



NHPCO FY2007 National Summary of Hospice Care

Prepared by:

National Hospice and Palliative Care Organization
1700 Diagonal Road, Suite 625
Alexandria, Virginia 22314 USA
www.nhpc.org

Questions may be directed to:

nds@nhpc.org

Released October 2008

Copyright Restrictions: This document is intended for use by provider members of the National Hospice and Palliative Care Organization. It may not be reproduced, disseminated, or posted to any publicly-accessible Web page without express written permission from the National Hospice and Palliative Care Organization.

Table of Contents

| | |
|---|----|
| Background | 3 |
| Executive Summary | 4 |
| Summary Tables | |
| Table 1. Hospice Agency Demographics | 6 |
| Table 2. Characteristics by Agency Size | 8 |
| Table 3. Patient Volume | 9 |
| Table 4. Referral Source | 9 |
| Table 5. Non-Death Discharges | 9 |
| Table 6. Patient Demographics | 10 |
| Table 7. Primary Diagnosis | 11 |
| Table 8. Length of Service | 12 |
| Table 9. Location of Care | 15 |
| Table 10. Level of Care | 15 |
| Table 11. Payer Mix | 16 |
| Table 12. Staff Distribution and Turnover | 17 |
| Table 13. Volunteer Services | 18 |
| Table 14. Bereavement Services | 19 |
| Table 15. Staff Management | 20 |
| Table 16. Service Delivery – Home Hospice Visits | 21 |
| Table 17. Agency Revenue and Expenses | 22 |
| Table 18. Cost per Patient Day | 23 |
| Table 19. Inpatient Facilities or Residential Units | 24 |
| Additional Resources for NHPCO Members | 25 |



Background

About this Report

The National Hospice and Palliative Care Organization's *National Summary of Hospice Care* contains comprehensive national estimates and statistical trends for the following areas of hospice care:

- Agency demographics;
- Patient demographics;
- Staffing management and delivery; and
- Payer mix, revenue and expenses.

Data Source

The primary source of these findings are the hospice and palliative care providers who participate in NHPCO's *National Data Set*, a comprehensive annual survey supported by many of our state organization partners. Data from the National Data Set initiative are supplemented by information NHPCO gathers from other sources. For these findings, this included information from hospice providers that completed NHPCO's annual membership survey, state-mandated surveys, and Medicare certification data from the CMS Provider of Services file.

Beginning with this year's report, the results of an ongoing, independent analysis of Medicare hospice cost reports are incorporated. The data are presented as cost per patient day and are limited to Medicare-certified hospice providers that filed a FY2005 or FY2006 hospice cost report (complete FY2007 costs were not available at time of analysis).

Data Interpretation

To show the range of hospice performance, the attached tables provide national statistics for both FY2006 and FY2007. Where appropriate, percent distributions, agency means, and population means are reported. Percentile rankings, including the 25th, 50th (median) and 75th percentiles are included. Percentile rankings are used to measure central tendency and may be interpreted as x% of hospice programs reported a value above or below this value. The number of valid responses to each section is reported as the "N".

Note that response rates can differ dramatically across and within sections, so results should be interpreted with caution.



Executive Summary

Provider Characteristics

Highlights for FY2007 include:

- Number of Hospices in U.S.¹
 - Total agencies: 3500
 - Total sites, including satellite offices: 4700
 - Total dedicated inpatient units and facilities: More than 450
- Agency Type
 - 58.3% of hospice agencies were independent, freestanding (Table 1); the remaining agencies were affiliated with a hospital system, home health agency, or nursing home.
 - 19.7% of hospice agencies were operating a dedicated inpatient unit or facility.
- Agency Size
 - The average daily census was 90.2 patients and the median (50th percentile) daily census was 51.8 patients.
 - 40.7% of providers reported to care for 1 to 25 patients per day; 40.4% care for 26 to 100 patients per day; and 19.0% of care for more than 100 patients per day (Tables 1, 2).
 - Agency characteristics by agency size are located in Table 2.
- Organizational Tax Status
 - 48.6% of providers reported not-for-profit tax status and 47.1% reported for-profit status (Table 1). Government-owned programs comprised less than 5% of providers.

Staffing Management and Service Delivery

Hospice paid and volunteer staff productivity continues to center on direct patient care.

- Paid Staff
 - 75.6% of home hospice full-time equivalent employees (FTEs) and 76.5% of total FTEs were designated for direct patient care or bereavement support in 2007 (Table 12).
 - The average patient caseload for a home health aide was 9.5 patients, 11.2 patients for a nurse case manager, 23.4 patients for a social service worker, and 35.1 patients for a spiritual caregiver (Table 15).
 - Clinical staff made an average of 62.1 visits per home care admission; 12.6 visits per week and 2.5 visits per 8-hour day (Table 16).
- Volunteer Staff
 - Volunteer staff provided 6% of all clinical staff hours (Table 13).
 - The typical hospice volunteer devoted 45.1 hours of service over the course of the year and made 18 visits to patients (Table 13).

¹ Estimates include the District of Columbia, Puerto Rico, Guam, and the U.S Virgin Islands.



- Bereavement Services
 - For each patient death in 2007, an average of two family members received bereavement support from their hospice (Table 14).
 - Community members accounted for about 18% of bereavement clients (Table 14).

Payer Mix, Revenue and Expenses

- Revenue and Expenses
 - Line-item cost per patient day has been incorporated into Table 18.
 - Within not-for profit agencies, direct hospice service accounts for the majority of agency revenue (84.7%) and expenses (90.5%). Fundraising expenses accounted for less than 3% of expenses (Table 17).
- Payer Mix
 - The Medicare Hospice Benefit covered 83.6% of hospice patients and 87.0% of patient care days in 2007 (Table 11).

Patient Demographics, At a Glance

- Primary Diagnosis
 - Cancer diagnoses accounted for 41.3% of admissions and 43.2% of deaths in 2007 (Table 7).
 - The top five chronic illnesses served by hospice included heart disease (11.8% of admissions), debility unspecified (11.2%), dementia (10.1%), and lung disease (7.9%) (Table 7).
- Patient Age, Race, and Ethnicity
 - 82.8% of hospice patients were age 65 years and older; pediatric patients accounted for less than 1% of admissions (Table 6).
 - 5.1% of patients were identified as being of Hispanic or Latino origin. Patients of minority (non-Caucasian) race accounted for 18.7% of patients (Table 6).
- Location of Care
 - 70.3% of patients received care in the place they reside; 19.2% received care in an inpatient facility and 10.5% of patients died in an acute care hospital setting (Table 9).
- Length of Service
 - The median (50th percentile) length of service in 2007 was 20 days. The average length of service increased to 67.4 days (from 59.8 in 2006).² Length of service by agency type, size, tax status, Medicare certification status, and primary diagnosis can be found in Table 8.
 - Non-death (live) discharges accounted for 15.9% of total patient discharges (Table 5).
 - Nearly one-third (30.8%) of those served by hospice died or were discharged in seven days or less, and 13.1% died or were discharged in 180 days or more (Table 8).

² Length of service can be reported as both an average and a median. The median, however, is considered a more accurate gauge in understanding the experience of the typical patient since it is not influenced by outliers (extreme values). The median length of service can be interpreted as half of hospice patients received care for less than the median number of days and half received care for more than the median number of days.

Summary Tables

Table 1. Hospice Agency Demographics

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|---|---------------------|-------|---------------------|-------|---------------------------|
| | Percent of Agencies | N | Percent of Agencies | N | |
| TOTAL HOSPICE PROVIDERS | | | | | |
| Total Agencies | | 3,700 | | 3,500 | 5.7% |
| Total Sites, including Satellite Offices | | 4,700 | | 4,500 | 4.4% |
| AGENCY OWNERSHIP* | | | | | |
| Free Standing / Independent Hospice | 58.3% | 3,422 | 56.2% | 3,267 | 2.1% |
| Part of a Hospital System | 20.8% | 3,422 | 22.6% | 3,267 | -1.8% |
| Part of a Home Health Agency | 19.7% | 3,422 | 20.1% | 3,267 | -0.4% |
| Part of a Nursing Home | 1.3% | 3,422 | 1.2% | 3,267 | 0.1% |
| INPATIENT SERVICES* | | | | | |
| % Operating Inpatient Facility or Residence | 19.7% | 2,265 | 19.6% | 2,279 | 0.1% |
| TAX STATUS* | | | | | |
| Voluntary / Not for Profit | 48.6% | 3,562 | 49.0% | 3,424 | -0.3% |
| Proprietary / For Profit | 47.1% | 3,562 | 46.0% | 3,424 | 1.1% |
| Government | 4.3% | 3,562 | 5.1% | 3,424 | -0.8% |
| GEOGRAPHIC LOCATION SERVED* | | | | | |
| Mixed Urban and Rural | 41.7% | 1,270 | 40.7% | 599 | 1.0% |
| Primarily Rural | 36.8% | 1,270 | 29.1% | 599 | 7.7% |
| Primarily Urban | 21.5% | 1,270 | 30.2% | 599 | -8.7% |
| AVERAGE DAILY CENSUS*¹ | | | | | |
| 1 to 9 patients | 18.7% | 2,077 | 19.1% | 2,184 | -0.4% |
| 10 to 25 patients | 22.3% | 2,077 | 23.7% | 2,184 | -1.4% |
| 26 to 50 patients | 21.4% | 2,077 | 23.9% | 2,184 | -2.5% |
| 51 to 100 patients | 19.1% | 2,077 | 16.3% | 2,184 | 2.8% |
| 101 to 200 patients | 11.1% | 2,077 | 10.8% | 2,184 | 0.3% |
| > 200 patients | 7.5% | 2,077 | 6.2% | 2,184 | 1.3% |
| TOTAL PATIENT ADMISSIONS* | | | | | |
| 1 to 49 | 18.5% | 1,859 | 17.9% | 2,450 | 0.6% |
| 50 to 150 | 28.0% | 1,859 | 29.0% | 2,450 | -1.0% |
| 151 to 500 | 32.9% | 1,859 | 34.1% | 2,450 | -1.2% |
| 501 to 1,500 | 16.1% | 1,859 | 14.5% | 2,450 | 1.6% |
| > 1,500 | 4.6% | 1,859 | 4.5% | 2,450 | 0.1% |

