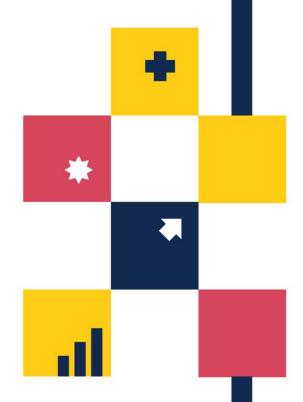
FY2022 Maryland Health Care Commission Hospice Utilization Report



Randolph S. Sergent, Esq. CHAIRMAN

Ben Steffen, Executive DirectorMaryland Health Care Commission





Randolph S. Sergent, Esq, Chairman Vice President and Deputy General Counsel CareFirst BlueCross BlueShield

Arun Bhandari, MD

Chesapeake Oncology Hematology Associates, PA

Hassanatu Blake, PhD, MPH, MBA

Director, Health Equity & Social Justice National Association of County & City Health Officials

Marcia Boyle, MS

Founder Immune Deficiency Foundation

Ken Buczynski, MD

Founder and Owner Wellspring Family Medicine

Tinisha Cheatham, MD

Physician in Chief of the Mid-Atlantic Permanente Medical Group

Karl Douglas, MBA

Director of Talent Development Brightview Senior Living

Danielle Stroughton-Duncan, PhD

Education Division Director COLA, Inc.

Joan L. Gelrud, RN, MSN, FACHE, CPHQ

Court Appointed Special Advocate for children removed from their homes for child abuse and neglect

Shante Gilmore, DrPH, MPH

Director, Health Equity Initiatives The Patient Advocate Foundation

Mark T. Jensen, Esq.

Partner Bowie & Jensen, LLC

Awawu Ojikutu, CRNP

Nurse Practitioner AIM Behavioral Health Services

Jovonni Spinner, PhD, MPH, CHES

CEO/Founder Beacon Public Health

Marcus L. Wang, Esq.

Co-Founder, President and General Manager ZytoGen Global Genetics Institute

i

Karrie M. Wood

Director of Business Development Community Bank of the Chesapeake



mhcc.maryland.gov

Table of Contents

Annual Maryland Health Care Commission Hospice Survey	1
FY2022 Hospice Utilization Report	1
Hospice Utilization	
Hospice Location of Services	
Hospice Non-Death Discharges	
Diagnoses at Admission	
Utilization by Race	
Race Trends Over Time	
African American Hospice Patients Served by Region Over Time	
Outreach to African Americans to Increase Hospice Use	



Annual Maryland Health Care Commission Hospice Survey

Each year, the Maryland Health Care Commission (MHCC) administers a survey to all licensed hospices in the state of Maryland. The survey is administered by the Center for Health Care Facilities Planning and Development at MHCC, and the data are analyzed by the Center for Quality Measurement and Reporting. Hospices are required to supply information about the patients they served and all spending.

Data sources include the FY2014 to FY2022 Hospice Surveys, the CMS Hospice Standard Analytic File, and the CMS Master Beneficiary Summary File. Hospice utilization tables are constructed each year by the Center for Quality Measurement and Reporting and posted on the main MHCC website and the Maryland Quality Reporting consumer website. The FY2022 data are accessible on the Maryland Health Care Commission's Public Use Data webpage.

FY2022 Hospice Utilization Report

The report includes the following graphs and charts:

- Graph: Hospice Use Rate by County, 2022
- Graph: Maryland Hospice Use Rates by County and Region, 2022
- Table: Hospice Patients Served in Maryland by Location of Services, FY2022
- Graph: Hospice Patients Served in Maryland by Location of Services, FY 2022
- Table: Hospice Patients: Non-Death Discharges by Maryland Region, FY2022
- Graph: Hospice Patients: Non-Death Discharges by Maryland Region, FY2022
- Graph: Hospice Patients Served in Maryland by Primary Diagnosis, FY2022
- Graph: Hospice Patients Served in Maryland by Race, FY2022
- Table: Hospice Patients Served in Maryland by Region and Race, FY2022
- Graph: Hospice Patients Served by Region and Race, FY2022
- Graph: Maryland Hospice Patients Served by Race, FY2014-FY2022
- Graph: African American Hospice Patients Served by Region, FY2014-FY2022



