

Support the Palliative Care and Hospice Education and Training Act

S. 2080/ H.R. 647

BACKGROUND

Rapid changes in the health care delivery system – among them a growing Medicare population, increased interest in and use of hospice care, an expanded number of palliative care programs associated with hospitals and health systems nationwide, and the Centers for Medicare & Medicaid Services' (CMS) activation of advance care planning codes under Medicare Part B – indicate that our nation's need for appropriately trained hospice and palliative care professionals will continue to grow at a fast pace.

As an example of this growth, in 1998 only 15 percent of hospitals with more than 50 beds had an inpatient palliative care program; by 2013 that number had grown to 67 percent of hospitals with more than 50 beds. Unfortunately, research indicates that only one quarter of these palliative care programs meet nationally-set staffing guidelines (for funded positions). Even when unfunded positions were included, only 39 percent of programs met the guidelines.

Studies indicate that patients receiving earlier (rather than later) exposure to palliative care had:

- Lower rates of inpatient admissions in the last 30 days of life (33 percent vs. 66 percent)
- Lower rates of ICU use in the last month of life (5 percent vs. 20 percent)
- Fewer emergency department visits in the last month of life (34 percent vs. 39 percent)
- A lower rate of inpatient death (15 percent vs. 34 percent)
- Fewer deaths within three days of hospital discharge (16 percent vs. 39 percent)
- Lower 30-day mortality rates post hospital admission (33 percent vs. 66 percent)

ISSUES/CONCERNS

In 2010, the American Academy of Hospice and Palliative Medicine estimated an existing need for 6,000 or more full time physician equivalents to serve current needs in hospice and palliative care programs. However, at maximum capacity, the current system would produce only about 5,300 new hospice and palliative medicine certified physicians over the next 20 years. This falls far short of the projected growing needs of the rapidly aging population and does not address the growing need for similarly trained non-physician professionals, including palliative nurses.

THIS LEGISLATION WOULD:

- Amend the Public Health Service Act to increase the number of permanent faculty in palliative care at accredited allopathic and osteopathic medical schools, nursing schools, social work schools, and other programs (including physician assistant education programs).
- Promote education and research in palliative care and hospice and support the development of faculty careers in academic palliative medicine.



For More Information

Contact NAHC Government Affairs at 202-547-7424