N = Number of hospice agencies with available data.

¹ Total patient care days divided by 365.

* NDS data supplemented with NHPCO membership data and CMS Provider of Services certification data.

Table 1. Hospice Agency Demographics (continued)

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|--|---------------------|-------|---------------------|-------|---------------------------|
| | Percent of Agencies | N | Percent of Agencies | N | |
| CERTIFICATION & ACCREDITATION* | | | | | |
| Medicare-certified Hospice Provider | 93.1% | 3,610 | 92.3% | 3,452 | 0.7% |
| Independently Accredited | 83.9% | 1,567 | 80.4% | 1,578 | 3.5% |
| Joint Commission (formerly JCAHO) | 58.6% | 1,567 | 56.8% | 1,578 | 1.8% |
| Community Health Accreditation Program | 18.7% | 1,567 | 17.2% | 1,578 | 1.5% |
| Accreditation Commission for Health Care | 2.2% | 1,567 | 1.7% | 1,578 | 0.5% |
| Other Accreditation(s) | 5.1% | 1,567 | 5.3% | 1,578 | -0.2% |
| STATE MEMBERSHIPS* | | | | | |
| Member of a State Hospice Association | 85.7% | 2,725 | 92.6% | 503 | -6.9% |
| Member of a State Home Health Association | 41.3% | 1,115 | 40.0% | 355 | 1.3% |
| ADDITIONAL SERVICES¹ | | | | | |
| % Operating formal pediatric palliative care program with specialized staff | 15.9% | 2,346 | | | |
| % Operating service delivery program outside of Medicare Hospice Benefit model | 69.8% | 2,349 | | | |
| % Offering palliative consult services in any setting | 79.6% | 1,160 | | | |
| % Offering palliative care services at home or in an inpatient facility | 73.4% | 1,037 | | | |
| % Offering post-hospice support program for patients discharged alive | 62.5% | 938 | | | |
| % Offering complementary therapies (music therapy, art therapy, massage therapy, etc.) | ** | ** | | | |
| % Offering day care services for hospice patients | ** | ** | | | |

¹ NHPCO membership survey data.

N = Number of hospice agencies with available data.

* NDS data supplemented with NHPCO membership data and CMS Provider of Services certification data.

** Insufficient data.

Table 2. Agency Characteristics by Daily Census

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|--|-------------|-------|-------------|-------|---------------------------|
| | Agency Mean | N | Agency Mean | N | |
| AVERAGE DAILY CENSUS*¹ | | | | | |
| 1 to 9 patients | 18.7% | 2,077 | 19.1% | 2,184 | -0.4% |
| 10 to 25 patients | 22.3% | 2,077 | 23.7% | 2,184 | -1.4% |
| 26 to 50 patients | 21.4% | 2,077 | 23.9% | 2,184 | -2.5% |
| 51 to 100 patients | 19.1% | 2,077 | 16.3% | 2,184 | 2.8% |
| 101 to 200 patients | 11.1% | 2,077 | 10.8% | 2,184 | 0.3% |
| > 200 patients | 7.5% | 2,077 | 6.2% | 2,184 | 1.3% |
| Characteristics by Daily Census | | | | | |
| 1 to 9 patients | | | | | |
| % Not for Profit or Govt | 66.9% | 357 | | | |
| % Freestanding | 40.5% | 358 | | | |
| % Operating Inpatient Unit or Facility | 10.9% | 238 | | | |
| % Patients Admitted with Cancer Diagnosis | 45.3% | 62 | | | |
| % Patients Admitted from Private Residence | 54.7% | 61 | | | |
| 10 to 25 patients | | | | | |
| % Not for Profit or Govt | 65.7% | 437 | | | |
| % Freestanding | 45.3% | 437 | | | |
| % Operating Inpatient Unit or Facility | 8.2% | 341 | | | |
| % Patients Admitted with Cancer Diagnosis | 45.0% | 109 | | | |
| % Patients Admitted from Private Residence | 54.6% | 105 | | | |
| 26 to 50 patients | | | | | |
| % Not for Profit or Govt | 63.7% | 421 | | | |
| % Freestanding | 56.3% | 421 | | | |
| % Operating Inpatient Unit or Facility | 13.3% | 345 | | | |
| % Patients Admitted with Cancer Diagnosis | 44.5% | 113 | | | |
| % Patients Admitted from Private Residence | 57.6% | 108 | | | |
| 51 to 100 patients | | | | | |
| % Not for Profit or Govt | 61.7% | 373 | | | |
| % Freestanding | 62.2% | 373 | | | |
| % Operating Inpatient Unit or Facility | 23.6% | 301 | | | |
| % Patients Admitted with Cancer Diagnosis | 43.1% | 109 | | | |
| % Patients Admitted from Private Residence | 54.8% | 101 | | | |
| 101 to 200 patients | | | | | |
| % Not for Profit or Govt | 66.0% | 218 | | | |
| % Freestanding | 67.9% | 218 | | | |
| % Operating Inpatient Unit or Facility | 42.2% | 192 | | | |
| % Patients Admitted with Cancer Diagnosis | 41.3% | 100 | | | |
| % Patients Admitted from Private Residence | 47.6% | 90 | | | |
| > 200 patients | | | | | |
| % Not for Profit or Govt | 67.4% | 147 | | | |
| % Freestanding | 77.6% | 147 | | | |
| % Operating Inpatient Unit or Facility | 64.2% | 134 | | | |
| % Patients Admitted with Cancer Diagnosis | 39.9% | 108 | | | |
| % Patients Admitted from Private Residence | 45.5% | 98 | | | |

¹ Daily Census = total patient days divided by 365.

N = Number of hospice agencies with available data.

* National Data Set responses supplemented by NHPCO membership survey.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 3. Patient Volume

| | 2007 | | | | | 2006 | | | Percent Change '06 to '07 |
|-------------------------------------|-------------|-------|--------|--------|-----|-------------|--------|-----|---------------------------|
| | Agency Mean | 25th% | Median | 75th% | N | Agency Mean | Median | N | |
| PATIENT VOLUME¹ | | | | | | | | | |
| Total Patient Days | 33,062 | 8,143 | 19,091 | 42,785 | 786 | 27,300 | 16,979 | 768 | 21.1% |
| Daily Census | 90.2 | 22.4 | 51.8 | 117.2 | 795 | 74.8 | 46.5 | 768 | 20.5% |
| Unique Patients Served ² | 645.6 | 138.0 | 330.0 | 908.0 | 523 | 433.4 | 261.5 | 786 | 48.9% |
| Total Admissions | 580.5 | 127.0 | 304.0 | 792.0 | 563 | 394.0 | 234.0 | 855 | 47.3% |
| % Re-admissions | 3.8% | 1.3% | 3.4% | 6.0% | 407 | 4.6% | 3.8% | 321 | -0.8% |
| Total Deaths | 352.5 | 73.0 | 192.0 | 470.0 | 904 | 328.8 | 196.5 | 832 | 7.2% |