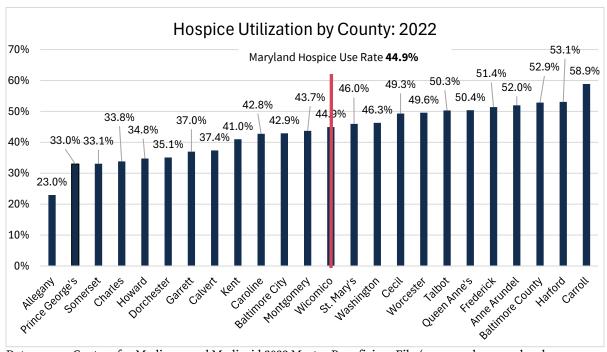
mhcc.maryland.gov

1

Hospice Utilization

In the United States, the hospice use rate was 50.6% in 2018, 51.6% in 2019, and decreased slightly in 2020 to 47.8% and again in 2021 to 47.3%. In 2020, the Maryland use rate was 41.2%, but the calculation method was changed for 2021 to align with the standard Medicare hospice utilization calculation. The hospice use rate for Maryland in 2021 was 43.2% and slightly higher in 2022 at 44.9%.

In 2022, the highest use rates were in Carroll (58.9%), Harford (53.1%), Baltimore County (52.9%), Anne Arundel (52.0%), and Frederick (51.4%) counties. The counties with the lowest use rates were Allegany (23.0%), Prince George's (33.0%), Somerset (33.1%), Charles (33.8%), and Howard (34.8%) counties.



Datasource: Centers for Medicare and Medicaid 2022 Master Beneficiary File (an annual person-level summary file that contains demographic entitlement and enrollment data for Medicare beneficiaries); 2022 Hospice Base Claims File (includes claims submitted by hospice providers, containing the level of hospice care received, terminal diagnosis, dates of service, reimbursement amount, and hospice provider number)

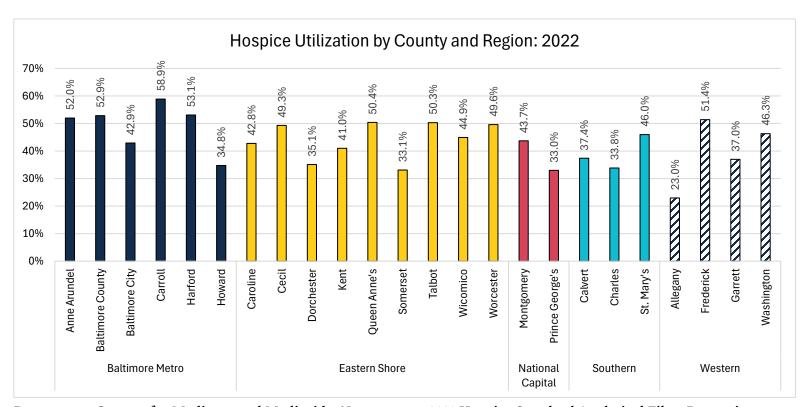


mhcc.maryland.gov

¹ Source: MedPac Report to the Congress: Medicare Payment Policy, March 2023.

² The hospice use rate was calculated by dividing the number of hospice deaths by the number of deaths of individuals aged 35 and older.

³ This hospice use rate is calculated by dividing Medicare hospice deaths by total Medicare deaths.



Datasource: Centers for Medicare and Medicaid – Numerator: 100% Hospice Standard Analytical Files; Denominator: Master Beneficiary Summary Files

Hospice Location of Services

The total number of patients served, not including carryovers,⁴ in FY2020 was 26,061, in FY2021 was 23,273, and in FY2022 was 24,619. The largest percentage of hospice patients were served in private homes (FY2020: 51.7%; FY2021: 56.1%; FY2022: 48.3%) while 24.1% (FY2022) were served in general or respite care⁵ situations (FY2020: 21.9%; FY2021: 21.1%). Additionally, 22.9% (FY2022) were served in skilled nursing or assisted living facilities (FY2020: 23.5%: FY2021: 21%). Very few, 4.7% (FY2022), were served in residential hospices⁶ (FY2020: 2.9%; FY2021: 1.8%).

⁴ The number of patients carried over from previous years by county.

⁵ General or respite care patients are served in general inpatient units or hospitals.

