



NHPCO FY2011 National Summary of Hospice Care

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Released November 2012

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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 Sources

The primary source of these findings are data provided by members who participate in NHPCO's *National Data Set* (n=1,155), a comprehensive annual survey supported by many of our state organization partners. National Data Set data are supplemented by NHPCO's membership database (n=8,894), and Medicare certification data from the CMS Provider of Services file (n=3,632).

The results of an ongoing, independent analysis of Medicare hospice cost report data are also incorporated. These data are presented as cost per patient day and are limited to Medicare-certified hospice providers that filed a FY2010 cost report (n=3,443) to the Centers for Medicare and Medicaid Services (CMS) Healthcare Cost Report Information System (HCRIS). Hospice cost report data for FY 2011 were not available at time of analysis.

Data Interpretation

To show the continuum of hospice performance, the attached tables provide national statistics for both FY2010 and FY2011. 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 as a measure of central tendency and may be interpreted as X percent of hospice programs reported a value above or below this value. The number of valid responses for each section is reported as the "N". Because multiple data sources were utilized and sometimes combined in calculating the statistics presented, response rates can differ considerably across and within sections. Consequently, results with smaller N's may not be as representative.

Summary Tables

Table 1. Hospice Agency Demographics

	2011		2010		Percent Change '10 to '11
	Percent of Agencies	N	Percent of Agencies	N	
TOTAL HOSPICE PROVIDERS					
Total Agencies		3,800		3,700	2.7%
Total Sites, including Satellite Offices		5,300		5,150	2.9%
					Difference '10 to '11
AGENCY OWNERSHIP					
Free Standing / Independent Hospice	57.7%	3,337	58.0%	3,250	-0.3%
Part of a Hospital System	20.3%	3,337	21.3%	3,250	-1.0%
Part of a Home Health Agency	16.8%	3,337	19.2%	3,250	-2.5%
Part of a Nursing Home	5.2%	3,337	1.4%	3,250	3.8%
INPATIENT SERVICES					
% Operating Inpatient Facility or Residence	24.0%	1,837	21.7%	1,944	2.3%
TAX STATUS^β					
Voluntary / Not for Profit	34.2%	3,306	36.0%	3,239	-1.8%
Proprietary / For Profit	60.6%	3,306	58.6%	3,239	2.0%
Government	5.2%	3,306	5.4%	3,239	-0.2%
GEOGRAPHIC LOCATION SERVED					
Mixed Urban and Rural	45.9%	1,917	44.5%	1,827	1.4%
Primarily Rural	31.9%	1,917	32.7%	1,827	-0.8%
Primarily Urban	22.3%	1,917	22.8%	1,827	-0.5%
AVERAGE DAILY CENSUS[*]					
1 to 9 patients	9.5%	566	12.1%	644	-2.6%
10 to 25 patients	15.7%	566	16.8%	644	-1.1%
26 to 50 patients	20.3%	566	20.0%	644	0.3%
51 to 100 patients	17.8%	566	20.0%	644	-2.2%
101 to 200 patients	16.3%	566	15.8%	644	0.4%
> 200 patients	20.3%	566	15.2%	644	5.1%
TOTAL PATIENT ADMISSIONS					
1 to 49	15.4%	2,952	15.9%	2,757	-0.6%
50 to 150	29.3%	2,952	30.1%	2,757	-0.8%
151 to 500	34.2%	2,952	33.0%	2,757	1.2%
501 to 1,500	16.7%	2,952	16.3%	2,757	0.3%
> 1,500	4.4%	2,952	4.6%	2,757	-0.2%

^β Data from the Centers for Medicare and Medicaid Services

* Total patient care days divided by 365.

N = Number of hospice agencies with available data.

Table 1. Hospice Agency Demographics (continued)

	2011		2010		Difference '10 to '11
	Percent of Agencies	N	Percent of Agencies	N	
CERTIFICATION & ACCREDITATION					
Medicare-certified Hospice Provider	93.2%	3,482	93.3%	3,182	0.0%
Independently Accredited	55.9%	2,054	57.4%	1,982	-1.4%
Joint Commission (formerly JCAHO)	36.9%	2,054	38.5%	1,982	-1.6%
Community Health Accreditation Program	14.3%	2,054	14.6%	1,982	-0.3%
Accreditation Commission for Health Care	1.9%	2,054	1.5%	1,982	0.4%
Other Accreditation(s)	3.7%	2,054	3.5%	1,982	0.1%
STATE MEMBERSHIPS					
Member of a State Hospice Association	83.8%	2,748	84.1%	2,694	-0.3%
Member of a State Home Health Association	44.3%	1,676	43.4%	694	0.9%
ADDITIONAL SERVICES*					
Formal Pediatric Palliative Care Programs with Specialized Staff					
% in operation	13.9%	2,448	13.9%	2,423	0.0%
% in the planning phase	0.6%	2,448	0.6%	2,423	0.0%
Service Delivery Programs Outside of Medicare Hospice Benefit Model					
% in operation	62.7%	2,434	62.6%	2,396	0.0%
% in the planning phase	4.2%	2,434	4.3%	2,396	0.0%
Palliative Consult Services (in any setting)					
% in operation	58.7%	1,096	58.3%	1,104	0.3%
% in the planning phase	23.1%	1,096	22.6%	1,104	0.5%
Palliative Care Services at Home / Inpatient Facility					
% in operation	65.6%	972	65.1%	966	0.5%
% in the planning phase	14.5%	972	14.2%	966	0.3%
Post-Hospice Support Program for Patients Discharged Alive					
% in operation	58.7%	832	57.6%	820	1.1%
% in the planning phase	12.7%	832	12.0%	820	0.8%
Complementary Therapies (music therapy, art therapy, massage therapy, etc.)					
% in operation	83.1%	628	84.0%	600	-0.9%
% in the planning phase	13.5%	628	13.5%	600	0.0%
Day Care Services for Hospice Patients					
% in operation	14.9%	134	18.4%	114	-3.5%
% in the planning phase	28.4%	134	28.1%	114	0.3%

* NHPCO membership data.