Table 4. Referrals

| | 2007 | | | | | 2006 | | | Percent Change '06 to '07 |
|---|------------------|-------|--------|-------|-----|-------------|--------|-----|---------------------------|
| | Agency Mean | 25th% | Median | 75th% | N | Agency Mean | Median | N | |
| REFERRALS | | | | | | | | | |
| Percentage of Referrals Converted to Admissions | 77.7% | 69.8% | 78.5% | 85.9% | 365 | 77.0% | 78.0% | 739 | 0.7% |
| Referral Source | Percent of Total | | | | N | Agency Mean | Median | N | |
| Physician | 28.6% | | | | 453 | 35.0% | 30.3% | 452 | -6.4% |
| Hospital | 41.3% | | | | 453 | 27.1% | 26.7% | 452 | 14.2% |
| Nursing Facility | 13.6% | | | | 453 | 11.9% | 9.7% | 452 | 1.7% |
| Self, Family, or Friend | 9.0% | | | | 453 | 10.4% | 7.9% | 452 | -1.4% |
| Other | 5.5% | | | | 453 | 7.4% | 3.8% | 452 | -1.9% |
| Home Health Agency | 2.0% | | | | 453 | 3.1% | 1.7% | 452 | -1.1% |

Table 5. Non-Death Discharges

| | 2007 | | | | | 2006 | | | Percent Change '06 to '07 |
|--|------------------|-------|--------|-------|-----|-------------|--------|-----|---------------------------|
| | Agency Mean | 25th% | Median | 75th% | N | Agency Mean | Median | N | |
| NON-DEATH (LIVE) DISCHARGE | | | | | | | | | |
| Non-death Discharges As a Percentage of Total Discharges | 15.9% | 10.4% | 14.1% | 19.3% | 765 | 15.7% | 13.6% | 832 | 0.2% |
| Reason for Non-death Discharge ³ | Percent of Total | | | | | | | | |
| A. Hospice-initiated Discharge | 47.0% | | | | 631 | | | | |
| Discharged by Hospice for Cause | 3.8% | | | | 276 | | | | |
| B. Patient-initiated Discharge | 49.0% | | | | 631 | | | | |
| C. Other reason or reason unknown | 4.0% | | | | 220 | | | | |

¹ May reflect change in proportion of large programs in 2007 sample.

² Unique Patients Served = sum of new admissions + carryovers.

³ Reasons for hospice-initiated discharge include prognosis extended, discharged for cause, and patient moved out of service area. Discharge for cause includes cases where patient's (or other persons in the patient's home) behavior is disruptive, abusive, or uncooperative to the extent that delivery of care to the patient or the ability of the hospice to operate effectively is seriously impaired. Reasons for patient-initiated discharge desire for aggressive curative treatment, refusal of service, or transferring another hospice in service area.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75% = 75th percentile.

Table 6. Patient Demographics

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|---|---------------------|-----|---------------------|-----|---------------------------|
| | Percent of Patients | N | Percent of Patients | N | |
| PATIENT GENDER | | | | | |
| Female | 53.9% | 863 | 55.6% | 995 | -1.7% |
| Male | 46.1% | 863 | 44.4% | 995 | 1.7% |
| PATIENT AGE ON ADMISSION | | | | | |
| < 65 / 65 + years | | | | | |
| Less than 65 years | 17.2% | 669 | 18.3% | 797 | -1.1% |
| 65+ years | 82.8% | 669 | 81.7% | 797 | 1.1% |
| Detailed Age Distribution | | | | | |
| 0 - 24 years | 0.5% | 504 | 0.5% | 697 | 0.0% |
| < 1y (% of 0-24 y) | 21.5% | 504 | 22.2% | 697 | -0.7% |
| 1 - 4y (% of 0-24 y) | 16.4% | 504 | 17.1% | 697 | -0.7% |
| 5 - 14y (% of 0-24 y) | 24.1% | 504 | 25.1% | 697 | -1.0% |
| 15 - 24y (% of 0-24 y) | 38.1% | 504 | 35.6% | 697 | 2.5% |
| 25 - 34 years | 0.4% | 504 | 0.4% | 697 | 0.0% |
| 35 - 64 years | 16.5% | 504 | 17.3% | 697 | -0.8% |
| 65 - 74 years | 16.2% | 504 | 17.1% | 697 | -0.9% |
| 75 - 84 years | 30.0% | 504 | 31.4% | 697 | -1.4% |
| 85+ years | 36.6% | 504 | 33.2% | 697 | 3.4% |
| PATIENT ETHNICITY¹ | | | | | |
| Non-Hispanic or Latino origin | 94.9% | 806 | 95.1% | 791 | -0.2% |
| Hispanic or Latino origin | 5.1% | 806 | 4.9% | 791 | 0.2% |
| PATIENT RACE¹ | | | | | |
| Asian, Hawaiian, Other Pacific Islander | 1.6% | 741 | 1.8% | 830 | -0.2% |
| American Indian or Alaskan Native | 0.3% | 723 | 0.3% | 832 | 0.0% |
| Black / African American | 9.0% | 800 | 8.2% | 831 | 0.8% |
| Multiracial or Other Race | 7.8% | 736 | 8.8% | 831 | -1.0% |
| White / Caucasian | 81.3% | 819 | 80.9% | 832 | 0.4% |

¹ Following U.S. Census guidelines, ethnicity and race are captured separately in the National Data Set.

Ethnicity categorizes patients as Hispanic or non-Hispanic. Patients of Hispanic heritage may be of any race.

N = Number of hospice agencies with available data.

Table 7. Patient Demographics - Primary Diagnosis

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|--|---------------------|-----|---------------------|-----|---------------------------|
| | Percent of Patients | N | Percent of Patients | N | |
| Total Admissions by Primary Diagnosis¹ | | | | | |
| Cancer | 41.3% | 636 | 44.1% | 755 | -2.8% |
| Non-Cancer Diagnoses | 58.7% | 636 | 55.9% | 755 | 2.8% |
| Heart Disease | 11.8% | 631 | 12.2% | 750 | -0.4% |
| Debility Unspecified | 11.2% | 621 | 11.8% | 734 | -0.6% |
| Dementia | 10.1% | 631 | 10.0% | 745 | 0.1% |
| Lung Disease | 7.9% | 630 | 7.7% | 741 | 0.2% |
| Stroke or Coma | 3.8% | 595 | 3.4% | 698 | 0.4% |
| Kidney Disease (ESRD) | 2.6% | 617 | 2.9% | 725 | -0.3% |
| Liver Disease | 2.0% | 607 | 1.8% | 712 | 0.2% |
| Non-ALS Motor Neuron | 1.9% | 592 | 1.7% | 454 | 0.2% |
| HIV / AIDS | 1.0% | 548 | 0.5% | 668 | 0.5% |
| Amyotrophic Lateral Sclerosis (ALS) | 0.4% | 455 | 0.3% | 375 | 0.1% |
| Other | 6.5% | 575 | 3.7% | 688 | 2.8% |
| Total Deaths by Primary Diagnosis² | | | | | |
| Cancer | 43.2% | 753 | 44.9% | 609 | -1.7% |
| Non-Cancer Diagnoses | 56.8% | 753 | 55.1% | 609 | 1.7% |
| Heart Disease | 11.7% | 725 | 11.9% | 605 | -0.2% |
| Dementia | 11.2% | 725 | 10.3% | 603 | 0.9% |
| Debility Unspecified | 9.5% | 524 | 7.6% | 359 | 2.0% |
| Lung | 7.3% | 722 | 6.9% | 603 | 0.4% |
| Stroke or Coma | 3.8% | 689 | 3.8% | 589 | 0.0% |
| Kidney Disease | 3.0% | 711 | 3.0% | 600 | 0.0% |
| Liver Disease | 1.9% | 697 | 1.7% | 596 | 0.2% |
| Non-ALS Motor Neuron | 1.4% | 489 | 1.3% | 401 | 0.1% |
| HIV / AIDS | 1.0% | 646 | 0.4% | 579 | 0.6% |
| ALS | 0.4% | 645 | 0.4% | 581 | 0.0% |
| Other | 6.2% | 668 | 7.8% | 595 | -1.6% |
| Live Discharge Rate Per Diagnosis³ | | | | | |
| Cancer | 11.8% | 486 | 11.3% | 364 | 0.5% |
| Non-Cancer Diagnoses | 17.3% | 486 | 16.2% | 364 | 1.1% |
| Heart Disease | 17.7% | 475 | 17.9% | 361 | -0.2% |
| Debility Unspecified | 20.3% | 465 | 18.6% | 346 | 1.8% |
| Dementia | 18.1% | 472 | 15.8% | 356 | 2.4% |
| Lung Disease | 16.6% | 469 | 15.4% | 355 | 1.2% |
| Stroke or Coma | 11.5% | 422 | 8.7% | 338 | 2.8% |
| Non-ALS Motor Neuron | 19.9% | 417 | 20.3% | 342 | -0.4% |
| ALS | 18.6% | 388 | 18.7% | 330 | -0.1% |
| Liver Disease | 17.9% | 421 | 18.4% | 347 | -0.5% |
| Kidney Disease | 8.1% | 427 | 7.4% | 352 | 0.7% |
| HIV / AIDS | 25.5% | 395 | 28.8% | 335 | -3.3% |
| Other | 15.7% | 411 | 15.0% | 342 | 0.7% |

¹ Estimate based on 378,139 admissions where primary diagnosis was reported.

² Estimate based on 348,927 deaths where primary diagnosis was reported.

