths divided by Total Medicare Deaths. Nationally, the highest hospice utilization rate was reached in 2019 (50.5%), then it tapered due to COVID-19 (2021= 44.9%). Historically, hospice utilization has increased ~1.0% - 1.5% annually since 2000.
Maine, however, has a phenomenal growth story regarding hospice utilization. In 2020, Maine’s hospice utilization rate ranked 50th in the country (6.6%) among all states and the District of Columbia (compared to the national average at the time of 20.4%). Since 2000, Maine’s hospices, due largely to our nonprofit hospices efforts, worked in increase the state’s hospice utilization rate. In 2016, Maine’s hospice utilization equaled the national average (47.7%) and has exceeded it ever since. According to current 2021 Medicare information, Maine ranks 13th highest in the country with a hospice utilization rate of 49.7%. About half of all dying Mainers die in hospice – remarkable work!

### 2005-2021 State Hospice Utilization 17-Year Trends

![Graph showing hospice utilization trends from 2005 to 2021 for Maine and the national average.](image)

**Note:** Hospice Utilization = Medicare Hospice Deaths / Total Medicare Deaths.

### Hospice Quality Ratings

Medicare’s Care Compare for Hospice includes public reporting of quality measures. In the FY 2022 Hospice Final Rule, CMS finalized public reporting of CAHPS Hospice Survey Star Ratings. Beginning with the August 2022 refresh of Care Compare, a Family Caregiver Survey Rating summary Star Rating is publicly reported for all hospices with 75 or more completed surveys over the reporting period. Star Ratings will be updated every other quarter.

Nationally, approximately 1/3 of hospices met criteria to report Star ratings. However, in Maine 87% of Medicare certified hospices (13/15) met criteria to report Star ratings. As illustrated in the table below, Maine hospices average Star rating (3.69; 13th highest state score) was higher than the national average (3.41), and no Maine hospices reported Star ratings below 3 (out of a high 5 score).
In addition to strong Hospice Star ratings, Maine hospices also performed stronger than national averages on both of the other Care Compare surveys – the Hospice Item Set (HIS) and the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Hospice Survey. The HIS includes nine (9) “top box” quality measures (“top box” means the highest quality option). The CAHPS includes eight (8) “top box” quality measures. Maine hospices mean HIS “top box” scores (86.1%) were ranked 2nd highest in the country (national= 77.4%). Maine hospices mean CAHPS “top box” scores (82.2%) were ranked 19th highest in the country (national= 81.6%).

**Innovative Practices**

While all hospices in Maine and nationally strive to provide excellent end-of-life care, there has been consistent recognition of the outstanding quality of care provided by non-profit hospices\(^1, 7\) and growing concerns regarding the quality of care provided by for profit hospices\(^8, 9, 10, 11, 12\). Several resources are available to assist the general public in choosing a hospice provider\(^13, 14, 15\). Some of the criteria to choose a good hospice include:

1. Non-profit status
2. 20+ years of experience
3. Hospice and palliative care certified staff
4. Accreditation
5. Inpatient hospice units / Hospice Houses
6. Membership in state and national hospice organizations

Not coincidentally, non-profit hospices strongly meet these recommendations. Hospice began in the United States in the late 1970’s primarily as a non-profit movement. Non-profit hospices average 27 years of Medicare certification, compared to for profit hospices averaging 10 years of Medicare certification\(^16\). While only about 20% of hospices have inpatient hospice units / hospice houses, these specialty services are nearly exclusively provided by non-profit hospice providers.

**Hospice Houses**

Maine has four (4) Hospice Houses. All four Hospice Houses are administered exclusively by non-profit hospice providers. Hospice Houses provide important specialized care to people with severe or complex needs in a home-like setting. They also provide an alternative for patients not wishing to die in their own home.
How You Can Help
There are several ways you can help support non-profit hospices in Maine, including:

- Maine hospices strive to offer education, awareness, and services to all eligible Mainers. Specifically, we believe at least 1,500 additional Mainers can benefit from hospice services by 2025.
- Meeting the needs of Maine’s aged demographic.
- Legislative and regulatory changes to address gaps in Maine’s end-of-life care services.
- Community participation in our organizations and events.
- Financial support.