N = Number of hospice agencies with available data.

Table 2. Patient Volume

	2011					2010			Percent Change '10 to '11
	Agency Mean	25th%	Median	75th%	N	Agency Mean	Median	N	
PATIENT VOLUME									
Total Patient Days	47,946	11,000	26,014	66,555	417	42,942	23,581	419	11.7%
Daily Census	131.0	30.1	71.1	181.8	417	117.3	64.4	419	11.7%
Unique Patients Served	598.6	140.0	339.5	766.5	645	601.7	362.0	619	-0.5%
Total Admissions	550.9	134.0	319.0	711.0	645	534	315.5	619	3.2%
% Re-admissions	5.0%	2.0%	4.0%	7.0%	297	5.0%	4.0%	316	0.0%
Total Deaths	445.7	99.0	250.0	587.5	641	426.3	247	626	4.6%

Table 3. Referrals

	2011					2010			Difference '10 to '11
	Agency Mean	25th%	Median	75th%	N	Agency Mean	Median	N	
REFERRALS									
Percentage of Referrals Converted to Admissions	75.6%	69.4%	76.3%	83.8%	535	76.3%	77.9%	449	-0.7%
Referral Source	Percent of Total				N	Percent of Total		N	
Physician	23.8%				270	23.0%		304	0.8%
Hospital	39.8%				270	35.7%		304	4.1%
Nursing Facility	9.8%				270	12.0%		304	-2.3%
Self, Family, or Friend	12.3%				270	9.4%		304	3.0%
Other	12.5%				270	18.7%		304	-6.1%
Home Health Agency	1.7%				270	1.2%		304	0.6%

Table 4. Non-Death Discharges

	2011					2010			Difference '10 to '11
	Agency Mean	25th%	Median	75th%	N	Agency Mean	Median	N	
NON-DEATH (LIVE) DISCHARGE									
Non-death Discharges As a Percentage of Total Discharges	20.8%	12.1%	16.9%	25.9%	915	20.1%	17.2%	873	0.7%
Reason for Non-death Discharge	Percent of Total					Percent of Total			
A. Hospice-initiated Discharge	64.63%				320	54.9%		537	9.7%
B. Patient-initiated Discharge	35.36%				265	45.1%		540	-9.7%

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

N = Number of hospice agencies with available data.

Table 5. Patient Demographics

	2011		2010		Difference '10 to '11
	Percent of Patients	N	Percent of Patients	N	
PATIENT GENDER					
Female	56.4%	957	56.1%	847	0.3%
Male	43.6%	957	43.9%	847	-0.3%
PATIENT AGE ON ADMISSION					
< 65 / 65 or more years					
Less than 65 years	16.7%	607	17.3%	599	-0.6%
65 or more years	83.3%	607	82.7%	599	0.6%
Detailed Age Distribution					
0 - 24 years	0.4%	575	0.4%	513	0.0%
< 1y (% of 0-24 y)	18.1%	560	21.0%	498	-2.9%
1 - 4y (% of 0-24 y)	19.0%	560	17.3%	497	1.7%
5 - 14y (% of 0-24 y)	22.9%	562	22.9%	501	0.0%
15 - 24y (% of 0-24 y)	40.0%	575	38.8%	513	1.2%
25 - 34 years	0.4%	575	0.9%	513	-0.5%
35 - 64 years	16.0%	575	16.1%	513	-0.1%
65 - 74 years	16.3%	575	15.9%	513	0.4%
75 - 84 years	27.6%	575	27.9%	513	-0.2%
85+ years	39.3%	575	38.9%	513	0.5%
PATIENT ETHNICITY*					
Non-Hispanic or Latino origin	93.8%	934	94.3%	874	-0.6%
Hispanic or Latino origin	6.2%	934	5.7%	874	0.6%
PATIENT RACE*					
Asian, Hawaiian, Other Pacific Islander	2.4%	963	2.5%	875	-0.1%
American Indian or Alaskan Native	0.2%	948	0.3%	868	0.0%
Black / African American	8.5%	967	8.9%	895	-0.5%
Multiracial or Other Race	6.1%	971	11.0%	885	-4.8%
White / Caucasian	82.8%	982	77.3%	905	5.4%
SPECIAL POPULATIONS					
Veterans	8.6%	298	6.9%	286	1.7%