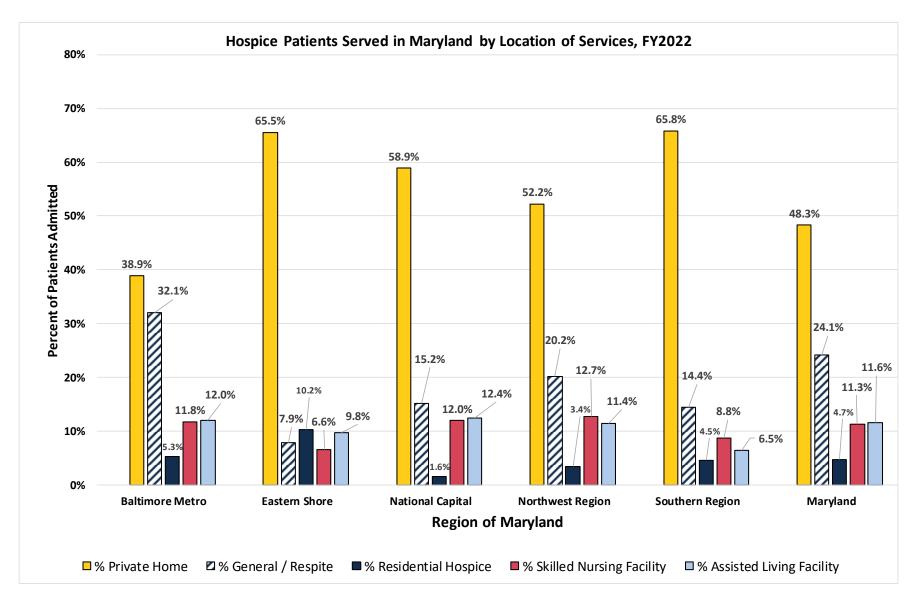
⁶ Residential hospice patients are served in Hospice Houses which provide a routine/continuous level of care only and exclude nursing homes or assisted living facility settings.

Hospice Patients Served in Maryland by Location of Services, FY2022

							%	Skilled	% Skilled		
	Total Patients	Private	% Private	General /	% General /	Residential	Residential	Nursing	Nursing	Assisted	% Assisted
Region/Jurisdiction	Served	Home	Home	Respite	Respite	Hospice	Hospice	Facility	Facility	Living Facility	Living Facility
Baltimore Metro	13,323	5,177	38.9%	4,271	32.1%	708	5.3%	1,570	11.8%	1,597	12.0%
Anne Arundel	2,399	1,028	42.9%	763	31.8%	26	1.1%	180	7.5%	402	16.8%
Baltimore County	4,930	1,779	36.1%	1,546	31.4%	376	7.6%	738	15.0%	491	10.0%
Baltimore City	2,683	842	31.4%	1,197	44.6%	183	6.8%	356	13.3%	105	3.9%
Carroll	1,168	491	42.0%	340	29.1%	10	0.9%	171	14.6%	156	13.4%
Harford	1,057	563	53.3%	189	17.9%	84	7.9%	40	3.8%	181	17.1%
Howard	1,086	474	43.6%	236	21.7%	29	2.7%	85	7.8%	262	24.1%
Eastern Shore	2,131	1,396	65.5%	168	7.9%	218	10.2%	141	6.6%	208	9.8%
Caroline	163	94	57.7%	2	1.2%	11	6.7%	22	13.5%	34	20.9%
Cecil	286	145	50.7%	42	14.7%	63	22.0%	33	11.5%	3	1.0%
Dorchester	126	115	91.3%	6	4.8%	3	2.4%	_	0.0%	2	1.6%
Kent	92	58	63.0%	3	3.3%	6	6.5%	15	16.3%	10	10.9%
Queen Anne's	252	133	52.8%	17	6.7%	87	34.5%	2	0.8%	13	5.2%
Somerset	113	80	70.8%	18	15.9%		0.0%	15	13.3%	_	0.0%
Talbot	255	143	56.1%	6	2.4%	40	15.7%	19	7.5%	47	18.4%
Wicomico	516	387	75.0%	49	9.5%	_	0.0%	20	3.9%	60	11.6%
Worcester	328	241	73.5%	25	7.6%	8	2.4%	15	4.6%	39	11.9%
National Capital	5,582	3,288	58.9%	846	15.2%	87	1.6%	669	12.0%	692	12.4%
Montgomery	3,430	1,919	55.9%	588	17.1%	13	0.4%	477	13.9%	433	12.6%
Prince George's	2,152	1,369	63.6%	258	12.0%	74	3.4%	192	8.9%	259	12.0%
Northwest Region	2,395	1,251	52.2%	484	20.2%	82	3.4%	305	12.7%	273	11.4%
Allegany	207	176	85.0%	1	0.5%	_	0.0%	19	9.2%	11	5.3%
Frederick	1,142	588	51.5%	194	17.0%	82	7.2%	128	11.2%	150	13.1%
Garrett	153	104	68.0%	_	0.0%	_	0.0%	49	32.0%	_	0.0%
Washington	893	383	42.9%	289	32.4%	_	0.0%	109	12.2%	112	12.5%
Southern Region	1,188	782	65.8%	171	14.4%	54	4.5%	104	8.8%	77	6.5%
Calvert	251	198	78.9%	6	2.4%	_	0.0%	29	11.6%	18	7.2%
Charles	506	331	65.4%	113	22.3%	_	0.0%	10	2.0%	52	10.3%
St. Mary's	431	253	58.7%	52	12.1%	54	12.5%	65	15.1%	7	1.6%
Maryland	24,619	11,894	48.3%	5,940	24.1%	1,149	4.7%	2,789	11.3%	2,847	11.6%