References:
2. Information based on Medicare hospice claims through 2021, Care Compare 5/22, cost reports, MedPAC reports, GuideStar, and hospice annual reports for ten nonprofit hospices (nine in ME, one in NH serving ME) and seven for profit hospices (six in ME, one in NH serving ME).


2022 Maine State Hospice Report

A Proud Supporter of

2021 Medicare Information With 2020 Comparisons

12/1/22

How have state hospice organizations changed?
Hospice Utilization

- Is a measure of ACCESS…
- Is a measure of QUALITY…

Hospice Utilization

- Is complicated…


2005-2021 State Hospice Utilization
17-Year Trends

Note: Hospice Utilization = Medicare Hospice Deaths / Total Medicare Deaths.
Hospice Utilization – Thoughts on 2020 & 2021...

- 2019 Hospice Utilization: 50.5%
- 2020 Hospice Utilization: 46.7%
- National: Difference 2019 – 2020: -3.8%

- 2020 Hospice Utilization decreased nationally for the first time ever.
- 2021 Hospice Utilization decreased nationally again – although less of a decrease.
- The last time Hospice Utilization was ~44.9% was 2012...

WHY?

Hospice Utilization – Thoughts on 2020 & 2021...

- Hospice Trends:
  - 2020 and 2021 hospice admissions and deaths are above 2019.
  - Although, 2021 hospice admissions and deaths are slightly lower than 2020.
  - Presumably, this is due to the ongoing impact of COVID and deaths in hospitals and facilities where hospices had limited access during 2021.

- Medicare Trends:
  - 2020 and 2021 total Medicare deaths are well above 2019 (~+400K).
  - On average over the past 10 years, we see an increase of ~40,000 Medicare beneficiary deaths / year.

<table>
<thead>
<tr>
<th>Year</th>
<th>Medicare Deaths</th>
<th>Annual Increase</th>
<th>Medicare Hospice Deaths</th>
<th>Annual Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>2,280,118</td>
<td>+34,073</td>
<td>1,126,042</td>
<td>+32,235</td>
</tr>
<tr>
<td>2019</td>
<td>2,294,493</td>
<td>+14,375</td>
<td>1,157,544</td>
<td>+31,502</td>
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<tr>
<td>2020</td>
<td>2,701,983</td>
<td>+407,490</td>
<td>1,260,695</td>
<td>+103,157</td>
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<tr>
<td>2021</td>
<td>2,722,978</td>
<td>+20,995</td>
<td>1,223,327</td>
<td>-37,368</td>
</tr>
</tbody>
</table>
Hospice Utilization – Thoughts on 2022 & 2023...

Tsunami

Reverse Tsunami

2019 2023

Deaths

2015 2020 2025
2021 Hospice Utilization
(Medicare Hospice Deaths / Total Medicare Deaths)

2020 Hospice Utilization
(Medicare Hospice Deaths / Total Medicare Deaths)
2021 Hospice Utilization – Maine
(Medicare Hospice Deaths / Total Medicare Deaths)

2020 Hospice Utilization – Maine
(Medicare Hospice Deaths / Total Medicare Deaths)
## 2021 Demographics & Hospice Utilization