* 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 6. Primary Diagnosis

	2011		2010		Difference '10 to '11
	Percent of Patients	N	Percent of Patients	N	
Total Admissions by Primary Diagnosis					
Cancer	37.7%	986	35.6%	899	2.1%
Non-Cancer Diagnoses	62.3%	986	64.4%	899	-2.1%
Heart Disease	11.4%	984	14.3%	897	-2.9%
Debility Unspecified	13.9%	980	13.0%	888	0.9%
Dementia	12.5%	984	13.0%	896	-0.6%
Lung Disease	8.5%	983	8.3%	893	0.3%
Stroke or Coma	4.1%	964	4.2%	873	-0.1%
Kidney Disease (ESRD)	2.7%	978	2.4%	887	0.3%
Liver Disease	2.1%	974	1.9%	882	0.2%
Non-ALS Motor Neuron	1.6%	572	1.2%	549	0.4%
HIV / AIDS	0.2%	939	0.3%	852	0.0%
Amyotrophic Lateral Sclerosis (ALS)	0.4%	946	0.4%	855	-0.1%
Other	4.8%	964	5.4%	862	-0.6%
Total Deaths by Primary Diagnosis					
Cancer	39.5%	917	40.7%	867	-1.2%
Non-Cancer Diagnoses	60.5%	917	59.3%	867	1.2%
Heart Disease	11.1%	893	10.9%	841	0.2%
Debility Unspecified	12.7%	859	12.8%	805	-0.1%
Dementia	12.0%	893	11.6%	846	0.3%
Lung	8.4%	882	7.9%	826	0.5%
Stroke or Coma	4.4%	897	4.4%	843	-0.1%
Kidney Disease	3.0%	858	2.9%	802	0.1%
Liver Disease	2.1%	850	2.1%	805	0.0%
Non-ALS Motor Neuron	1.5%	542	1.4%	523	0.1%
HIV / AIDS	0.2%	728	0.3%	687	-0.1%
ALS	0.4%	755	0.4%	721	0.0%
Other	4.9%	895	4.5%	829	0.4%
Live Discharge Rate Per Diagnosis*					
Cancer	12.5%	912	12.5%	822	0.0%
Non-Cancer Diagnoses	18.9%	912	19.1%	817	-0.3%
Heart Disease	19.1%	879	19.8%	794	-0.7%
Debility Unspecified	24.0%	847	24.3%	766	-0.3%
Dementia	18.8%	889	19.5%	795	-0.7%
Lung Disease	17.3%	858	17.3%	770	0.0%
Stroke or Coma	11.4%	889	12.0%	788	-0.6%
Kidney Disease	8.4%	807	9.2%	710	-0.8%
Liver Disease	17.9%	819	17.0%	719	1.0%
Non-ALS Motor Neuron	19.9%	556	21.2%	523	-1.4%
HIV / AIDS	29.3%	725	25.2%	642	4.1%
ALS	19.5%	736	20.5%	663	-1.1%
Other	18.0%	892	17.9%	777	0.1%

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

N = Number of hospice agencies with available data.

Table 7. Length of Service[‡]

	2011					2010			Difference '10 to '11
	Agency Mean	25th%	Median	75th%	N	Agency Mean	Median	N	
LENGTH OF SERVICE (LOS)[*]	<u>Days</u>					<u>Days</u>			
Average LOS (days)	69.1	53.0	65.0	81.9	686	67.4	63.0	1,087	1.8
Median LOS (days)	19.1	12.0	16.0	22.0	664	19.7	16.0	1,009	-0.5
PERCENT OF DISCHARGES BY LOS	<u>% of Discharges</u>					<u>% of Discharges</u>			
1 to 7 Days	35.8%				266	35.3%		268	0.5%
8 to 14 Days	14.4%				266	14.1%		268	0.3%
15 to 29 Days	12.6%				266	12.9%		268	-0.3%
30 to 59 Days	11.0%				266	11.1%		268	-0.1%
60 to 89 Days	6.1%				266	6.0%		268	0.1%
90 to 179 Days	8.7%				266	8.7%		268	-0.1%
180+ Days	11.4%				266	11.8%		268	-0.4%
LOS BY TAX STATUS	<u>Days</u>					<u>Days</u>			
Average LOS									
Not for Profit	64.2	50.4	62.0	75.6	458	62.4	60.4	733	1.8
For Profit	85.0	65.0	84.5	96.0	192	85.5	81.0	299	-0.5
Government	59.0	47.0	51.0	78.8	33	53.3	47.0	55	5.7
Median LOS									
Not for Profit	17.5	12.0	16.0	20.5	442	17.7	16.0	690	-0.1
For Profit	24.1	13.0	18.0	30.0	187	26.8	19.0	266	-2.7
Government	19.9	15.0	19.0	22.5	32	18.5	15.0	53	1.4
LOS BY CERTIFICATION STATUS	<u>Days</u>					<u>Days</u>			
Average LOS									
Medicare-certified Provider	69.1	53.0	65.0	81.9	664	67.4	63.0	1,058	1.7
Non-certified Provider	84.2	45.9	68.0	109.7	18	71.0	68.0	28	13.3
Median LOS									
Medicare-certified Provider	19.1	12.0	16.0	22.0	642	19.6	16.0	986	-0.6
Non-certified Provider	39.9	19.0	35.0	44.0	18	30.7	22.0	22	9.2

[‡] Length of service values were weighted by the agency's total admissions.

^{*} Total days of care for patients discharged divided by total number of patients discharged.

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

N = Number of hospice agencies with available data.

Table 7. Length of Service (continued)[‡]

