LeadingAge® Ohio

What the Media Said about End-of-Life Care This Week

December 7, 2020

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COMPASSIONATE CARE ACT WELCOMED BY END-OF-LIFE SERVICE PROVIDERS AND ADVOCATES

The Compassionate Care Act, sponsored by Senator Richard Blumenthal (D-CT) was introduced on December 2. The act, says a statement posted on Senator Blumenthal's site, would "promote advance care planning and end-of-life care to ensure that patients get the care they want and that is right for them." The act would promote both physician education and public awareness campaigns. The bill would also address hospice Medicare coverage limitations and develop strategies for implementing advance care planning national policies. "The Compassionate Care Act will help to ensure that patients' wishes are followed throughout their life, particularly during a pandemic that has robbed patients of making critical life or death decisions for themselves."

The legislation, supportive by over a dozen healthcare organizations, emerges in the midst of the overwhelming deaths of COVID-19. In Blumenthal's press release, a number of leaders from stakeholder organizations are quoted in offering their praise of the legislation. Leaders from Compassion and Choices, C-TAC, National Partnership for Healthcare and Hospice Innovation, NHPCO, NAHC, Leading Age, and the Connecticut State Long Term Care Ombudsman all speak about their support of and encouragement from this action. For these who serve patients and are advocates for those near life's end, the news is welcomed and positive.

The public awareness campaign that will help educate people about end-of-life care, will focus "especially on communities of color that have been hardest hit during the pandemic." And the legislation will focus "on the development of end-of-life quality measures and expanding access to advance care planning through telehealth." With this legislation, DDHS would work with providers of care, state boards of medicine and clinical associations to meet these goals. And all stakeholders would work together to study "a national advanced care planning registry that would allow patients to transfer their advanced directives from state to state." Additionally, the legislation "would include grants and pilot initiatives aimed at educating medical, nursing and social work students."

Blumenthal says, "This bill will help Americans have the difficult but necessary conversations about end-of-life care. . . By promoting end-of-life care through public awareness, expanding telehealth services, and working with physicians, we can ensure that not one more person is robbed of making critical life or death decisions for themselves during this pandemic and beyond."

If the Compassionate Care Act becomes law, guidelines will be established for advance care planning and there will be continuing education criteria for healthcare professionals. Of special interest to hospice providers is that the bill would “allow physicians to recertify hospice stays through telehealth, which could reduce paperwork and administrative burdens.” (Senator Richard Blumenthal, 12/2) ***Read more...***; (*Full Text of the Legislation)* ***Read the full legislation text here***.*; (Summary of the Legislation)* ***Read the summary of the legislation here.***; (*Public News Service,* 12/6) ***Read more...;*** (*Home Health Care News,* 12/2) ***Read more...***; (*McKnight’s Senior Living,* 12/4) ***Read more...***; (*Bioethis.net,* 12/4) ***Read more...***; (*Compassion and Choices,* 12/2) ***Read more...*** (*C-TAC,* 12/2,) ***Read more...***

HOSPICE NOTES

* US Representative Brad Schneider (D-IL) introduced the *Medicare Sequester COVID Moratorium ACT,* H.R. 8840. The act “will extend the suspension of the two percent Medicare sequestration payment reductions through the COVID-19 public health period.” An *NHPCO* media release says the act, which will allow the sequestration relief to continue during the pandemic, will help hospices as they face “lost revenues and extraordinary expenses related to the COVID-19 pandemic.” (*NHPCO,* 12/3) ***Read more...***

* “Juntos con Esperanza,” reads the side of the van that roams Monterey County in California. Spanish for “Together with Hope,” is a part of outreach of VNA and Hospice and helps to “break taboos about hospice care.” The van is “an accessible, unintimidating liaison” funded by Hospice Giving Foundation. The staff members of the van offer help with advance directives, coordinate medical equipment, and seek to bridge cultural barriers in order to make help and support easier to come by. (*Monterey County Weekly,* 12/12) ***Read more...***

* Brandi Houser, 41, was a hospice care consultant. Her work was well suited to her gifts of offering encouragement and focus to families of the terminally ill, to educating about services available, and to finding answers for patients and family members. Houser was highlighted in *New York Times* ongoing “Those We’ve Lost.” Houser died from Covid-19 on November 13 in Modesto, CA. (*New York Times,* 11/30) ***Read more...***

* *NHPCO’s* “Inclusion and Access Toolkit” offers tools, resources. and guidance for hospices to improve awareness, understanding, and “sensitivity of inclusion and access in end-of-life care.” Use of the toolkit supports hospices’ efforts to create “new paths” for inclusion, develop organizational plans for increasing inclusion, and “demonstrate individual and collective bet practices for inclusion which are cornerstones of culturally relevant and sensitive care.” The toolkit is available at the link below. (*NHPCO,* October 2020) ***To access the toolkit, click here.***