<table>
<thead>
<tr>
<th></th>
<th>Maine</th>
<th>National</th>
</tr>
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<tbody>
<tr>
<td>Population (2020 Census; 2021 NA)</td>
<td>1,350,141</td>
<td>339,398,247</td>
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<tr>
<td>Total Deaths (2020 Census; 2021 NA)</td>
<td>15,740</td>
<td>34,653,269</td>
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<tr>
<td>Medicare Beneficiaries</td>
<td>371,136</td>
<td>66,267,916</td>
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<tr>
<td>Medicare Beneficiary Deaths</td>
<td>14,196</td>
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<td>Medicare Beneficiaries Admitted to Hospice</td>
<td>9,231</td>
<td>1,692,112</td>
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<td>Medicare Hospice Beneficiary Deaths</td>
<td>7,060</td>
<td>1,232,327</td>
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<tr>
<td>Medicare Hospice Total Days of Care</td>
<td>628,824 Days</td>
<td>122,454,879 Days</td>
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<td>Medicare Hospice Mean Days / Beneficiary</td>
<td>68 Days</td>
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<tr>
<td>Medicare Hospice Median Days / Beneficiary</td>
<td>22 Days</td>
<td>23 Days</td>
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<tr>
<td>Medicare Hospice Total Payments</td>
<td>$111,252,703</td>
<td>$22,059,484,635</td>
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<tr>
<td>Medicare Hospice Mean Payment / Beneficiary</td>
<td>$12,052</td>
<td>$13,117</td>
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## 2020 Demographics & Hospice Utilization

<table>
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<tr>
<td>Medicare Beneficiaries</td>
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<td>64,454,982</td>
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<td>Medicare Beneficiary Deaths</td>
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<td>Medicare Beneficiaries Admitted to Hospice</td>
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<td>1,703,813</td>
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<td>Medicare Hospice Beneficiary Deaths</td>
<td>7,007</td>
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<td>Medicare Hospice Total Days of Care</td>
<td>628,093 Days</td>
<td>125,709,522 Days</td>
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<tr>
<td>Medicare Hospice Mean Days / Beneficiary</td>
<td>69 Days</td>
<td>74 Days</td>
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<tr>
<td>Medicare Hospice Median Days / Beneficiary</td>
<td>23 Days</td>
<td>24 Days</td>
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<tr>
<td>Medicare Hospice Total Payments</td>
<td>$109,198,152</td>
<td>$22,060,331,454</td>
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<tr>
<td>Medicare Hospice Mean Payment / Beneficiary</td>
<td>$11,899</td>
<td>$12,949</td>
</tr>
</tbody>
</table>
2021 Hospice Utilization
(Medicare Hospice Deaths / Total Medicare Deaths)

2020 Hospice Utilization
(Medicare Hospice Deaths / Total Medicare Deaths)

ME #13: 49.7%
National: 44.9%

ME #9: 52.9%
National: 46.7%
Change in Hospice Utilization 2019-2021
(Medicare Hospice Deaths / Total Medicare Deaths)


Impact of COVID – WOW!

Change in Hospice Utilization 2000-2021
(Medicare Hospice Deaths / Total Medicare Deaths)

Medicare Advantage & Hospice

Hospice Medicare Advantage

Hospice Medicare Advantage

- On January 18, 2019, CMS announced it will test carving hospice into Medicare Advantage (MA) plans under its Value-Based Insurance Design (VBID).
- This test began 1/1/2021.
- Some initial concerns include:
  - Will hospice reimbursement be reduced by MA plans? Perhaps MA plans will send more beneficiaries to hospice, but pay less for them?
  - Will hospice interdisciplinary services be unbundled? Perhaps MA plans will only pay for more skilled discipline visits?
  - How will CMS measure success? (Only $$$?) *This is the quality question!*

9/29/22: CMS posted the list of plans that will be participating in the MA VBID Hospice Component model for CY 2023. Fifteen plans will be participating, six more than in 2021 and two more than in 2022.

~Theresa Forster, NAHC
2021 Medicare Advantage – All
Percentage of All Beneficiaries

2021 Medicare Advantage – All, Maine
Percentage of All Beneficiaries
2021 Medicare Advantage – All
Percentage of All Beneficiaries

ME #11: 48.5%
National: 44.7%

2021 Medicare Advantage – All – Maine
Percentage of All Beneficiaries

ME #11: 48.5%
National: 44.7%
2021 Medicare Advantage – Deaths
Percentage of Beneficiary Deaths

Note: When comparing MA All to MA Deaths, 20% of counties change rank.
2021 Medicare Advantage – Deaths
Percentage of All Beneficiaries

None: When comparing MA All to MA Deaths, 27% of counties change rank.