	2011					2010			Difference '10 to '11
	Agency Mean	25th%	Median	75th%	N	Agency Mean	Median	N	
LENGTH OF SERVICE (LOS)[*]	<u>Days</u>					<u>Days</u>			
Average LOS (days)	69.1	53.0	65.0	81.9	686	67.4	63.0	1,087	1.8
Median LOS (days)	19.1	12.0	16.0	22.0	664	19.7	16.0	1,009	-0.5
LOS BY TOTAL ADMISSIONS									
Average LOS									
1 - 49 Admissions	72.9	49.0	67.0	85.1	51	68.5	52.1	108	4.4
50 - 150 Admissions	79.0	45.0	62.3	89.0	160	69.7	58.0	304	9.3
151 - 500 Admissions	70.8	47.0	63.0	83.0	232	70.4	62.5	363	0.4
501 - 1,500 Admissions	67.2	51.0	62.0	81.9	172	66.2	62.4	228	0.9
> 1,500 Admissions	69.5	57.4	65.4	78.8	67	66.8	64.2	84	2.8
Median LOS									
1 to 49 Admissions	39.0	14.0	27.0	56.0	50	34.4	22.0	99	4.5
50 - 150 Admissions	34.0	16.0	23.0	34.0	152	29.6	22.0	279	4.4
151 - 500 Admissions	25.1	15.0	21.0	30.0	223	25.2	20.0	332	-0.1
501 - 1,500 Admissions	19.9	13.0	17.0	24.0	169	19.5	16.0	217	0.4
> 1,500 Admissions	15.4	11.0	14.0	18.0	66	16.3	14.0	82	-0.9
LOS BY PRIMARY DIAGNOSIS									
Cancer	45.2	34.2	43.6	55.2	835	46.7	43.7	789	-1.5
Non-Cancer Diagnoses	67.0	44.0	62.9	88.4	830	78.5	73.9	784	-11.5
Heart Disease	65.3	37.8	60.2	89.2	682	75.9	68.5	761	-10.6
Debility Unspecified	79.2	45.5	71.4	107.3	740	82.4	75.8	683	-3.2
Dementia	91.6	51.3	80.2	123.5	823	96.4	85.9	744	-4.8
Lung Disease	65.2	36.0	59.2	87.6	671	75.7	65.2	743	-10.5
Stroke or Coma	42.8	13.5	32.7	61.8	644	50.3	37.0	657	-7.5
Kidney Disease	27.6	10.6	20.5	35.0	708	29.4	21.0	665	-1.8
Liver Disease	37.3	15.4	29.4	50.9	680	38.8	30.0	663	-1.5
Non-ALS Motor Neuron	115.0	38.2	90.0	163.9	378	115.2	95.4	384	-0.2
HIV / AIDS	43.1	10.0	27.0	64.0	232	45.7	25.7	255	-2.6
ALS	87.7	30.0	65.0	127.8	397	93.9	74.0	382	-6.2
Other Diagnoses	58.4	23.4	44.2	82.8	657	58.2	45.4	606	0.2

[‡] Length of service values were weighted by the agency's total admissions.

^{*} Total days of care for patients discharged divided by total number of patients discharged.

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

N = Number of hospice agencies with available data.

Table 8. Location of Care

	2011		2010		Difference '10 to '11
	Percent of Patients	N	Percent of Patients	N	
PATIENT LOCATION ON ADMISSION					
Private Residence	49.6%	527	48.2%	571	1.4%
Nursing Home	17.2%	522	16.7%	564	0.5%
Acute Care Hospital (not operated by the hospice)	9.1%	492	11.6%	539	-2.5%
Free-Standing Hospice Inpatient Facility or Residence	13.6%	469	10.0%	460	3.6%
Hospice-Run Inpatient Facility in Other's Facility	3.5%	380	5.4%	414	-2.0%
Assisted Living or Other Residential Facility	7.0%	501	8.1%	541	-1.0%
LOCATION OF DEATH					
Private Residence	41.6%	545	41.4%	593	0.3%
Nursing Home	18.3%	539	18.0%	584	0.3%
Free-Standing Hospice Inpatient Facility or Residence	21.8%	483	15.9%	483	5.9%
Acute Care Hospital (not operated by the hospice)	7.4%	513	11.4%	569	-4.0%
Hospice-Run Inpatient Facility in Other's Facility	4.4%	391	6.0%	432	-1.7%
Assisted Living or Other Residential Facility	6.6%	518	7.3%	564	-0.7%

Table 9. Level of Care

	2011		2010		Difference '10 to '11
	Percent of Patient Days	N	Percent of Patient Days	N	
LEVEL OF CARE					
Routine Home Care	97.1%	880	95.7%	854	1.4%
General Inpatient Care	2.2%	828	2.9%	845	-0.6%
Continuous Care	0.4%	857	1.2%	809	-0.8%
Respite Care	0.3%	870	0.2%	822	0.0%

N = Number of hospice agencies with available data.

Table 10. Payer Mix

	2011		2010		Difference '10 to '11
	Percent	N	Percent	N	
PATIENTS SERVED					
Percent of Patients Served by Payer					
Medicare Hospice Benefit	84.0%	918	83.8%	863	0.2%
Managed Care or Private Insurance	7.7%	973	7.9%	899	-0.2%
Medicaid Hospice Benefit	5.2%	973	4.9%	840	0.3%
Uncompensated or Charity Care	1.3%	517	1.5%	440	-0.1%
Self Pay	1.1%	717	1.1%	681	0.0%
Other Payment Source	0.7%	892	0.8%	812	-0.1%
Medicare Patients as Percent of Total Patients, by Agency Tax Status					
Voluntary / Not for Profit	83.4%	432	83.4%	424	0.0%
Proprietary / For Profit	85.9%	314	85.0%	311	0.9%
Government	84.8%	30	82.2%	27	2.5%
PATIENT CARE DAYS					
Percent of Patient Care Days by Payer					
Medicare Hospice Benefit	87.9%	697	88.7%	850	-0.8%
Managed Care or Private Insurance	5.0%	907	4.8%	872	0.2%
Medicaid Hospice Benefit	5.0%	905	4.2%	844	0.8%
Uncompensated or Charity Care	1.0%	658	1.0%	554	0.0%
Self Pay	0.5%	871	0.6%	821	-0.1%
Other Payment Source	0.6%	873	0.8%	821	-0.2%
Medicare Days as Percent of Total Days, by Agency Tax Status					
Voluntary / Not for Profit	87.1%	338	87.8%	405	-0.7%
Proprietary / For Profit	90.2%	178	90.7%	308	-0.5%
Government	68.5%	16	88.2%	26	-19.8%

N = Number of hospice agencies with available data.