* *MedPAC's* December meeting called again for a fiscal year 2022 elimination of Medicare base rate update to fiscal year 2021 hospice payments, and a wage adjustment and reduction of 20% for the hospice aggregate cap for fiscal year. *NHPCO* issued a press release expressing concern about the "unintended consequences" of these recommended changes, especially a reduction in the hospice cap. This could lead, says the release, "to a decrease in hospice access for patients and families, especially in rural and underserved areas." Instead, NHPCO's Edo Banach urges "MedPAC to use a targeted approach that will have a higher likelihood of rewarding high quality, punishing low quality, and increasing access." While there was no opportunity to speak at the virtual meeting, *NHPCO* says it will submit written comments to MedPAC. At MedPAC's next meeting, on January 14 and 15, 2021 there will be a vote on these recommendations, which then move forward to Congress. (*NHPCO,* 12/40 ***Read more...***

* In the CDC's Advisory Committee on Immunization Practices (ACIP) on the prioritization of vaccine access, home care and hospice staff are included as front-line workers who have first access to the COVID-19 vaccine. More than 60% of these providers report that COVID-19 patients have or are being served by their agencies. A coalition of organizations that represent both home care and hospice providers **sent a letter** affirming this recommendation. The letter is located at the second link below. LeadingAge Ohio President/CEO Kathryn Brod **sent a letter** to the DeWine administration on December 3 regarding the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practice's (ACIP's) decision on December 1 to prioritize health care workers for Phase 1A vaccine access. The letter urges the Administration to consider home care and hospice health care workers in the Phase 1A priority.

* Florida's *Tidewell Hospice* "is deploying the largest virtual reality rollout in hospice care history," says an article in *SRQmagazine.* The article explains that patients and loved ones find entertainment and diversion from pain and isolation. In fact, says the article, those using the virtual reality tools can revisit "significant places from their past, and check off bucket list items." Staff are trained to use the technology, learning to access experiences ranging from meditative and breathing exercises to skydiving and visiting the International Space Station." (*Bromazine,* 10/28) ***Learn more...***

END OF LIFE AND PALLIATIVE CARE NOTES

* An international study, shared in *McKnight's Long-Term Care News,* finds that palliative care service duration in the US is 10 days fewer than in some other countries. The study, conducted in the UK, reviewed almost "12 million cases in 23 countries. And there are great variations. Average length of care varied significantly – from six days in Australia to 69 days in Canada. The second link below points to the report on the study in *BMC Medicine.* (*McKnight's,* 12/1) ***Read more...***; (*BMC Medicine,* 11/26) ***Read more...***

* *Geripal* shares a podcast with *Endwell's* founder Shoshana Ungerleider, an "advocate for palliative and end of life care." *Endwell's* conference, "Take 10," will occur on December 10 and registration is complementary. The conference features an array of speakers from a variety of perspectives. Topics will include "palliative care, caregiving, geriatric medicine, and end-of-life care, all in light of what we can learn from the COVID crisis." The *Geripal* podcast and transcript are online now at the first link below. Registration for the conference is also located on this page, and more *Endwell* information is at the second link below. (*Geripal,* 12/3) ***Learn more...*** ; ***www.endwellproject.org***

* "The Lost Art of Dying," written by physician L.S. Dugdal, "draws wisdom from a late medieval text to transform our thoughts and fears about dying." The author is director of Columbia University's Center for Clinical Medical Ethics. When she saw directly the negative impact of providing counterproductive medical interventions at life's end, Dugdale began to look for better options. Informed by a 15th-century text, *ars moriendi,* Dugdale expanded on the learnings and shares them for a current perspective. *Kirkus* review calls the book "a wise and reassuring guide for confronting death. (*Kirkus,* 5/1) ***Read more...***

* According to a poll taken in November 2019, about 70% of the citizens in Massachusetts believe it should be legal for citizens to access medical-aid-in-dying. About 20% disagree, and another 10% are undecided. Now, state legislators are considering a new proposal that would legalize the practice. When legislators considered action in 2012, the Massachusetts Medical Society led the opposition to aid-in-dying. Now, the group is officially neutral. A *Boston Globe* editorial says the bill is one of the strictest in the nation. The editorial also sites evidence that such laws, like the one in Oregon, may actually increase physician and patient conversations about end-of-life care, as well as increase hospice utilization, and improve palliative care training of physicians. (*Boston Globe,* 12/6) ***Read more...***

* A group of 13 active and retired RNs share a *Guest viewpoint* for *Boston Globe.* The nurses support The End-of-Life Options Act, they say, because in their nearly 200 years of cumulative work with terminally ill, they have "seen too many leave this world in severe pain and often prolonged, unrelieved suffering." Though hospice and palliative care have made a lot of progress in caring for end-of-life patients, there are still unmet needs. In their experience, "a significant number of people—along with their loved ones and families who helplessly witness their suffering—would have wanted the option of a self-administered peaceful, painless death in their sleep by medication prescribed by their doctor, and at a time of their choosing." They note that both the *Massachusetts Medical Society* and the *American Nurses Association* have dropped opposition to medical aid in dying. (*Boston Globe,* 12/6) ***Read more...***

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