Note: When comparing MA All to MA Deaths, 27% of counties change rank.
10/1/22 Notes:
• CMS released the August refresh of Hospice Compare information on 8/31/22. Several changes have been made, including:
  • New Hospice Star Rating information is available.
  • CMS is removing seven individual HIS process measures and the Comprehensive Assessment Measure no earlier than May 2022.
  • CMS adding the Hospice Care Index (HCI), a composite measure of 10 indicators from claims data, expected in the 8/22 refresh.
• Hospice Outcomes & Patient Evaluation (HOPE) tool is in development.

**New Medicare Hospice Star Ratings, 8/31/22**

• Over 6,000 hospices were included in the Aug. 31, 2022, Care Compare for Hospice release (N= 6,041; 27% of hospices nationally in CA).
• Only 1/3 of hospices had reportable Star Ratings (2,026 / 6,041), perhaps because CMS blanks cells with <70 beneficiaries for Star Ratings.
• Of hospices with reportable Star Ratings:
  - 5 Star= 195 (10%) hospices ME= 1/13 (  8%)
  - 4 Star= 782 (39%) hospices ME= 7/13 (54%)
  - 3 Star= 737 (36%) hospices ME= 5/13 (38%)
  - 2 Star= 287 (14%) hospices ME= 0/13 (  0%)
  - 1 Star= 25 (1%) hospices ME= 0/13 (  0%)
• Therefore, about half of hospices had Star Ratings 4+ (49%) and 85% of hospices had 3+ Star Ratings.
New Medicare Hospice Star Ratings, 8/31/22

- Some caveats:
  - Hospice Star Ratings are new. We should allow ~2 years for both CMS and Hospices to receive, understand, and work to improve scores before making important decisions based on this information.
  - The percentages of hospices with Star Ratings in each state ranged from 10% (CA) to 96% (KY). Reasons for hospices missing Star Ratings need to be better understood, discussed, and reduced in the future.
  - In Maine, 13/15 (87%) of Medicare certified hospices eligible for Star Ratings received Star Ratings.

Hospice Item Set Notes, 8/31/22

- Interestingly, Hospice Item Set scores dropped significantly between 2022 Q2 and Q3 – perhaps COVID related (since this is an internal measure)?
- This decreased both HIS mean scores and HIS & CAHPS mean scores.
8/22 Care Compare – Hospice
Mean Hospice Star Scores x State

8/22 Care Compare - Hospice
Hospice HIS & CAHPS – Average Top Box Scores

N= 2020 / 6041 (33%) of hospices; Hospice Analytics, 8/31/22.

N= 2979 / 6041 (49%) of hospices; Hospice Analytics, 8/31/22.
# 8/22 Hospice Compare:
Hospice HIS & CAHPS – Average Top Box Scores

## Maine Top 10:

<table>
<thead>
<tr>
<th>State</th>
<th>Hospice</th>
<th>Mean HIS &amp; CAHPS</th>
<th>Star Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maine</td>
<td>ST. JOSEPH HOSPICE 201004</td>
<td>88.70</td>
<td>5.00</td>
</tr>
<tr>
<td>Maine</td>
<td>CHANS HOSPICE CARE 201201</td>
<td>86.85</td>
<td>4.00</td>
</tr>
<tr>
<td>Maine</td>
<td>HABITAT HOME HEALTHCARE &amp; HOSPICE 201500</td>
<td>86.33</td>
<td>4.00</td>
</tr>
<tr>
<td>Maine</td>
<td>HOSPICE OF SOUTHERN MAINE 201511</td>
<td>86.00</td>
<td>4.00</td>
</tr>
<tr>
<td>Maine</td>
<td>BEACON HOSPICE AN AMEDEY'S COMPANY 201517</td>
<td>85.86</td>
<td>4.00</td>
</tr>
<tr>
<td>Maine</td>
<td>ANDROSCOGGIN HOME HEALTHCARE &amp; HOSPICE 201513</td>
<td>85.32</td>
<td>4.00</td>
</tr>
<tr>
<td>Maine</td>
<td>KINDRED HOSPICE 201523</td>
<td>85.26</td>
<td>3.00</td>
</tr>
<tr>
<td>Maine</td>
<td>BEACON HOSPICE AN AMEDEY'S COMPANY 201516</td>
<td>85.26</td>
<td>3.00</td>
</tr>
<tr>
<td>Maine</td>
<td>BEACON HOSPICE AN AMEDEY'S COMPANY 201520</td>
<td>84.85</td>
<td>3.00</td>
</tr>
<tr>
<td>Maine</td>
<td>COMPASSUS - GREATER MAINE 201519</td>
<td>84.18</td>
<td>4.00</td>
</tr>
</tbody>
</table>