Datasource: MHCC Hospice Survey 2022. Data collection period FY2022. Patient Volume by County.





Datasource: MHCC Hospice Survey 2022. Data collection period FY2022. Patient Volume by County.



mhcc.maryland.gov

Hospice Non-Death Discharges

In FY2022 3,036 patients were classified as non-death discharges. The most common reason for discharge was "discharged by hospice" ⁷ at 48.7% followed by "withdrew from hospice" ⁸ at 32.3%. Also, patients were discharged for "other" reasons (7.8%), and 11.2% transferred to another hospice. ^{9,10}

⁷ Discharged by Hospice includes patients not recertified for hospice because no longer terminally ill; patients who moved out of service area but did not transfer to another hospice; and patients discharged for cause.

⁸ Withdrew includes patients who revoked the Medicare hospice benefit, those who desired treatment inconsistent with the hospice plan of care, and patients who refused hospice.

⁹ Transferred to another hospice includes patients who transferred to another hospice without interruption of their Medicare hospice benefit.

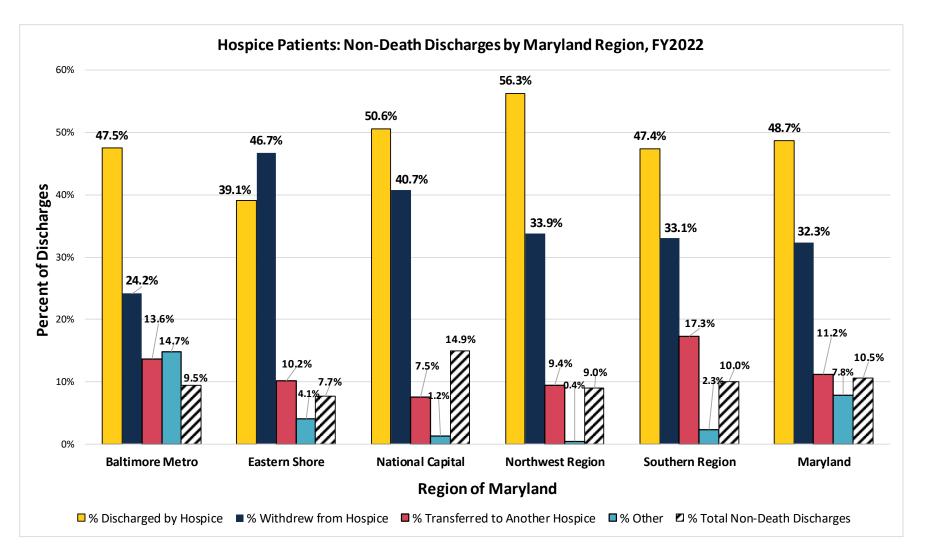
¹⁰ An error was discovered in earlier Non-Death Discharges data; therefore, comparisons to previous years cannot be made.