³ Total live discharges for Disease XYZ divided by Total discharges (deaths + live discharges) for Disease XYZ.

Note: Small cell counts; results should be interpreted with caution.

N = Number of hospice agencies with available data.

Table 8. Length of Service

| | 2007 | | | | | 2006 | | Change '06 to '07 |
|---|-------------------|-------|--------|-------|-------|-------------------|-------|-------------------|
| | Agency Mean | 25th% | Median | 75th% | N | Agency Mean | N | |
| LENGTH OF SERVICE (LOS)¹ | <u>Days</u> | | | | | <u>Days</u> | | |
| Average LOS (days) | 67.4 | 48.0 | 61.0 | 79.0 | 1,245 | 59.8 | 1,856 | 7.6 |
| Median LOS (days) | 20.0 | 12.0 | 16.0 | 22.0 | 1,079 | 20.6 | 1,360 | -0.6 |
| | % of | | | | | % of | | |
| PERCENT OF DISCHARGES BY LOS² | <u>Discharges</u> | | | | | <u>Discharges</u> | | |
| 1 to 7 Days | 30.8% | | | | 329 | 25.7% | 780 | 5.1% |
| 8 to 14 Days | 12.1% | | | | 329 | | | |
| 15 to 29 Days | 13.8% | | | | 329 | | | |
| 30 to 59 Days | 11.5% | | | | 329 | | | |
| 60 to 89 Days | 7.1% | | | | 329 | | | |
| 90 to 179 Days | 11.5% | | | | 329 | | | |
| 180+ Days | 13.1% | | | | 329 | 8.6% | 966 | 4.5% |
| LOS BY AGENCY TYPE | | | | | | | | |
| Average LOS | <u>Days</u> | | | | | <u>Days</u> | | |
| Freestanding | 74.6 | 53.0 | 70.0 | 86.5 | 667 | 64.2 | 933 | 10.4 |
| Hospital based | 51.1 | 39.0 | 49.5 | 59.0 | 317 | 49.4 | 496 | 1.7 |
| Home Health based | 54.7 | 41.0 | 53.0 | 65.0 | 225 | 53.0 | 368 | 1.7 |
| Median LOS | | | | | | | | |
| Freestanding | 21.1 | 13.0 | 16.0 | 23.0 | 584 | 20.8 | 701 | 0.3 |
| Hospital based | 17.2 | 11.0 | 16.2 | 20.0 | 263 | 18.5 | 358 | -1.3 |
| Home Health based | 18.1 | 12.0 | 16.8 | 22.0 | 204 | 20.3 | 265 | -2.2 |
| LOS BY TAX STATUS | | | | | | | | |
| Average LOS | <u>Days</u> | | | | | <u>Days</u> | | |
| Not for Profit | 62.2 | 45.3 | 57.0 | 73.0 | 843 | 57.3 | 1,159 | 4.9 |
| For Profit | 84.5 | 59.7 | 81.0 | 95.0 | 341 | 67.9 | 565 | 16.6 |
| Government | 55.3 | 45.0 | 58.0 | 61.9 | 61 | 50.0 | 112 | 5.3 |
| Median LOS | | | | | | | | |
| Not for Profit | 18.4 | 12.0 | 16.0 | 21.0 | 743 | 18.5 | 915 | -0.1 |
| For Profit | 25.3 | 13.0 | 17.0 | 31.0 | 280 | 28.2 | 359 | -2.9 |
| Government | 21.4 | 15.0 | 19.0 | 26.0 | 56 | 22.6 | 83 | -1.2 |
| LOS BY CERTIFICATION STATUS | | | | | | | | |
| Average LOS | <u>Days</u> | | | | | <u>Days</u> | | |
| Medicare-certified Provider | 67.4 | 48.0 | 61.0 | 79.0 | 1,202 | 59.8 | 1,787 | 7.6 |
| Non-certified Provider | 59.7 | 30.0 | 61.7 | 75.0 | 43 | 59.3 | 61 | 0.4 |
| Median LOS | | | | | | | | |
| Medicare-certified Provider | 20.0 | 12.0 | 16.0 | 22.0 | 1,050 | 20.6 | 1,315 | -0.6 |
| Non-certified Provider | 30.9 | 16.0 | 16.0 | 47.0 | 29 | 28.1 | 37 | 2.8 |

¹ Total days of care for patients discharged divided by total number of patients discharged.

NDS survey data supplemented with NHPCO membership survey data.

Length of service values have been weighted by the agency's total admissions.

² Complete categorical length of service new data element beginning in FY2007 National Data Set survey.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 8. Length of Service (cont.)

| | 2007 | | | | | 2006 | | '06 to '07 (Days) |
|--|----------------|-------|--------|-------|-------|----------------|-------|----------------------|
| | Agency Mean | 25th% | Median | 75th% | N | Agency Mean | N | |
| LENGTH OF SERVICE (LOS)¹ | <u>Days</u> | | | | | <u>Days</u> | | |
| Average LOS (days) | 67.4 | 48.0 | 61.0 | 79.0 | 1,245 | 59.8 | 1,856 | 7.6 |
| Median LOS (days) | 20.0 | 12.0 | 16.0 | 22.0 | 1,079 | 20.6 | 1,360 | -0.6 |
| LOS BY AGENCY DAILY CENSUS | | | | | | | | |
| Average LOS | <u>Days</u> | | | | | <u>Days</u> | | |
| 1 to 9 patients | 44.9 | 31.0 | 42.0 | 59.0 | 199 | | | |
| 10 to 25 patients | 51.1 | 35.0 | 47.0 | 62.9 | 265 | | | |
| 26 to 50 patients | 55.9 | 39.0 | 53.0 | 64.0 | 259 | | | |
| 51 to 100 patients | 61.2 | 42.0 | 55.9 | 71.0 | 243 | | | |
| 101 to 200 patients | 70.0 | 50.7 | 58.7 | 80.7 | 141 | | | |
| > 200 patients | 74.9 | 54.0 | 72.0 | 88.0 | 108 | | | |
| Median LOS | | | | | | | | |
| 1 to 9 patients | 22.3 | 13.0 | 18.0 | 26.0 | 166 | | | |
| 10 to 25 patients | 22.9 | 14.0 | 19.0 | 26.0 | 212 | | | |
| 26 to 50 patients | 21.6 | 13.5 | 18.4 | 25.0 | 222 | | | |
| 51 to 100 patients | 21.9 | 13.0 | 19.0 | 24.0 | 218 | | | |
| 101 to 200 patients | 21.3 | 14.0 | 17.0 | 22.0 | 131 | | | |
| > 200 patients | 18.2 | 12.0 | 15.0 | 20.0 | 105 | | | |
| LOS BY TOTAL ADMISSIONS | | | | | | | | |
| Average LOS | <u>Days</u> | | | | | <u>Days</u> | | |
| 1 to 49 Admissions | 61.2 | 37.0 | 49.0 | 74.0 | 197 | 58.6 | 304 | 2.6 |
| 50 - 150 Admissions | 61.4 | 40.0 | 55.0 | 74.0 | 335 | 60.3 | 539 | 1.1 |
| 151 - 500 Admissions | 64.5 | 45.4 | 57.2 | 76.6 | 419 | 62.1 | 645 | 2.4 |
| 501 - 1,500 Admissions | 66.0 | 45.6 | 57.7 | 75.0 | 221 | 57.9 | 296 | 8.1 |
| > 1,500 Admissions | 71.4 | 52.0 | 70.0 | 82.0 | 73 | 59.9 | 72 | 11.5 |
| Median LOS | | | | | | | | |
| 1 to 49 Admissions | 31.1 | 15.0 | 23.0 | 35.0 | 158 | 30.2 | 186 | 0.9 |
| 50 - 150 Admissions | 27.7 | 16.5 | 22.0 | 33.0 | 266 | 27.9 | 367 | -0.2 |
| 151 - 500 Admissions | 24.0 | 15.0 | 20.0 | 27.0 | 379 | 24.0 | 502 | 0.0 |
| 501 - 1,500 Admissions | 19.9 | 13.0 | 16.2 | 21.5 | 206 | 19.7 | 239 | 0.2 |
| > 1,500 Admissions | 16.7 | 11.0 | 15.0 | 19.0 | 70 | 17.1 | 66 | -0.4 |

¹ LOS estimate repeated from previous page.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 8. Length of Service (cont.)