Table 11. Paid Staff Distribution and Turnover

	2011		2010		Difference '10 to '11
	Agency mean	N	Agency mean	N	
Distribution of Total FTEs*					
Clinical (direct patient care)	66.3%	360	66.9%	410	-0.6%
Nursing	30.2%	356	30.1%	410	0.1%
Nurse Practitioner	0.6%	306	0.4%	163	0.2%
Home Health Aides	18.8%	356	19.4%	409	-0.6%
Social Services	8.7%	356	8.5%	410	0.2%
Physicians (excludes volunteers)	2.9%	346	2.7%	401	0.2%
Chaplains	4.3%	352	4.3%	409	0.0%
Other Clinical	1.9%	328	2.0%	387	-0.1%
Nursing (indirect clinical)	7.2%	354	7.5%	403	-0.3%
Non-clinical (administrative/general)	21.8%	357	21.9%	410	-0.1%
Volunteer Coordinators [¥]	3.6%	135			
Bereavement	4.4%	344	3.8%	410	0.6%
Distribution of Total Employees					
Clinical (direct patient care)	74.3%	432	66.9%	428	7.4%
Nursing	31.7%	429	28.6%	428	3.1%
Nurse Practitioner	1.0%	365	0.4%	189	0.6%
Home Health Aides	20.6%	425	17.9%	424	2.7%
Social Services	9.0%	428	8.7%	428	0.4%
Physicians (excludes volunteers)	4.6%	420	4.0%	419	0.6%
Chaplains	5.4%	424	4.7%	425	0.7%
Other Clinical	2.9%	387	2.7%	399	0.2%
Nursing (indirect clinical)	8.3%	423	7.4%	428	0.9%
Non-clinical (administrative/general)	21.0%	223	21.3%	428	-0.3%
Volunteer Coordinators [¥]	4.3%	189			
Bereavement	5.0%	420	4.4%	428	0.6%
Turnover rate within each Discipline[#]					
Clinical (direct patient care)	24.7%	374	27.2%	357	-2.5%
Nursing	30.8%	370	36.5%	356	-5.6%
Nurse Practitioner	0.7%	308	0.3%	153	0.5%
Home Health Aides	23.4%	361	24.7%	345	-1.3%
Social Services	20.7%	352	22.7%	340	-2.1%
Physicians (excludes volunteers)	8.1%	338	9.7%	324	-1.6%
Chaplains	15.4%	344	15.2%	331	0.2%
Other Clinical	4.2%	332	8.5%	319	-4.3%
Nursing (indirect clinical)	15.8%	351	16.1%	335	-0.3%
Non-clinical (administrative/general)	20.4%	196	18.7%	341	1.7%
Volunteer Coordinators [¥]	13.4%	138			
Bereavement	14.2%	342	11.9%	331	2.3%
All Staff	23.6%	375	24.5%	357	-0.9%

* 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.

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

¥ New variable in 2011

N = Number of hospice agencies with available data.

Table 12. Volunteer Services

	2011					2010			Difference '10 to '11
	Agency Mean	25th %	Median	75th %	N	Agency Mean	Median	N	
TOTAL VOLUNTEERS									
Percent of Total Volunteers *									
Direct Patient Care	60.0%	41.3%	59.8%	80.4%	471	59.3%	59.4%	474	0.8%
Patient Care Support (clerical)	19.0%	6.7%	14.8%	27.1%	471	19.2%	13.7%	474	-0.3%
General Support (fundraising/board)	21.0%	0.0%	13.3%	35.3%	471	21.5%	13.3%	474	-0.5%
Number of Volunteers per Patient ‡									
All Volunteer Types	0.27	0.1	0.19	0.36	543	0.29	0.20	551	-0.02
Direct Patient Care	0.15	0.07	0.11	0.19	492	0.15	0.13	494	0.00
Patient Care Support (clerical)	0.06	0.02	0.04	0.08	477	0.06	0.04	472	0.00
General Support (fundraising/board)	0.13	0.03	0.06	0.17	316	0.15	0.06	324	-0.02
VOLUNTEER HOURS									
Percent of Total Volunteer Hours ‡									
Direct Patient Care	54.2%	34.7%	51.4%	75.1%	459	52.2%	50.7%	469	2.0%
Patient Care Support (clerical)	27.2%	10.2%	22.6%	41.0%	459	29.1%	23.7%	469	-1.9%
General Support (fundraising/board)	18.6%	0.0%	9.2%	30.6%	459	18.7%	8.6%	469	0.0%
Volunteer Hours per Volunteer									
Hours per Volunteer #	44.4	23.2	38.3	58.8	490	46.7	41.6	493	-2.3
Patient Visits per Volunteer	19.5	10.2	16.3	26.1	452	20.0	17.5	473	-0.5
Phone Calls per Volunteer	6.0	0.8	3.5	7.6	117	6.17	3.23	107	-0.1
Volunteer Hours as % of Total Staff Hours	4.6%	1.5%	3.5%	6.3%	465	4.6%	3.3%	487	0.0%
Volunteer Hours as % of Clinical Staff Hours	4.8%	1.8%	3.7%	6.8%	465	5.2%	3.9%	485	-0.4%
Volunteer Visits as % of Total Visits	5.0%	2.1%	4.0%	6.9%	453	5.2%	4.3%	475	-0.3%
% of Patients Receiving Volunteer Services €	34.4%	20.1%	32.5%	47.8%	174				

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

‡ Number of volunteers divided by total patient admissions.

Volunteer hours divided by number of volunteers.

€ New variable in 2011

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

N = Number of hospice agencies with available data.

