

Executive Summary

Availability of Hospice in Rural Pennsylvania

By:

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This research focused on the availability of palliative care – specifically hospice care – in rural Pennsylvania. Palliative care is defined as, “patient- and family-centered care that optimizes quality of life by anticipating, preventing, and treating suffering,” and is delivered “throughout the continuum of illness to address physical, intellectual, emotional, social, and spiritual needs, and to facilitate patient autonomy, access to information, and choice.”

Under this guiding definition, hospice represents a specific form of palliative care that is typically delivered within the last six months of life. There is a strong evidence base that demonstrates the benefits that hospice has on quality of life and cost of care at patients’ end of life. Despite these reported benefits, hospice remains underused, with substantial geographic variation in hospice availability and use rates.

This research analyzed data from the Centers for Medicare and Medicaid to describe the availability and use of hospice care throughout Pennsylvania. Specifically, the research: describes the distribution of hospices and the number of hospices providing care to rural Pennsylvania counties compared to urban counties; developed a descriptive profile of rural Pennsylvania’s hospice users and drew comparisons between rural and urban Pennsylvania counties; analyzed patient use information to project the number of future hospice users in Pennsylvania counties; and analyzed

information collected from semi-structured interviews with hospice and palliative care providers and administrators to understand the challenges and opportunities for key stakeholders – those individuals providing hospice and palliative care.

The analyses yielded a number of important findings:

- In Pennsylvania, there was a 4.7 percent decrease in the number of hospice providers from 2017 to 2019, with a 5.3 percent decrease in rural counties and a 4.5 percent decrease in urban counties.
- About 52 percent of rural hospices are non-profit, most of which are home health agency-based, and 48 percent are for-profit, most of which are free-standing. The facility types have implications for how care can be delivered – home-based hospice care requires substantial travel time to a patient’s place of residence for hospice staff, adding to overhead costs for hospices and delaying care for patients residing far from the hospice facility.
- Several rural counties are served by only a single hospice provider, and, in 15 counties, there is no hospice provider physically located in the county, further highlighting access issues related to travel time for hospice staff or patients/families.
- Generally, the research found lower hospice use rates for rural patients. However, the research indicated that in both rural and urban

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The Center for Rural Pennsylvania is a bipartisan, bicameral legislative agency that serves as a resource for rural policy within the Pennsylvania General Assembly. It was created in 1987 under Act

16, the Rural Revitalization Act, to promote and sustain the vitality of Pennsylvania’s rural and small communities.

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areas, patients who were female, white, age 85 or older, and Medicare Advantage beneficiaries had higher rates of hospice use.

- The research found that, from 2006 to 2016, Medicare hospice use rates increased in every county except two. Most counties saw double-digit percent increases.
- Assuming similar patterns of hospice use, the research found that there will be significant increases in future hospice demand, based on projections of an aging population in rural Pennsylvania counties. This is of particular importance to researchers and policymakers as the results of the study interviews suggest that rural Pennsylvania hospices are already experiencing substantial staffing and provider shortages. Therefore, these staffing and provider shortages may be exacerbated by increasing demand.
- Interviews with stakeholders – namely hospice care providers in rural Pennsylvania – validated hospice availability and use concerns related to travel time, and lack of choice for patients and families. They also highlighted issues related to using electronic health records in areas with poor internet or cell service.

The full report, *Availability of Hospice in Rural Pennsylvania*, is available on the Center's website at www.rural.palegislature.us.

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