| | 2007 | | | | | 2006 | | Change '06 to '07 |
|--|----------------|-------|--------|-------|-------|----------------|------|----------------------|
| | Agency Mean | 25th% | Median | 75th% | N | Agency Mean | N | |
| LENGTH OF SERVICE (LOS)¹ | <u>Days</u> | | | | | <u>Days</u> | | |
| Average LOS (days) | 67.4 | 48.0 | 61.0 | 79.0 | 1,245 | 59.8 | 1856 | 7.6 |
| Median LOS (days) | 20.0 | 12.0 | 16.0 | 22.0 | 1,079 | 20.6 | 1360 | -0.6 |
| LOS BY PRIMARY DIAGNOSIS | <u>Days</u> | | | | | <u>Days</u> | | |
| Cancer | 45.0 | 33.6 | 42.4 | 54.5 | 649 | 43.5 | 528 | 1.5 |
| Non-Cancer Diagnoses | 70.3 | 48.5 | 66.1 | 90.9 | 361 | 67.8 | 311 | 2.5 |
| Non-ALS Motor Neuron | 87.6 | 40.5 | 81.6 | 133.0 | 354 | 86.4 | 264 | 1.2 |
| Dementia | 86.0 | 49.6 | 79.6 | 117.1 | 624 | 77.6 | 507 | 8.4 |
| ALS | 77.9 | 24.5 | 65.2 | 116.0 | 306 | 78.7 | 270 | -0.7 |
| Debility Unspecified | 74.4 | 46.5 | 69.3 | 98.3 | 431 | 67.2 | 314 | 7.2 |
| Heart Disease | 68.1 | 40.2 | 61.8 | 88.2 | 636 | 64.9 | 514 | 3.2 |
| Lung | 68.0 | 38.6 | 61.0 | 90.2 | 612 | 68.3 | 496 | -0.3 |
| Other Diagnoses | 56.2 | 21.8 | 44.0 | 80.7 | 520 | 53.2 | 311 | 3.0 |
| HIV / AIDS | 43.2 | 14.0 | 33.6 | 63.3 | 287 | 44.8 | 210 | -1.6 |
| Stroke or Coma | 44.3 | 14.0 | 32.5 | 64.9 | 533 | 39.0 | 423 | 5.3 |
| Liver | 38.1 | 16.5 | 31.9 | 53.5 | 527 | 35.9 | 431 | 2.1 |
| Kidney | 28.7 | 10.5 | 20.3 | 38.6 | 573 | 26.8 | 473 | 1.9 |

¹ LOS estimate repeated from previous page.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 9. Location of Care

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|---|---------------------|-----|---------------------|-----|---------------------------|
| | Percent of Patients | N | Percent of Patients | N | |
| PATIENT LOCATION ON ADMISSION¹ | | | | | |
| Private Residence | 48.6% | 616 | 53.7% | 738 | -5.1% |
| Nursing Home | 21.6% | 601 | 21.6% | 738 | 0.0% |
| Acute Care Hospital (not operated by the hospice) | 11.0% | 558 | 10.1% | 738 | 0.9% |
| Free-Standing Hospice Inpatient Facility or Residence | 7.0% | 386 | 6.6% | 736 | 0.4% |
| Hospice-Run Inpatient Facility in Other's Facility | 5.9% | 419 | 3.2% | 647 | 2.7% |
| Assisted Living or Other Residential Facility | 5.8% | 566 | 4.8% | 738 | 1.0% |
| LOCATION OF DEATH² | | | | | |
| Private Residence | 42.0% | 658 | 47.1% | 791 | -5.1% |
| Nursing Home | 22.8% | 640 | 22.5% | 784 | 0.3% |
| Free-Standing Hospice Inpatient Facility or Residence | 12.5% | 389 | 12.2% | 659 | 0.3% |
| Acute Care Hospital (not operated by the hospice) | 10.5% | 617 | 8.8% | 729 | 1.7% |
| Hospice-Run Inpatient Facility in Other's Facility | 6.7% | 467 | 4.8% | 535 | 1.9% |
| Assisted Living or Other Residential Facility | 5.5% | 595 | 4.6% | 711 | 0.9% |

Table 10. Level of Care

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|----------------------------------|-------------------------|-----|-------------------------|-----|---------------------------|
| | Percent of Patient Days | N | Percent of Patient Days | N | |
| LEVEL OF CARE³ | | | | | |
| Routine Home Care | 95.6% | 720 | 96.4% | 863 | -0.8% |
| General Inpatient Care | 3.3% | 722 | 3.0% | 863 | 0.3% |
| Continuous Care | 0.9% | 720 | 0.4% | 863 | 0.5% |
| Respite Care | 0.2% | 720 | 0.2% | 863 | 0.0% |

¹ For FY2007, as a percentage of 366,668 patient admissions with corresponding location of admission data.

² For FY2007, as a percentage of 319,236 patient deaths with corresponding location of death data.

³ For FY2007, as a percentage of 31,246,036 reported patient care days with corresponding level of care data.

N = Number of hospice agencies with available data.

Table 11. Payer Mix

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|---|---------|-----|---------|-----|---------------------------|
| | Percent | N | Percent | N | |
| PATIENTS SERVED | | | | | |
| Percent of Patients Served by Payer¹ | | | | | |
| Medicare Hospice Benefit | 83.6% | 814 | 83.7% | 959 | -0.1% |
| Managed Care or Private Insurance | 8.5% | 806 | 8.0% | 959 | 0.5% |
| Medicaid Hospice Benefit | 5.0% | 809 | 5.3% | 958 | -0.3% |
| Uncompensated or Charity Care | 1.3% | 526 | 1.6% | 780 | -0.3% |
| Self Pay | 0.9% | 755 | 0.7% | 958 | 0.2% |
| Other Payment Source | 0.7% | 706 | 0.7% | 956 | 0.0% |
| Medicare Patients as Percent of Total Patients, by Agency Tax Status | | | | | |
| Voluntary / Not for Profit | 82.4% | 474 | | | |
| Proprietary / For Profit | 86.3% | 308 | | | |
| Government | 84.1% | 36 | | | |
| Medicare Patients as Percent of Total Patients, by Agency Type | | | | | |
| Free Standing | 83.8% | 538 | | | |
| Hospital Based | 83.5% | 139 | | | |
| Home Health Based | 83.5% | 114 | | | |
| Nursing Home Based | ** | ** | | | |
| PATIENT CARE DAYS | | | | | |
| Percent of Patient Care Days by Payer² | | | | | |
| Medicare Hospice Benefit | 87.0% | 744 | 87.7% | 862 | -0.7% |
| Managed Care or Private Insurance | 4.8% | 733 | 5.3% | 849 | -0.5% |
| Medicaid Hospice Benefit | 4.5% | 739 | 4.8% | 857 | -0.3% |
| Uncompensated or Charity Care | 2.2% | 544 | 1.0% | 539 | 1.2% |
| Self Pay | 0.6% | 684 | 0.6% | 806 | 0.0% |
| Other Payment Source | 0.9% | 625 | 0.5% | 769 | 0.4% |
| Medicare Days as Percent of Total Days, by Agency Tax Status | | | | | |
| Voluntary / Not for Profit | 85.4% | 448 | | | |
| Proprietary / For Profit | 90.7% | 262 | | | |
| Government | 89.3% | 36 | | | |
| Medicare Days as Percent of Total Days, by Agency Type | | | | | |
| Free Standing | 87.0% | 496 | | | |
| Hospital Based | 87.3% | 124 | | | |
| Home Health Based | 88.0% | 102 | | | |
| Nursing Home Based | ** | ** | | | |

¹ Percent of payer patients served divided by all patients served. Based on 489,281 patients with payer data.

² Percent of payer patient care days divided by all patient care days. 33,947,612 total days reported.

N = Number of hospice agencies with available data.

** Insufficient data.

Table 12. Paid Staff Distribution and Turnover

| | 2007 | | 2006 | | Percent Change '06 to '07 |
|---|-------------|-----|-------------|-----|---------------------------|
| | Agency mean | N | Agency mean | N | |
| Distribution of Home Hospice FTEs¹ | | | | | |
| Clinical (direct patient care) | 71.2% | 324 | 71.0% | 472 | 0.2% |
| Nursing | 36.3% | 324 | 31.8% | 472 | 4.6% |
| Home Health Aides | 18.5% | 321 | 22.8% | 472 | -4.3% |
| Social Services | 8.7% | 322 | 9.4% | 471 | -0.7% |
| Physicians (excludes volunteers) | 2.0% | 283 | 1.7% | 275 | 0.3% |
| Chaplains | 3.7% | 201 | | | |
| Other Clinical | 3.8% | 302 | 5.7% | 467 | -1.9% |
| Non-clinical (administrative/general) | 24.4% | 324 | 24.5% | 472 | -0.1% |
| Bereavement | 4.3% | 324 | 4.6% | 472 | -0.3% |
| Distribution of Total FTEs¹ | | | | | |
| Clinical (direct patient care) | 71.6% | 340 | 71.9% | 504 | -0.3% |
| Nursing | 33.8% | 340 | 30.7% | 504 | 3.1% |
| Home Health Aides | 19.8% | 335 | 23.9% | 501 | -4.1% |
| Social Services | 8.2% | 338 | 8.5% | 503 | -0.3% |
| Physicians (excludes volunteers) | 3.4% | 302 | 2.6% | 294 | 0.8% |
| Chaplains | 4.2% | 191 | | | |
| Other Clinical | 4.8% | 311 | 6.9% | 496 | -2.1% |
| Non-clinical (administrative/general) | 23.7% | 340 | 23.5% | 504 | 0.2% |
| Bereavement | 4.7% | 340 | 4.6% | 504 | 0.1% |
| Turnover rate within each Discipline² | | | | | |
| Clinical (direct patient care) | 31.6% | 293 | 25.9% | 256 | 5.8% |
| Nursing | 36.4% | 286 | 29.7% | 220 | 6.7% |
| Home Health Aides | 31.0% | 269 | 25.3% | 234 | 5.7% |
| Social Services | 29.3% | 252 | 23.9% | 235 | 5.4% |
| Physicians (excludes volunteers) | 13.4% | 209 | 11.7% | 137 | 1.7% |
| Chaplains | 21.0% | 151 | | | |
| Other Clinical | 19.4% | 227 | 18.0% | 201 | 1.5% |
| Bereavement | 20.6% | 235 | 16.2% | 200 | 4.4% |
| Non-clinical (administrative/general) | 24.9% | 266 | 20.0% | 243 | 4.9% |
| All Staff | 28.8% | 294 | 24.4% | 263 | 4.4% |
| Admission Model | | | | | |
| % with Admission Specialist ³ | 49.4% | 419 | 45.9% | 597 | 3.5% |