N= 2979 / 6041 (49%) of hospices; Hospice Analytics, 8/31/22.

---

## Additional Medicare Claims Data Points
6/22 Medicare Hospice
Percentage of Hospices x Corporate Ownership

**Maine**
- Independent: 67%
- Publicly Traded: 20%
- Private Equity: 7%
- Potential Chain: 7%

**National**
- Independent: 55%
- Publicly Traded: 24%
- Private Equity: 13%
- Potential Chain: 8%

6/22 Hospice Analytics update; based on JAMA, Stevenson; Aldridge, 2021. www.HospiceAnalytics.com
2021 Medicare Hospice
Percentage of Hospices x Type Control

**Maine**

- Non-profit / Other: 67%
- For profit: 33%

**National**

- Non-profit / Other: 31%
- For profit: 69%

---

2021 Medicare Hospice
Percentage of Hospices x Type Control

**Mean Star Ratings**

- Non-profit / Other: 3.6
- For profit: 3.2

**National**

- Non-profit / Other: 31%
- For profit: 69%
### 2021 Medicare Hospice Percentage of Hospices x Accreditation Organization

**Maine**
- Not accredited: 87%
- CHAP: 7%
- ACHC: 7%
- Joint Commission: 20%

**National**
- Not accredited: 47%
- ACHC: 14%
- CHAP: 20%
- Joint Commission: 20%

### Mean Star Ratings

- Not accredited: 3.6
- ACHC: 3.3
- CHAP: 3.2
- Joint Commission: 3.2
2021 Medicare Beneficiaries Admitted to Hospice  
National= 1,692,112

2020 Medicare Beneficiaries Admitted to Hospice  
National= 1,703,652
2021 Medicare Hospice
Mean Days of Care / Beneficiary

National: ME #32:

68 68

www.HospiceAnalytics.com

2020 Medicare Hospice
Mean Days of Care / Beneficiary

National: ME #31:

74 69

www.HospiceAnalytics.com
2005-2021 Hospice Mean Days of Care
17-Year Trends

2021 Medicare Hospice
Median Days of Care / Beneficiary
2020 Medicare Hospice
Median Days of Care / Beneficiary

National: 24
ME #25: 23

2005-2021 Hospice Median Days of Care
17-Year Trends

National +1
ME -2
2021 Medicare Hospice
Percentage of Days x LOS / Beneficiary

Maine
- < 7 days, 31%
- 8-29 days, 23%
- 30-89 days, 21%
- 90-179 days, 12%
- 180+ days, 12%

National
- < 7 days, 30%
- 8-29 days, 23%
- 30-89 days, 21%
- 90-179 days, 12%
- 180+ days, 13%

2020 Medicare Hospice
Percentage of Days x LOS / Beneficiary

Maine
- < 7 days, 29%
- 8-29 days, 24%
- 30-89 days, 21%
- 90-179 days, 11%
- 180+ days, 12%

National
- < 7 days, 29%
- 8-29 days, 23%
- 30-89 days, 20%
- 90-179 days, 12%
- 180+ days, 13%
2021 Medicare Hospice
Percentage of Days x LOS / Beneficiary