Hospice Patients: Non-Death Discharges by Region, FY2022

				Withdrew	% Withdrew	Transferred	% Transferred			Total	% Total
Region/Jurisdiction	Total Patients	Discharged	% Discharged	from	from	to Another	to Another			Non-Death	Non-Death
	Served	by Hospice	by Hospice	Hospice	Hospice	Hospice	Hospice	Other	% Other	Discharges	Discharges
Baltimore Metro	13,323	690	47.5%	351	24.2%	197	13.6%	214	14.7%	1,452	10.9%
Anne Arundel	2,399	142	55.0%	80	31.0%	30	11.6%	6	2.3%	258	10.8%
Baltimore County	4,930	268	44.2%	147	24.2%	106	17.5%	86	14.2%	607	12.3%
Baltimore City	2,683	125	45.8%	59	21.6%	41	15.0%	48	17.6%	273	10.2%
Carroll	1,168	33	51.6%	23	35.9%	2	3.1%	6	9.4%	64	5.5%
Harford	1,057	38	38.0%	22	22.0%	9	9.0%	31	31.0%	100	9.5%
Howard	1,086	84	56.0%	20	13.3%	9	6.0%	37	24.7%	150	13.8%
Eastern Shore	2,131	77	39.1%	92	46.7%	20	10.2%	8	4.1%	197	9.2%
Caroline	163	5	41.7%	6	50.0%	1	8.3%	0	0.0%	12	7.4%
Cecil	286	9	27.3%	10	30.3%	7	21.2%	7	21.2%	33	11.5%
Dorchester	126	6	54.5%	2	18.2%	3	27.3%	0	0.0%	11	8.7%
Kent	92	9	64.3%	4	28.6%	1	7.1%	0	0.0%	14	15.2%
Queen Anne's	252	9	40.9%	10	45.5%	3	13.6%	0	0.0%	22	8.7%
Somerset	113	7	43.8%	9	56.3%	0	0.0%	0	0.0%	16	14.2%
Talbot	255	7	53.8%	5	38.5%	0	0.0%	1	7.7%	13	5.1%
Wicomico	516	12	25.5%	33	70.2%	2	4.3%	0	0.0%	47	9.1%
Worcester	328	13	44.8%	13	44.8%	3	10.3%	0	0.0%	29	8.8%
National Capital	5,582	506	50.6%	407	40.7%	75	7.5%	12	1.2%	1,000	17.9%
Montgomery	3,430	278	54.9%	190	37.5%	39	7.7%	0	0.0%	506	14.8%
Prince George's	2,152	228	46.2%	217	43.9%	36	7.3%	12	2.4%	494	23.0%
Northwest Region	2,395	143	56.3%	86	33.9%	24	9.4%	1	0.4%	254	10.6%
Allegany	207	18	78.3%	3	13.0%	2	8.7%	0	0.0%	23	11.1%
Frederick	1,142	49	46.2%	39	36.8%	17	16.0%	1	0.9%	106	9.3%
Garrett	153	8	42.1%	11	57.9%	0	0.0%	0	0.0%	19	12.4%
Washington	893	68	64.2%	33	31.1%	5	4.7%	0	0.0%	106	11.9%
Southern Region	1,188	63	47.4%	44	33.1%	23	17.3%	3	2.3%	133	11.2%
Calvert	251	14	56.0%	4	16.0%	4	16.0%	3	12.0%	25	10.0%
Charles	506	28	37.3%	33	44.0%	14	18.7%	0	0.0%	75	14.8%
St. Mary's	431	21	63.6%	7	21.2%	5	15.2%	0	0.0%	33	7.7%
Maryland	24,619	1,479	48.7%	980	32.3%	339	11.2%	238	7.8%	3,036	12.3%

Datasource: MHCC Hospice Survey 2022. Data collection period FY2022. Patient Volume by County.



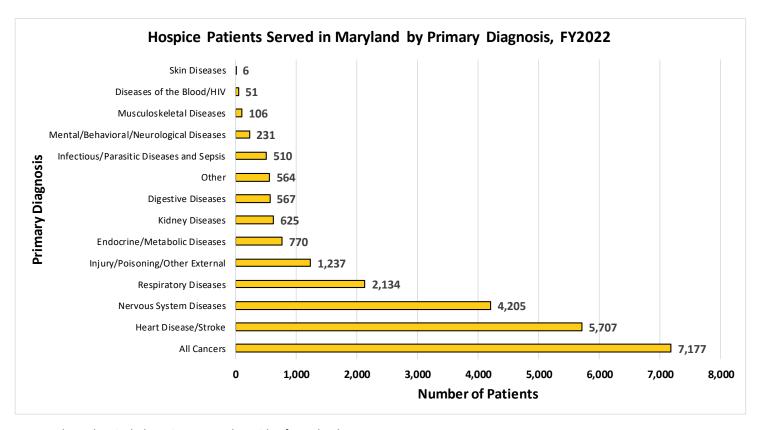


Datasource: MHCC Hospice Survey 2022. Data collection period FY2022. Patient Volume by County.