¹ FTE = full-time employee (1 FTE is equivalent to 2,080 hours per year or 40 hours per week).

Totals may not equal sum of components due to independent rounding.

² Total Discipline Separations divided by Total Discipline Non-PRN Employees.

³ Percent of agencies that utilize dedicated admission nurses for the majority of initial admission visits.

N = Number of hospice agencies with available data.

Table 13. Volunteer Services

| | 2007 | | | | | 2006 | | Change '06 to '07 |
|---|----------------|--------|--------|--------|-----|----------------|-----|----------------------|
| | Agency Mean | 25th % | Median | 75th % | N | Agency Mean | N | |
| TOTAL VOLUNTEERS | | | | | | | | |
| Percent of Total Volunteers² | | | | | | | | |
| Direct Patient Care | 58.7% | 41.0% | 58.8% | 79.2% | 695 | 58.9% | 775 | -0.2% |
| Patient Care Support (clerical) | 25.1% | 8.7% | 20.0% | 36.4% | 681 | 24.2% | 763 | 0.9% |
| General Support (fundraising/board) | 18.2% | 0.0% | 8.9% | 29.5% | 650 | 20.2% | 687 | -2.0% |
| Number of Volunteers per Patient¹ | | | | | | | | |
| All Volunteer Types | 0.36 | 0.14 | 0.25 | 0.48 | 454 | 0.40 | 745 | -0.05 |
| Direct Patient Care | 0.20 | 0.08 | 0.14 | 0.27 | 443 | 0.20 | 732 | 0.00 |
| Patient Care Support (clerical) | 0.07 | 0.02 | 0.04 | 0.09 | 412 | 0.10 | 674 | -0.04 |
| General Support (fundraising/board) | 0.14 | 0.03 | 0.07 | 0.16 | 276 | 0.16 | 429 | -0.02 |
| VOLUNTEER HOURS | | | | | | | | |
| Percent of Total Volunteer Hours² | | | | | | | | |
| Direct Patient Care | 52.3% | 29.1% | 51.8% | 74.9% | 694 | 53.0% | 767 | -0.7% |
| Patient Care Support (clerical) | 35.4% | 11.2% | 30.1% | 54.4% | 680 | 34.2% | 751 | 1.2% |
| General Support (fundraising/board) | 14.2% | 0.0% | 3.7% | 18.3% | 644 | 15.8% | 675 | -1.7% |
| Volunteer Hours per Volunteer | | | | | | | | |
| Hours per Volunteer ³ | 45.1 | 22.2 | 37.6 | 60.2 | 680 | 40.7 | 760 | 4.4 |
| Patient Visits per Volunteer ⁴ | 18.2 | 7.7 | 13.3 | 22.3 | 465 | 18.5 | 532 | -0.3 |
| Volunteer Hours as % of Total Staff Hours | 5.8% | 2.0% | 3.8% | 7.2% | 408 | 4.8% | 540 | 1.0% |
| Volunteer Hours as % of Clinical Staff Hours | 6.0% | 2.3% | 4.5% | 7.8% | 405 | 5.1% | 539 | 0.9% |
| Volunteer Visits as % of Total Visits | 7.0% | 2.0% | 4.7% | 8.2% | 422 | 6.9% | 461 | 0.2% |

¹ Number of volunteers divided by total patient admissions.

² Totals may not equal sum of components due to independent rounding.

³ Volunteer hours divided by number of volunteers.

⁴ Patient visit data limited to direct patient care volunteers.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 14. Bereavement Services

| | 2007 | | | | | 2006 | | Change N '06 to '07 |
|---|----------------|--------|--------|--------|-------|----------------|-------|------------------------|
| | Agency Mean | 25th % | Median | 75th % | N | Agency Mean | N | |
| Total Hospice Family Members Served per Death¹ | 1.8 | 1.0 | 1.3 | 2.1 | 641 | 1.8 | 604 | 0.0 |
| Percent of Agencies Offering Bereavement Services to the Community² | 94.7% | | | | 1,413 | 93.9% | 1,330 | 0.8% |
| Contacts per Family Member | | | | | | | | |
| Phone calls/Visits | 2.7 | 0.9 | 2.0 | 3.8 | 428 | 2.6 | 475 | 0.1 |
| Mailings | 5.7 | 2.1 | 4.8 | 8.8 | 387 | 5.6 | 298 | 0.1 |
| Total Contacts (phone calls/visits/mailings) | 8.5 | 4.1 | 7.5 | 12.2 | 379 | 7.7 | 256 | 0.8 |
| Contacts per Community Member | | | | | | | | |
| Phone calls/Visits | 2.0 | 0.6 | 1.2 | 2.6 | 307 | 1.7 | 278 | 0.3 |
| Mailings | 2.0 | 0.4 | 0.9 | 3.1 | 229 | 2.9 | 186 | -0.9 |
| Total Contacts (phone calls/visits/mailings) | 4.0 | 1.0 | 2.8 | 5.8 | 209 | 3.8 | 212 | 0.2 |
| Percent Served by Affiliation w/ Hospice | | | | | | | | |
| Hospice Family Members | 82.0% | 70.9% | 88.0% | 97.6% | 564 | 83.5% | 673 | -1.5% |
| Community Members | 18.0% | 2.4% | 12.0% | 29.2% | 564 | 16.5% | 673 | 1.5% |
| Distribution of Visits & Calls | | | | | | | | |
| Hospice Family Members | 85.5% | 76.8% | 90.4% | 97.3% | 403 | 88.8% | 429 | -3.3% |
| Community Members | 14.5% | 2.7% | 9.6% | 23.2% | 403 | 11.2% | 429 | 3.3% |
| Distribution of Mailings | | | | | | | | |
| Hospice Family Members | 93.7% | 91.5% | 97.5% | 100.0% | 331 | 91.4% | 270 | 2.3% |
| Community Members | 6.3% | 0.0% | 2.5% | 8.5% | 331 | 8.6% | 270 | -2.3% |
| Distribution of Total Contacts | | | | | | | | |
| Hospice Family Members | 88.7% | 83.3% | 91.7% | 96.4% | 220 | 87.5% | 164 | 1.1% |
| Community Members | 11.3% | 3.6% | 8.3% | 16.7% | 220 | 12.5% | 164 | -1.1% |

¹ Total number of hospice family members who received bereavement services divided by agency deaths.