Table 13. Bereavement Services

	2011					2010			Difference '10 to '11
	Agency Mean	25th %	Median	75th %	N	Agency Mean	Median	N	
Total Hospice Family Members Served per Death *	1.8	1.0	1.3	2.2	796	1.9	1.4	761	-0.1
Agencies Offering Bereavement Services to the Community									
% in operation	92.2%				1,711	92.0%		1,698	0.2%
% in the planning phase	4.6%				1,711	4.6%		1,698	0.0%
Contacts per Family Member									
Phone calls/Visits	2.5	1.0	2.0	3.4	454	2.6	2.0	474	-0.1
Mailings	6.1	2.4	4.4	7.8	453	6.1	4.6	467	0.0
Total Contacts (phone calls/visits/mailings)	8.5	3.9	6.7	11.3	457	8.7	6.9	476	-0.2
Contacts per Community Member									
Phone calls/Visits	1.7	0.6	1.0	2.4	302	2.1	1.3	303	-0.4
Mailings	2.0	0.0	0.4	2.0	312	2.9	0.6	305	-1.0
Total Contacts (phone calls/visits/mailings)	4.0	1.0	2.0	4.6	308	5.0	2.3	316	-1.0
Percent Served by Affiliation w/ Hospice									
Hospice Family Members	85.7%	77.3%	92.9%	100%	726	84.9%	91.6%	693	0.8%
Community Members	14.3%	0.0%	7.1%	22.7%	726	15.1%	8.4%	693	-0.8%
Distribution of Visits & Calls									
Hospice Family Members	84.9%	76.7%	89.0%	96.0%	321	83.7%	89.0%	333	1.2%
Community Members	15.1%	4.0%	11.0%	23.3%	321	16.3%	11.0%	333	-1.2%
Distribution of Mailings									
Hospice Family Members	96.2%	94.8%	99.4%	100%	404	93.8%	98.9%	399	2.4%
Community Members	3.8%	0.0%	0.6%	5.2%	404	6.2%	1.1%	399	-2.4%
Distribution of Total Contacts									
Hospice Family Members	91.4%	87.5%	94.6%	97.7%	334	89.1%	93.0%	346	2.3%
Community Members	8.6%	2.3%	5.4%	12.5%	334	10.9%	7.0%	346	-2.3%

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

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

N = Number of hospice agencies with available data.

Table 14. Staff Management

	2011					2010			Difference '10 to '11
	Agency Mean	25th %	Median	75th %	N	Agency Mean	Median	N	
Patient Caseload*									
Nurse Case Manager	11.4	10.0	12.0	13.0	472	10.9	12.0	487	0.5
Social Services	25.9	20.0	25.0	32.0	472	24.3	25.0	486	1.6
Home Health Aide	11.1	7.0	10.0	14.0	456	10.5	10.0	476	0.6
Chaplains	37.7	25.0	36.0	50.0	448	33.7	32.5	480	4.0
Volunteer Coordinator	52.4	18.0	35.0	80.0	331	53.4	40.0	202	-1.0
Medical Director	48.2	14.0	35.0	75.0	293	59.0	40.0	196	-10.8
Paid Home Hospice Hours per Patient Day[¥]									
Clinical	2.2	1.6	1.9	2.6	453	2.3	2.0	471	-0.1
Nursing	1.0	0.7	0.9	1.2	450	1.0	0.9	470	0.0
Nurse Practitioner ^µ	0.0	0.0	0.0	0.1	450	0.1	0.0	56	-0.1
Home Health Aides	0.6	0.4	0.5	0.8	448	0.6	0.5	468	0.0
Social Services	0.3	0.2	0.2	0.3	450	0.3	0.3	470	0.0
Physicians	0.2	0.0	0.1	0.2	434	0.2	0.1	454	0.0
Chaplains	0.1	0.1	0.1	0.2	443	0.1	0.1	463	0.0
Other Clinical	0.0	0.0	0.0	0.1	417	0.1	0.0	436	-0.1
Nursing (indirect clinical)	0.2	0.1	0.2	0.4	445	0.2	0.2	459	0.0
Non-Clinical	0.7	0.4	0.6	1.0	448	0.7	0.6	461	0.0
Volunteer Coordinator [€]	0.1	0.0	0.1	0.1	194				
All Staff (Clinical and Non-Clinical)	3.5	2.5	3.2	4.1	433	3.6	3.2	454	-0.1
Average Daily Census per FTE[£]									
Clinical	2.5	1.8	2.6	3.2	458	2.6	2.6	473	-0.1
Nursing	6.2	4.6	6.2	7.8	455	6.3	6.1	470	-0.1
Nurse Practitioner ^µ	139.3	48.7	112.0	190.3	146	178.7	142.6	53	-39.4
Home Health Aide	9.6	6.0	9.7	12.4	454	10.2	9.8	465	-0.6
Social Services	21.0	13.9	20.2	27.2	455	20.8	19.5	470	0.2
Physicians	43.0	7.8	28.3	62.4	448	47.5	29.8	458	-4.5
Chaplains	37.3	18.7	35.3	51.1	453	38.7	35.7	465	-1.4
Other Clinical	25.8	0.0	0.0	28.9	415	25.0	0.0	428	0.8
Nursing (indirect clinical)	18.8	6.5	16.6	28.5	450	20.1	17.5	458	-1.3
Non-Clinical	9.1	4.4	8.1	12.0	229	10.1	7.8	466	-1.0
Volunteer Coordinator [€]	74.1	25.8	66.8	108.6	209				
All Staff (Clinical and Non-Clinical)	1.9	1.3	1.9	2.5	458	1.7	1.7	473	0.2

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

¥ ((Number of FTEs multiplied by 2080 hours) divided by Total Patient Days).

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

€ New variable in 2011

µ Only data for hospices reporting the use of Nurse Practitioners included in analysis.

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

N = Number of hospice agencies with available data.