Diagnoses at Admission

For FY2020, FY2021, and FY2022 the most common diagnosis was cancer, followed by heart disease or stroke, and nervous system diseases. Likewise, the least common diagnosis was skin diseases.



Notes: These data include patients served outside of Maryland.

These data include only patients admitted that year, no carryovers.

Numbers represent primary illness diagnosed at admission.

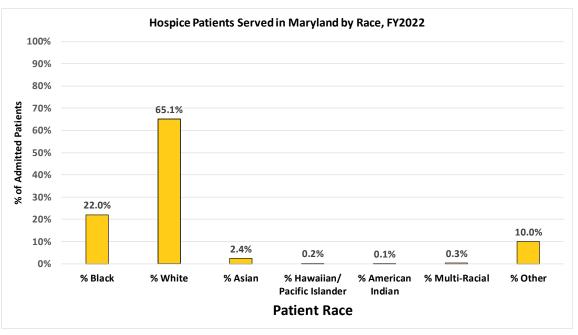
Datasource: MHCC Hospice Survey 2022. Data collection period FY2022. Patients by Primary Diagnosis.



Utilization by Race

Over the years, most patients served have been white (FY2020: 68.5%; FY2021: 66.6%; FY2022: 65.1%) followed by African American (FY2020: 20.8%; FY2021: 19.1%; FY2022: 22.0%). Percentages of Asian patients have remained low (FY2020: 2.4%; FY2021: 2.0%; FY2022: 2.4%). Patients who were identified as "multi-racial" or "other" increased from FY2020 (8.0%) to FY2021 (11.7%) and then decreased again in FY2022 (10.3%). African American patients continue to be underrepresented in the Eastern Shore (FY 2020: 11.0%; FY2021: 12.9%; FY2022: 11.5%) and Northwest (FY2020: 4.7%; FY2021: 3.8%; FY2022: 4.9%) regions.

For comparison purposes, the US Census reports the racial composition of Maryland as 58% White, 31% Black, 7% Asian, 0% Hawaiian/Pacific Islander, 0% American Indian, and 3% Multi-Racial. The US Census does not report an "other" category.



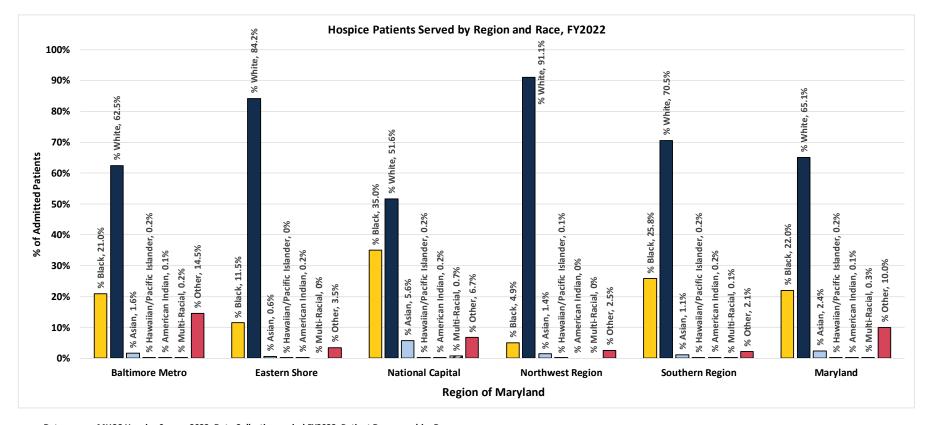
Data source: MHCC Hospice Survey 2022. Data Collection period FY2022. Patient Demographics Race.