² NHPCO membership survey data.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 15. Staff Management

| | 2007 | | | | | 2006 | | Change '06 to '07 |
|---|-------------|--------|--------|--------|-----|-------------|-----|-------------------|
| | Agency Mean | 25th % | Median | 75th % | N | Agency Mean | N | |
| Patient Caseload¹ | | | | | | | | |
| Nurse Case Manager | 11.2 | 10.0 | 11.7 | 13.0 | 412 | 10.5 | 509 | 0.7 |
| Social Services | 23.4 | 18.0 | 25.0 | 30.0 | 409 | 23.4 | 505 | 0.0 |
| Home Health Aide | 9.5 | 6.0 | 10.0 | 12.0 | 390 | 8.8 | 476 | 0.7 |
| Chaplains | 35.1 | 19.0 | 35.0 | 50.0 | 391 | 33.7 | 474 | 1.4 |
| Physician Involvement (as percent of total physician time) | | | | | | | | |
| Direct Patient Care | 67.6% | 45.5% | 80.0% | 90.0% | 224 | 65.5% | 221 | 2.1% |
| Hospice Clinical | 62.0% | 31.5% | 75.0% | 90.0% | 224 | 68.4% | 197 | -6.4% |
| Palliative Clinical | 4.1% | 0.0% | 0.0% | 5.0% | 223 | 3.7% | 196 | 0.4% |
| Non-Clinical Duties | 32.1% | 10.0% | 20.0% | 50.0% | 223 | 31.3% | 221 | 0.8% |
| Paid Home Hospice Hours per Patient Day² | | | | | | | | |
| Clinical | 2.3 | 1.7 | 2.1 | 2.6 | 409 | 2.5 | 580 | -0.2 |
| Nursing | 1.2 | 0.8 | 1.1 | 1.4 | 408 | 1.1 | 577 | 0.1 |
| Home Health Aides | 0.6 | 0.4 | 0.5 | 0.7 | 406 | 0.8 | 576 | -0.2 |
| Social Services | 0.3 | 0.2 | 0.2 | 0.3 | 405 | 0.3 | 577 | 0.0 |
| Physicians | 0.1 | 0.02 | 0.06 | 0.2 | 345 | 0.1 | 318 | 0.0 |
| Chaplains | 0.1 | 0.06 | 0.10 | 0.1 | 273 | | | 0.1 |
| Other Clinical | 0.1 | 0.0 | 0.1 | 0.1 | 365 | 0.2 | 567 | -0.1 |
| Non-Clinical | 0.8 | 0.5 | 0.7 | 1.0 | 384 | 0.8 | 563 | 0.0 |
| All Staff (Clinical and Non-Clinical) | 3.1 | 2.3 | 2.9 | 3.6 | 370 | 3.5 | 541 | -0.4 |
| Average Daily Census per FTE³ | | | | | | | | |
| Clinical | 2.2 | 1.6 | 2.2 | 2.9 | 382 | 2.2 | 553 | 0.0 |
| Nursing | 4.9 | 3.3 | 4.7 | 6.4 | 380 | 5.3 | 549 | -0.4 |
| Home Health Aide | 9.6 | 5.7 | 8.5 | 12.4 | 371 | 8.3 | 530 | 1.3 |
| Social Services | 19.7 | 13.7 | 19.6 | 24.4 | 376 | 19.9 | 535 | -0.2 |
| Non-Clinical | 32.0 | 0.0 | 23.1 | 50.9 | 333 | 8.0 | 526 | 24.0 |
| All Staff (Clinical and Non-Clinical) | 7.6 | 4.1 | 6.3 | 9.4 | 363 | 1.6 | 516 | 6.0 |

¹ Typical number of patients that staff member is responsible for at one time.

² [(Number of FTEs multiplied by 2080 hours] divided by Total Patient Days).

³ Agency daily census divided by Total employees [non-PRN]. Interpreted as the number of patients per FTE.

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 16. Service Delivery - Home Hospice Visits

| | 2007 | | | | | 2006 | | Change '06 to '07 |
|--|----------------|--------|--------|--------|-----|----------------|-----|-------------------------|
| | Agency Mean | 25th % | Median | 75th % | N | Agency Mean | N | |
| VISITS PER PATIENT | | | | | | | | |
| Visits per Home Care Admission, by Discipline¹ | | | | | | | | |
| Clinical (direct patient care) | 62.1 | 35.1 | 54.5 | 82.2 | 461 | 59.9 | 529 | 2.2 |
| Nursing | 25.8 | 16.9 | 22.8 | 31.9 | 456 | 23.7 | 525 | 2.1 |
| Home Health Aides | 25.3 | 10.8 | 20.5 | 32.8 | 441 | 26.2 | 521 | -0.9 |
| Social Services | 6.3 | 3.6 | 5.5 | 8.2 | 454 | 6.3 | 526 | 0.0 |
| Paid Physicians | 0.8 | 0.0 | 0.03 | 0.9 | 302 | 0.7 | 237 | 0.1 |
| Chaplains* | 3.0 | 1.3 | 2.6 | 4.2 | 303 | | | |
| Other Clinical | 2.6 | 0.2 | 1.6 | 3.9 | 399 | 3.3 | 512 | -0.7 |
| Days Between Visits, by Discipline² | | | | | | | | |
| Clinical (direct patient care) | 1.7 | 1.3 | 1.6 | 2.0 | 677 | 1.6 | 764 | 0.1 |
| Nursing | 3.8 | 2.9 | 3.4 | 4.2 | 677 | 3.6 | 760 | 0.2 |
| All Other Clinical Staff | 3.4 | 2.1 | 2.8 | 4.1 | 676 | | | |
| VISITS PER STAFF MEMBER | | | | | | | | |
| Visits per Week, by Discipline³ | | | | | | | | |
| Clinical (direct patient care) | 12.6 | 9.5 | 12.4 | 15.3 | 419 | 12.9 | 530 | -0.3 |
| Nursing | 11.1 | 8.1 | 10.7 | 13.9 | 415 | 12.3 | 522 | -1.2 |
| Home Health Aides | 19.8 | 15.0 | 19.6 | 24.1 | 395 | 18.4 | 511 | 1.4 |
| Social Services | 11.2 | 7.7 | 10.7 | 13.6 | 406 | 11.4 | 520 | -0.2 |
| Paid Physicians | 5.6 | 0.0 | 0.7 | 6.6 | 190 | 10.0 | 177 | -4.4 |
| Chaplains* | 14.1 | 8.2 | 14.0 | 17.6 | 236 | | | |
| Other Clinical | 15.6 | 4.0 | 11.4 | 18.9 | 274 | 12.6 | 461 | 3.0 |
| Visits per 8-hour Day, by Discipline⁴ | | | | | | | | |
| Clinical (direct patient care) | 2.5 | 1.9 | 2.5 | 3.1 | 419 | 2.6 | 530 | -0.1 |
| Nursing | 2.2 | 1.6 | 2.1 | 2.8 | 415 | 2.5 | 522 | -0.3 |
| Home Health Aides | 4.0 | 3.0 | 3.9 | 4.8 | 395 | 3.7 | 511 | 0.3 |
| Social Services | 2.3 | 1.5 | 2.1 | 2.7 | 406 | 2.3 | 520 | 0.0 |
| Paid Physicians | 1.1 | 0.0 | 0.1 | 1.3 | 190 | 2.0 | 177 | -0.9 |
| Chaplains* | 2.8 | 1.6 | 2.8 | 3.5 | 236 | | | |
| Other Clinical | 3.1 | 0.8 | 2.3 | 3.8 | 274 | 2.5 | 461 | 0.6 |

¹ Total discipline home hospice visits divided by Total home, nursing facility, and residential admissions.

² (Total days of routine care + continuous care) divided by Total discipline visits.

³ (Total discipline home hospice visits / Total discipline home hospice FTEs) divided by 52.

⁴ (Total discipline home hospice visits / Total discipline home hospice FTEs) divided by 260.

* Beginning in FY2007 National Data Set, chaplains are captured as an independent category;

N = Number of hospice agencies with available data.

25th% = 25th percentile; Median = 50th percentile; 75th% = 75th percentile.

Table 17. Agency Revenue and Expenses

| | 2007 | | | 2006 | | Percent Change '06 to '07 |
|---|-------------|--------|-----|-------------|-----|---------------------------|
| | Agency Mean | Median | N | Agency Mean | N | |
| REVENUE AND EXPENSE DISTRIBUTIONS (Not-for profit agencies only) | | | | | | |
| Percent of Total Revenue | | | | | | |
| Hospice Service | 84.7% | 88.5% | 281 | 84.4% | 350 | 0.3% |
| Fundraising & Contributions | 8.1% | 5.6% | 281 | 7.3% | 350 | 0.9% |
| Other Revenue | 7.2% | 1.5% | 281 | 8.4% | 350 | -1.2% |
| Percent of Total Expenses | | | | | | |
| Hospice Service | 90.5% | 96.5% | 250 | | | |
| Fundraising & Contributions | 2.7% | 0.8% | 250 | | | |
| Other Expenses | 6.8% | 0.0% | 250 | | | |

N = Number of hospice agencies with available data.