Table 15. Service Delivery - Home Hospice Visits

	2011					2010			Difference '10 to '11
	Agency Mean	25th %	Median	75th %	N	Agency Mean	Median	N	
VISITS PER PATIENT									
Visits per Home Care Admission, by Discipline*									
Clinical (direct patient care)	67.3	41.4	62.2	88.4	463	67.6	61.7	520	-0.3
Nursing	26.2	18.5	24.2	32.4	458	26.2	24.1	517	0.0
Nurse Practitioner ^μ	0.5	0.1	0.4	0.8	136	0.3	0.1	42	0.2
Home Health Aides	28.4	14.1	25.0	38.5	460	28.7	24.9	514	-0.3
Social Services	6.7	4.2	6.2	8.5	460	6.5	5.8	516	0.2
Paid Physicians	0.7	0.0	0.2	1.0	433	0.6	0.1	477	0.1
Chaplains	3.7	2.0	3.4	5.2	454	3.5	3.3	512	0.2
Other Clinical	0.5	0.0	0.1	0.7	425	0.7	0.1	483	-0.2
Days Between Visits, by Discipline[£]									
Clinical (direct patient care)	1.3	0.3	1.4	1.8	844	1.6	1.5	768	-0.3
Nursing	3.6	0.7	3.3	4.5	842	3.8	3.3	767	-0.2
All Other Clinical Staff	2.2	0.5	2.4	3.3	843	3.0	2.7	765	-0.8
VISITS PER STAFF MEMBER									
Visits per Week, by Discipline[#]									
Clinical (direct patient care)	14.2	10.6	13.9	17.0	467	14.0	13.8	485	0.2
Nursing	13.5	9.4	12.5	15.7	461	13.1	12.5	479	0.4
Nurse Practitioner ^μ	7.5	0.8	5.1	11.7	175	6.0	1.7	36	1.5
Home Health Aides	20.5	15.2	20.0	24.9	454	20.6	19.9	465	-0.1
Social Services	11.8	8.0	10.8	14.5	459	11.7	11.2	472	0.1
Paid Physicians	7.5	0.1	3.0	10.2	359	5.5	0.6	347	2.0
Chaplains	13.6	8.6	13.0	17.4	428	14.5	13.4	441	-0.9
Other Clinical	10.5	0.7	4.8	16.7	212	9.8	3.9	226	0.7
Visits per 8-hour Day, by Discipline[¥]									
Clinical (direct patient care)	2.8	2.1	2.8	3.4	467	2.8	2.8	485	0.0
Nursing	2.7	1.9	2.5	3.1	461	2.6	2.5	479	0.1
Nurse Practitioner ^μ	1.5	0.1	1.0	2.3	171	1.2	0.3	36	0.3
Home Health Aides	4.1	3.0	4.0	5.0	454	4.1	4.0	465	0.0
Social Services	2.4	1.6	2.2	2.9	459	2.3	2.2	472	0.1
Paid Physicians	1.5	0.0	0.6	2.0	359	1.1	0.1	347	0.4
Chaplains	2.7	1.7	2.6	3.5	428	2.9	2.7	441	-0.2
Other Clinical	2.1	0.1	1.0	3.3	212	2.0	0.8	226	0.1

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

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

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

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

μ Only data for hospices reporting the use Nurse Practitioners included in analysis.

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

N = Number of hospice agencies with available data.

Table 16. Agency Revenue and Expenses

	2011			2010			<i>Difference '10 to '11</i>
	Agency Mean	Median	N	Agency Mean	Median	N	
REVENUE AND EXPENSE DISTRIBUTIONS							
(Not-for profit agencies only)							
Percent of Total Revenue							
Hospice Service	83.8%	90.1%	215	88.1%	93.2%	296	-4.3%
Fundraising & Contributions	8.3%	3.6%	215	6.2%	2.6%	296	2.1%
Other Revenue	8.0%	2.4%	215	5.7%	1.1%	296	2.3%
Percent of Total Expenses							
Hospice Service	90.5%	96.6%	200	92.0%	98.3%	277	-1.5%
Fundraising & Contributions	2.5%	0.9%	200	3.1%	0.3%	277	-0.7%
Other Expenses	7.0%	1.3%	200	4.9%	0.0%	277	2.2%

N = Number of hospice agencies with available data.

Table 17. Cost per Patient Day from FY2010 - FY2009 Medicare Hospice Cost Report

	2010		2009		Percent Change '09 to '10
	Median Cost	N	Median Cost	N	
MEDIAN COST PER PATIENT DAY					
(limited to Medicare-Certified Hospices)*					
General Service Cost Centers					
Capital Related Costs – Building	\$ 3.66	3,443	\$ 4.04	2,374	-10.3%
Capital Related Costs – Equipment	\$ 1.10	3,443	\$ 1.09	2,374	1.0%
Plant Operation & Maintenance	\$ 1.35	3,443	\$ 1.54	2,374	-14.6%
Transportation – Staff	\$ 3.21	3,443	\$ 3.13	2,374	2.4%
Volunteer Service Coordination	\$ 2.85	3,443	\$ 2.96	2,374	-4.2%
A&G Allocations	\$ 45.99	3,443	\$ 47.46	2,374	-3.2%
Inpatient Care Service Cost Centers					
Inpatient General Care	\$ 498.93	3,443	\$ 464.64	2,374	6.9%
Inpatient Respite Care	\$ 142.06	3,443	\$ 140.86	2,374	0.8%
All Visiting Services Cost Centers					
Physician Services	\$ 2.30	3,443	\$ 2.00	2,374	12.8%
Nursing Care	\$ 34.37	3,443	\$ 35.26	2,374	-2.6%
Physical Therapy	\$ 0.08	3,443	\$ 0.10	2,374	-23.6%
Occupational Therapy	\$ 0.03	3,443	\$ 0.03	2,374	-12.5%
Speech / Language Pathology	\$ 0.02	3,443	\$ 0.02	2,374	9.3%
Medical Social Services - Direct	\$ 5.82	3,443	\$ 6.27	2,374	-7.7%
Spiritual Counseling	\$ 3.20	3,443	\$ 3.17	2,374	0.7%
Dietary Counseling	\$ 0.08	3,443	\$ 0.08	2,374	7.5%
Counseling - Other	\$ 1.94	3,443	\$ 1.69	2,374	12.8%
Home Health Aides and Homemakers	\$ 9.52	3,443	\$ 9.33	2,374	2.0%
Other-Patient and Family Support	\$ 1.10	3,443	\$ 1.70	2,374	-54.3%
Other Services Cost Centers					
Drugs Biologicals & Infusion Therapy	\$ 8.33	3,443	\$ 8.46	2,374	-1.6%
Durable Medical Equipment & Oxygen	\$ 5.94	3,443	\$ 5.91	2,374	0.4%
Patient Transportation	\$ 0.35	3,443	\$ 0.34	2,374	4.6%
Imaging Services	\$ 0.08	3,443	\$ 0.09	2,374	-6.0%
Labs and Diagnostics	\$ 0.13	3,443	\$ 0.14	2,374	-8.2%
Medical Supplies	\$ 2.24	3,443	\$ 2.09	2,374	6.4%
Outpatient Services	\$ 0.28	3,443	\$ 0.28	2,374	0.1%
Radiation Therapy	\$ 0.11	3,443	\$ 0.16	2,374	-41.7%
Chemotherapy	\$ 0.19	3,443	\$ 0.13	2,374	32.5%
Non-reimbursable Services					
Bereavement Program	\$ 1.33	3,443	\$ 1.40	2,374	-4.8%
Volunteer Program	\$ 0.17	3,443	\$ 0.17	2,374	0.5%
Fundraising	\$ 2.07	3,443	\$ 2.78	2,374	-34.7%