Hospice Patients Served by Region and Race, FY2022

									,		0/				
	Total							Hawaiian/		• •	%	20.11	0/ 84 11:		
	Patients		0/ 51 1		0/11/11			Pacific	% Hawaiian/	American	American	Multi-	% Multi-		24 211
Region and Jurisdiction	Served	Black	% Black	White	% White	Asian	% Asian	Islander	Pacific Islander	Indian	Indian	Racial	Racial	Other	% Other
Baltimore Metro	13,323	2,794	21.0%	8,321	62.5%	212	1.6%	20	0.2%	14	0.1%	26	0.2%	1,936	14.5%
Anne Arundel	2,399	310	12.9%	1,853	77.2%	33	1.4%	7	0.3%		0.0%	9	0.4%	187	7.8%
Baltimore	4,930	981	19.9%	2,983	60.5%	60	1.2%	3	0.1%	7	0.1%	2	0.04%	894	18.1%
Baltimore City	2,683	1,239	46.2%	791	29.5%	18	0.7%	2	0.1%	2	0.1%	8	0.3%	623	23.2%
Carroll	1,168	31	2.7%	1,088	93.2%	9	0.8%	4	0.3%	2	0.2%	7	0.6%	27	2.3%
Harford	1,057	79	7.5%	916	86.7%	13	1.2%	2	0.2%	_	0.0%		0.0%	47	4.4%
Howard	1,086	154	14.2%	690	63.5%	79	7.3%	2	0.2%	3	0.3%		0.0%	158	14.5%
Eastern Shore	2,131	244	11.5%	1,795	84.2%	13	0.6%	1	0.0%	4	0.2%	0	0.0%	74	3.5%
Caroline	163	15	9.2%	144	88.3%	2	1.2%	_	0.0%	1	0.6%	_	0.0%	1	0.6%
Cecil	286	8	2.8%	217	75.9%	1	0.3%		0.0%	1	0.3%		0.0%	59	20.6%
Dorchester	126	25	19.8%	98	77.8%	1	0.8%		0.0%	1	0.8%		0.0%	1	0.8%
Kent	92	9	9.8%	83	90.2%	_	0.0%	_	0.0%	_	0.0%	_	0.0%	_	0.0%
Queen Anne's	252	23	9.1%	227	90.1%	1	0.4%		0.0%	1	0.4%		0.0%	_	0.0%
Somerset	113	20	17.7%	91	80.5%	_	0.0%		0.0%		0.0%		0.0%	2	1.8%
Talbot	255	18	7.1%	235	92.2%	_	0.0%		0.0%		0.0%		0.0%	2	0.8%
Wicomico	516	92	17.8%	412	79.8%	4	0.8%	1	0.2%		0.0%		0.0%	7	1.4%
Worcester	328	34	10.4%	288	87.8%	4	1.2%		0.0%		0.0%		0.0%	2	0.6%
National Capital	5,582	1,955	35.0%	2,881	51.6%	313	5.6%	11	0.2%	9	0.2%	41	0.7%	372	6.7%
Montgomery	3,430	561	16.4%	2,424	70.7%	265	7.7%	6	0.2%	7	0.2%	35	1.0%	132	3.8%
Prince George's	2,152	1,394	64.8%	457	21.2%	48	2.2%	5	0.2%	2	0.1%	6	0.3%	240	11.2%
Northwest Region	2,395	118	4.9%	2,181	91.1%	33	1.4%	3	0.1%	0	0.0%	0	0.0%	60	2.5%
Alleghany	207	3	1.4%	204	98.6%	_	0.0%	_	0.0%	_	0.0%	_	0.0%	_	0.0%
Frederick	1,142	77	6.7%	996	87.2%	26	2.3%	1	0.1%	_	0.0%	_	0.0%	42	3.7%
Garrett	153	_	0.0%	153	100.0%	_	0.0%	_	0.0%	_	0.0%	_	0.0%	_	0.0%
Washington	893	38	4.3%	828	92.7%	7	0.8%	2	0.2%	_	0.0%	_	0.0%	18	2.0%
Southern Region	1,188	307	25.8%	838	70.5%	13	1.1%	2	0.2%	2	0.2%	1	0.1%	25	2.1%
Calvert	251	27	10.8%	216	86.1%	4	1.6%	_	0.0%	_	0.0%	_	0.0%	4	1.6%
Charles	506	206	40.7%	271	53.6%	6	1.2%	2	0.4%	_	0.0%	1	0.2%	20	4.0%
St. Mary's	431	74	17.2%	351	81.4%	3	0.7%	_	0.0%	2	0.5%	_	0.0%	1	0.2%
Maryland	24,619	5,418	22.0%	16,016	65.1%	584	2.4%	37	0.2%	29	0.1%	68	0.3%	2,467	10.0%

Data source: MHCC Hospice Survey 2022. Data Collection period FY2022. Patient Demographics Race.