Table 18. Cost per Patient Day from FY2005 - FY2006 Medicare Hospice Cost Report

| | 2006 | | 2005 | | Percent Change '05 to '06 |
|---|-------------|------|-------------|------|---------------------------------|
| | Median Cost | N | Median Cost | N | |
| MEDIAN COST PER PATIENT DAY (limited to Medicare-Certified Hospices)¹ | | | | | |
| General Service Cost Centers | | | | | |
| Capital Related Costs – Building | \$ 3.01 | 2922 | \$ 3.06 | 2843 | -1.8% |
| Capital Related Costs – Equipment | \$ 0.97 | 2922 | \$ 1.03 | 2843 | -6.0% |
| Plant Operation & Maintenance | \$ 1.11 | 2922 | \$ 1.12 | 2843 | -0.5% |
| Transportation – Staff | \$ 3.37 | 2922 | \$ 3.72 | 2843 | -9.3% |
| Volunteer Service Coordination | \$ 2.85 | 2922 | \$ 2.78 | 2843 | 2.5% |
| A&G Allocations | \$ 39.97 | 2922 | \$ 44.86 | 2843 | -10.9% |
| Inpatient Care Service Cost Centers | | | | | |
| Inpatient General Care | \$ 578.63 | 2922 | \$ 534.39 | 2843 | 8.3% |
| Inpatient Respite Care | \$ 134.96 | 2922 | \$ 113.92 | 2843 | 18.5% |
| All Visiting Services Cost Centers | | | | | |
| Physician Services | \$ 1.78 | 2922 | \$ 1.56 | 2843 | 14.1% |
| Nursing Care | \$ 34.08 | 2922 | \$ 33.81 | 2843 | 0.8% |
| Physical Therapy | \$ 0.10 | 2922 | \$ 0.10 | 2843 | 0.0% |
| Occupational Therapy | \$ 0.03 | 2922 | \$ 0.03 | 2843 | 0.0% |
| Speech / Language Pathology | \$ 0.02 | 2922 | \$ 0.02 | 2843 | 0.0% |
| Medical Social Services - Direct | \$ 5.84 | 2922 | \$ 5.64 | 2843 | 3.5% |
| Spiritual Counseling | \$ 2.75 | 2922 | \$ 2.66 | 2843 | 3.4% |
| Dietary Counseling | \$ 0.09 | 2922 | \$ 0.10 | 2843 | -10.0% |
| Counseling - Other | \$ 1.27 | 2922 | \$ 1.41 | 2843 | -9.9% |
| Home Health Aides and Homemakers | \$ 8.81 | 2922 | \$ 8.53 | 2843 | 3.3% |
| Other-Patient and Family Support | \$ 2.25 | 2922 | \$ 2.62 | 2843 | -14.1% |
| Other Services Cost Centers | | | | | |
| Drugs Biologicals & Infusion Therapy | \$ 9.16 | 2922 | \$ 9.83 | 2843 | -6.8% |
| Durable Medical Equipment & Oxygen | \$ 5.74 | 2922 | \$ 5.60 | 2843 | 2.5% |
| Patient Transportation | \$ 0.32 | 2922 | \$ 0.31 | 2843 | 3.2% |
| Imaging Services | \$ 0.08 | 2922 | \$ 0.07 | 2843 | 14.3% |
| Labs and Diagnostics | \$ 0.16 | 2922 | \$ 0.16 | 2843 | 0.0% |
| Medical Supplies | \$ 2.05 | 2922 | \$ 2.03 | 2843 | 1.0% |
| Outpatient Services | \$ 0.30 | 2922 | \$ 0.29 | 2843 | 3.4% |
| Radiation Therapy | \$ 0.15 | 2922 | \$ 0.17 | 2843 | -11.8% |
| Chemotherapy | \$ 0.20 | 2922 | \$ 0.26 | 2843 | -23.1% |
| Non-reimbursable Services | | | | | |
| Bereavement Program | \$ 1.19 | 2922 | \$ 1.29 | 2843 | -7.8% |
| Volunteer Program | \$ 0.14 | 2922 | \$ 0.13 | 2843 | 7.7% |
| Fundraising | \$ 2.89 | 2922 | \$ 2.93 | 2843 | -1.4% |

¹ Cost per patient day estimates represent the expenses associated with providing care for each day that a patient is enrolled under the Medicare Hospice Benefit. It is calculated by dividing the total cost center expense by the total unduplicated hospice enrollment days. Cost estimates derived from NHPCO analysis of FY2005 - FY2006 Medicare hospice cost report data (complete FY2007 costs were not available at time of analysis). Median (50th percentile) costs reported.

N = Number of hospice agencies with available data.

Table 19. Inpatient Facilities or Residential Units

| INPATIENT FACILITY STATUS | 2007 | | 2006 | | Change '06 to '07 |
|---|----------------------|----------|----------------------|----------|----------------------|
| | % of Agencies | N | % of Agencies | N | |
| Percent of Agencies with Facilities* | | | | | |
| % Operating Inpatient Facility or Unit | 19.7% | 2,265 | 19.6% | 2,279 | 0.04% |
| Facility Location* | | | | | |
| Freestanding | 63.4% | 434 | 61.9% | 420 | 1.5% |
| In Hospital | 24.9% | 434 | 25.2% | 420 | -0.3% |
| In Nursing Home | 6.2% | 434 | 5.5% | 420 | 0.7% |
| Other | 5.5% | 434 | 7.4% | 420 | -1.9% |
| Level of Care Provided* | | | | | |
| Acute or General Inpatient | 48.6% | 428 | 42.2% | 427 | 6.4% |
| Residential | 16.1% | 428 | 20.4% | 427 | -4.3% |
| Mixed (acute/general and residential) | 35.3% | 428 | 37.5% | 427 | -2.2% |
| INPATIENT LEVEL OF CARE MIX | % of Patients | N | % of Patients | N | |
| Percent of Total Admissions | | | | | |
| General Inpatient Care | 87.7% | 151 | 85.9% | 123 | 1.8% |
| Residential or Routine Care | 9.0% | 122 | 10.9% | 119 | -2.0% |
| Inpatient Respite Care | 3.3% | 116 | 3.1% | 118 | 0.2% |
| Percent of Total Deaths | | | | | |
| General Inpatient Care | 91.3% | 124 | 90.3% | 120 | 1.1% |
| Residential or Routine Care | 7.7% | 120 | 0.3% | 116 | 7.5% |
| Inpatient Respite Care | 0.9% | 111 | 9.5% | 112 | -8.5% |
| Percent of Live Discharges | | | | | |
| General Inpatient Care | 70.8% | 121 | 73.3% | 106 | -2.5% |
| Residential or Routine Care | 17.9% | 116 | 15.5% | 102 | 2.4% |
| Inpatient Respite Care | 11.3% | 110 | 11.2% | 91 | 0.1% |
| Percent of Patients Served | | | | | |
| General Inpatient Care | 87.6% | 119 | 84.0% | 107 | 3.7% |
| Inpatient Respite Care | 8.1% | 114 | 3.7% | 93 | 4.5% |
| Residential or Routine Care | 4.3% | 111 | 12.4% | 104 | -8.1% |
| Percent of Total Days | | | | | |
| General Inpatient Care | 76.0% | 147 | 61.2% | 86 | 14.8% |
| Inpatient Respite Care | 5.1% | 121 | 1.5% | 81 | 3.6% |
| Residential or Routine Care | 31.8% | 114 | 37.3% | 86 | -5.5% |
| INPATIENT LENGTH OF SERVICE | Mean Days | N | Mean Days | N | |
| Average LOS | | | | | |
| General Inpatient Care | 9.9 | 105 | 8.2 | 75 | 1.8 |
| Inpatient Respite Care | 6.1 | 46 | 7.3** | 32 | -1.2 |
| Residential or Routine Care | 24.2 | 85 | 34.1** | 64 | -9.9 |
| INPATIENT STAFFING | % | N | % | N | |
| Percent of Total Inpatient FTEs | | | | | |
| Clinical | 88.5% | 120 | 90.3% | 132 | -1.8% |
| Nursing | 48.1% | 118 | 45.6% | 129 | 2.5% |
| Social Services | 3.5% | 114 | 4.0% | 124 | -0.5% |
| Health Aides | 30.1% | 117 | 29.3% | 129 | 0.9% |
| Physicians | 2.1% | 95 | 2.0% | 98 | 0.0% |
| Chaplains ¹ | 1.7% | 102 | | | |
| Other Clinical | 3.0% | 98 | 9.30% | 121 | -6.3% |
| Non-clinical | 11.5% | 120 | 4.2% | 132 | 7.3% |

N = Number of hospice agencies with available data. Note: This section contains small cell counts; results should be interpreted with caution.

*NDS data supplemented with NHPCO membership survey data.

** Corrected value.

¹ Beginning in FY2007, chaplains are captured as an independent category; this group was previously included in the 'Other Clinical' category.

Additional Resources for NHPCO Members

In addition to the *National Summary of Hospice Care*, NHPCO members have access to national-level summary statistics to the NHPCO performance measurement tools listed in the table below.

| Tool | Population | Report Frequency | Agency-Level Reports | Web Site |
|--|-------------------|------------------|----------------------|--|
| Evaluation of Care Tools | | | | |
| End Result Outcome Measures | Hospice patients | Quarterly | No | www.nhpc.org/outcomemeasures |
| Family Evaluation of Bereavement Services | Family caregivers | Semi-annually | Yes | www.nhpc.org/febs |
| Family Evaluation of Hospice Care | Family caregivers | Quarterly | Yes | www.nhpc.org/fehpc |
| Family Evaluation of Palliative Care | Family caregivers | Semi-annually | Yes | www.nhpc.org/fepc |
| Organization and Program Evaluation Tools | | | | |
| National Data Set | Hospice agencies | Annually | No | www.nhpc.org/nds |
| Survey of Team Attitudes and Relationships | Hospice staff | Ongoing | Yes | www.nhpc.org/star |