* 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 analysis of FY2010 Medicare hospice cost report data (complete FY2011 costs were not available at time of analysis).

N = Number of hospice agencies with available data.

Table 18. Inpatient Facilities or Residential Units

INPATIENT FACILITY STATUS	2011		2010		Difference '10 to '11
	% of Agencies	N	% of Agencies	N	
Percent of Agencies with Facilities					
% Operating Inpatient Facility or Unit	24.0%	1,837	21.7%	1,944	2.3%
Facility Location					
Freestanding	59.1%	872	65.0%	843	-6.0%
In Hospital	23.1%	872	22.7%	843	0.4%
In Nursing Home	5.2%	872	5.6%	843	-0.4%
Other	12.7%	872	6.8%	843	6.0%
Level of Care Provided					
Acute or General Inpatient	47.9%	886	48.2%	866	-0.3%
Mixed (acute/general and residential)	38.0%	886	37.1%	866	1.0%
Residential	14.1%	886	14.8%	866	-0.7%
INPATIENT LEVEL OF CARE MIX	% of Patients	N	% of Patients	N	
Percent of Total Admissions*					
General Inpatient Care	86.2%	177	88.5%	181	-2.3%
Residential or Routine Care	8.9%	164	7.0%	138	2.0%
Inpatient Respite Care	4.9%	125	4.6%	135	0.3%
Percent of Total Deaths					
General Inpatient Care	92.3%	171	92.2%	148	0.2%
Residential or Routine Care	6.6%	164	6.7%	135	-0.2%
Inpatient Respite Care	1.1%	115	1.1%	123	0.0%
Percent of Live Discharges*					
General Inpatient Care	63.5%	126	64.6%	142	-1.1%
Residential or Routine Care	20.5%	123	20.1%	135	0.4%
Inpatient Respite Care	16.0%	118	15.2%	126	0.7%
Percent of Patients Served					
General Inpatient Care	85.9%	131	85.5%	149	0.4%
Residential or Routine Care	8.8%	119	9.9%	138	-1.1%
Inpatient Respite Care	5.3%	119	4.6%	134	0.6%
Percent of Total Days					
General Inpatient Care	77.2%	177	76.4%	178	0.8%
Residential or Routine Care	19.3%	166	19.8%	142	-0.6%
Inpatient Respite Care	3.5%	125	3.7%	135	-0.2%
INPATIENT LENGTH OF SERVICE	Mean Days	N	Mean Days	N	
Average LOS					
General Inpatient Care	8.8	151	7.3	121	1.4
Residential or Routine Care	23.1	114	17.4	99	5.7
Inpatient Respite Care	5.5	62	5.9	66	-0.4
INPATIENT STAFFING	%	N	%	N	
Percent of Total Inpatient FTEs					
Clinical	82.0%	170	81.8%	152	0.3%
Nursing	42.4%	170	41.4%	151	1.0%
Social Services	3.9%	164	5.4%	145	-1.5%
Health Aides	28.6%	170	28.5%	148	0.1%
Physicians	2.7%	155	2.2%	134	0.6%
Chaplains	1.6%	156	2.1%	138	-0.5%
Other Clinical	2.9%	157	2.3%	124	0.6%
Non-clinical	15.2%	168	16.0%	147	-0.8%

* Admission and live discharge data include transfers in level-of-care regardless if the patient remains with the same hospice organization.

N = Number of hospice agencies with available data.

Note: This section contains small cell counts; results should be interpreted with caution.

Additional Resources for NHPCO Members

In addition to this *National Summary of Hospice Care*, NHPCO members can access national-level summary statistics in the quarterly and semiannual reports produced for the Performance Measure tools listed below.

Tool	Population	Report Frequency	Agency-Level Reports	Web Site
Evaluation of Care Tools				
Patient Outcomes and 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/fehcc
Family Evaluation of Palliative Care	Family caregivers	Semi-annually	Yes	www.nhpc.org/fepec
Organization and Program Evaluation Tools				
National Summary of Hospice Care – Peer Reports ¹	Hospice agencies	Annually	No	www.nhpc.org/nds
Survey of Team Attitudes and Relationships	Hospice staff	Ongoing	Yes	www.nhpc.org/star

¹ *The National Summary of Hospice Care – Peer Reports* are available for purchase by provider-members of NHPCO. A 50% discount is applied to those organizations who submit data to the NHPCO National Data Set.