Maine

- 61+ Days: 31%
- 0-60 Days: 69%

National

- 61+ Days: 32%
- 0-60 Days: 68%

2020 Medicare Hospice
Percentage of Days x LOS / Beneficiary

Maine

- 61+ Days: 31%
- 0-60 Days: 69%

National

- 61+ Days: 32%
- 0-60 Days: 68%
2021 Medicare Hospice Beneficiaries
Top Six ICD-10 PRIMARY Diagnoses (out of 19 categories)

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Maine</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Others</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Endocrine</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td>Respiratory</td>
<td>9%</td>
<td>10%</td>
</tr>
<tr>
<td>Nervous</td>
<td>24%</td>
<td>24%</td>
</tr>
<tr>
<td>Cancers</td>
<td>26%</td>
<td>24%</td>
</tr>
<tr>
<td>Circulatory</td>
<td>30%</td>
<td>29%</td>
</tr>
</tbody>
</table>

2020 Medicare Hospice Beneficiaries
Top Six ICD-10 PRIMARY Diagnoses (out of 19 categories)

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<tr>
<th>Diagnosis</th>
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<tbody>
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<td>All Others</td>
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<tr>
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<td>27%</td>
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</tr>
<tr>
<td>Circulatory</td>
<td>27%</td>
<td>28%</td>
</tr>
</tbody>
</table>
2021 Medicare Hospice Beneficiaries Status at Discharge

- Maine: 89% Alive, 11% Deceased
- National: 84% Alive, 16% Deceased

Note: Percent DC Deceased = DC Deceased / (DC Deceased + DC Alive) calculated for each admission.

2020 Medicare Hospice Beneficiaries Status at Discharge

- Maine: 90% Alive, 10% Deceased
- National: 85% Alive, 15% Deceased

Note: Percent DC Deceased = DC Deceased / (DC Deceased + DC Alive) calculated for each admission.
2021 Medicare Hospice Beneficiaries
Status at Discharge - Detailed

- Maine:
  - DC Alive - Discharged for Cause (hospice initiated): 6%
  - DC Alive - Moved (hospice initiated): 3%
  - DC Alive - Transfer (patient initiated): 18%
  - DC Alive - No Longer Ill (hospice initiated): 20%
  - DC Alive - Revocation (patient initiated): 3%
  - Still on Service: 5%

- National:
  - DC Alive - Discharged for Cause (hospice initiated): 8%
  - DC Alive - Moved (hospice initiated): 5%
  - DC Alive - Transfer (patient initiated): 20%
  - DC Alive - No Longer Ill (hospice initiated): 67%
  - DC Alive - Revocation (patient initiated): 3%
  - Still on Service: 4%

Note: Percentages calculated for each admission.

2020 Medicare Hospice Beneficiaries
NEW - Status at Discharge - Detailed

- Maine:
  - DC Alive - Discharged for Cause (hospice initiated): 1%
  - DC Alive - Moved (hospice initiated): 1%
  - DC Alive - Transfer (patient initiated): 18%
  - DC Alive - No Longer Ill (hospice initiated): 19%
  - DC Alive - Revocation (patient initiated): 3%
  - Still on Service: 4%

- National:
  - DC Alive - Discharged for Cause (hospice initiated): 1%
  - DC Alive - Moved (hospice initiated): 4%
  - DC Alive - Transfer (patient initiated): 19%
  - DC Alive - No Longer Ill (hospice initiated): 69%
  - DC Alive - Revocation (patient initiated): 3%
  - Still on Service: 2%

Note: Percentages calculated for each admission.
Minorities are underserved in hospice.

www.HospiceAnalytics.com
2021 Medicare Hospice Beneficiaries
Levels of Care (days)

2020 Medicare Hospice Beneficiaries
Levels of Care (days)
Thank you

Please contact Cordt Kassner, PhD, at Hospice Analytics with any questions, comments, feedback, or for additional information:
P: 719-209-1237
E: Info@HospiceAnalytics.com
W: www.HospiceAnalytics.com

* Review the new National Hospice Locator at www.HospiceAnalytics.com – geo-maps and detailed information on every known hospice in the United States!