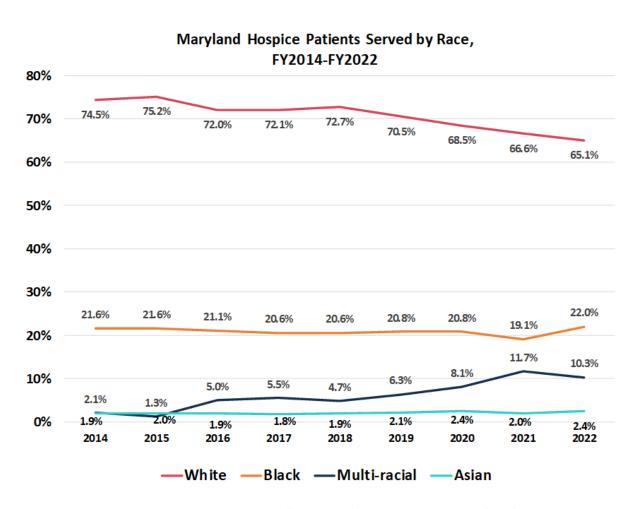


Data source: MHCC Hospice Survey 2022. Data Collection period FY2022. Patient Demographics Race.



Race Trends Over Time

For the state of Maryland, African American hospice use remained stable from FY2014 to FY2020, ranging from a high of 21.6% in FY2014 and FY2015 to a low of 19.1% in FY2021. FY2022 represents a new high for African American hospice use rates. Rates of use have steadily declined for white Marylanders with rates decreasing from 74.5% in FY2014 to 65.1% in FY2022. Also, the rates for those classified as "multi-racial" or "other" have steadily increased from 2.1% in FY2014 to 11.7% in FY2021 with a slight decrease to 10.3% in FY2022. Use rates for Asians have remained steady from FY2014 to FY2021.

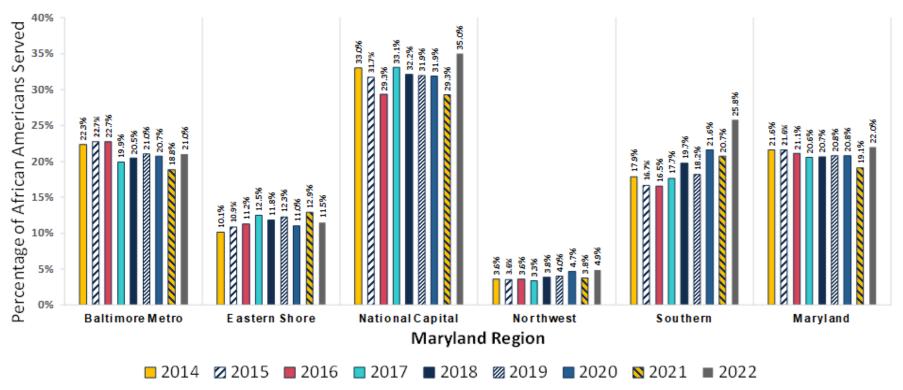


Data source: MHCC Hospice Survey 2014-2022. Data collection period FY2014-FY2022. Patient Volume by County.

African American Hospice Patients Served by Region Over Time

Rates of hospice use have remained steady for African Americans in Maryland but have fluctuated slightly over the years FY2014 to FY2022 when rates are examined by region. The National Capital Region consistently reports the highest hospice use rates by African Americans.

African American Hospice Patients Served by Region, FY2014-FY2022



Datasource: MHCC Hospice Survey 2014-2022. Data collection period FY2014-FY2022. Patient Volume by County.



Outreach to African Americans to Increase Hospice Use

Outreach to Marylanders who are African American has been a central goal for the Maryland Health Care Commission. From 2013-2015, the Commission conducted education and outreach to increase the use of hospice by minority populations. Additionally, in 2020-2022, the Center for Quality Measurement and Reporting developed multiple hospice brochures and infographics to increase minorities' awareness of hospice benefits. Staff were able to share the hospice brochure with beauty salons and barbershops in communities with high minority populations. Hospice materials were distributed to county libraries and hospital discharge planners. In the past year there were over 30 postings of hospice infographics on social media platforms including Facebook™, Instagram™ and NextDoor™. To promote public awareness of long-term care resources including hospice, staff attend large community events including the Baltimore County Department of Aging Power of Age Expo and the Harford County Senior Expo, as well as participating in smaller community events throughout the year.