
HOSPICE NEWS NETWORK

Reports on recent media to inform hospice, palliative care, and policy leaders

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A Service of State Hospice Organizations

HOSPICE NOTES

~ **“Where Hospices’ Documentation Technology Investments Are Heading” explores the increasing focus on AI and machine learning in hospice documentation technology.**

According to the Hospice News Market Intelligence Report, 39% of respondents consider AI and machine learning capabilities in documentation software as ‘very important.’ These technologies aim to improve access for underserved populations and enhance advance care planning.

However, financial constraints and software limitations pose significant barriers. The report highlights the need for improved clinical usability and regulatory compliance features. (*Hospice News*, 10/16, hospicenews.com/2025/10/16/where-hospices-documentation-technology-investments-are-heading)

~ **“Hospices Watchful for Payment, Regulatory Transformation” discusses the evolving landscape of hospice reimbursement and regulatory changes.** The article highlights insights from industry leaders, emphasizing the importance of understanding CMS updates beyond hospice-specific rules. James Dismond of MiraSol Health notes that service diversification, such as MiraSol Health’s expansion into palliative and behavioral health, is crucial for sustainability. The end of the Medicare Advantage hospice carve-in and its implications are also discussed, with concerns about maintaining consistent quality and scope of services. (*Hospice News*, 11/17, hospicenews.com/2025/11/17/hospices-watchful-for-payment-regulatory-transformation)

~ **“CMS Announces New Hospice Tax Fraud Initiative” details a new effort by the U.S. Centers for Medicare & Medicaid Services (CMS) to combat fraudulent billing and tax evasion in the hospice sector.** The Fraud Tax Project aims to enhance program integrity by partnering with the U.S. Department of Health & Human Services and state tax authorities to identify and prosecute fraudulent operators. CMS Administrator Dr. Mehmet Oz emphasized that tax fraud cases offer a more direct path to enforcement, allowing for swift revocation of billing privileges. This initiative responds to increasing concerns over program integrity, particularly in states like California and Texas, where fraudulent activities have been rampant. (*Hospice News*, 11/26, hospicenews.com/2025/11/26/cms-announces-new-hospice-tax-fraud-initiative)

~ **“Compassus Exec: ‘Don’t Rush’ Hospice AI Innovation” discusses the cautious approach to integrating AI in hospice care.** Evan Kramer, Compassus’ SVP of innovation, emphasizes the need for careful consideration of AI’s impacts, despite its benefits in reducing documentation errors and improving clinical capacity. He warns against automating inefficient processes, advocating for a data-driven approach to enhance care quality. Using the message of “first optimize” and “then automate,” Compassus has seen a 60-70% reduction in administrative tasks

for clinicians, improving work-life balance and patient satisfaction. (*Hospice News*, 12/02, hospicenews.com/2025/12/02/compassus-exec-dont-rush-hospice-ai-innovation)

~ **“AGG Files Amicus Brief on Behalf of the National Alliance for Care at Home and AAHPM” discusses a legal challenge involving hospice Medicare reimbursement claims.** The brief, filed by Arnall Golden Gregory LLP, argues that an Administrative Law Judge (ALJ) improperly denied claims by substituting his opinion for that of certifying physicians regarding patients’ terminal prognoses. The National Alliance for Care at Home and AAHPM urge the court to reverse the ALJ’s decision, emphasizing the need for deference to clinical judgment in hospice eligibility. This case highlights significant policy implications for the hospice industry. (*Arnall Golden Gregory LLP*, 11/20, jdsupra.com/legalnews/agg-files-amicus-brief-on-behalf-of-the-3608443)

~ **“Hospice board members file suit against Baxter Health over alleged bylaw violations” details a legal dispute involving the Board of Directors of Hospice of the Ozarks and Baxter Health.** The lawsuit claims Baxter Health appointed 14 new board members to the Hospice Board without following proper procedures, allegedly to seize control of Hospice’s assets. The suit seeks to nullify decisions made by these new members, arguing their appointment violated the 2019 bylaws. Baxter Health, however, asserts its actions were to protect the hospice’s mission and ensure operational continuity. (*KTLO*, 11/22, ktlo.com)

~ **“Fake Nurse With Notorious Kenyan Fraud Past Arrested After Working at U.S. Hospice” highlights the arrest of Christine Nyambura Muturi for using a stolen nursing license to work in hospice care.** Muturi, who falsely claimed to be a registered nurse, was employed at Northern Arizona Hospice and later at Golden Rose Hospice. Her deception was uncovered when it was found that the nursing license she used was issued in 1980, predating her birth. This case, says an article in *Nurse.org*, underscores the need for healthcare organizations to strengthen hiring processes to prevent similar incidents. (*Nurse.org*, 12/2, nurse.org/news/fake-nurse-christine-muturi)

~ **“An Explicit Live Discharge Protocol for Hospice-Initiated Live Discharges” addresses the need for standardized guidelines to manage hospice-initiated discharges effectively.** These discharges, unlike voluntary disenrollments, often occur without adequate preparation, leaving patients and caregivers unprepared for post-hospice needs. The article introduces a live discharge protocol (LDP) designed to ensure continuity of care by providing a structured framework for hospice clinicians. This protocol aims to facilitate compassionate and coordinated care transitions for patients no longer eligible for hospice services. (*J Am Med Dir Assoc*, 11/13, <https://pubmed.ncbi.nlm.nih.gov/41183790/>)

~ **“VITAS Hospice Services Data Breach Investigation” reports on a recent data breach involving VITAS Hospice Services, LLC.** The breach, discovered on October 24, 2025, involved unauthorized access to sensitive personal information through a compromised vendor account. VITAS is currently investigating the incident to determine the extent of the data compromised and has begun notifying affected individuals, offering 24 months of complimentary credit monitoring services. The breach highlights the importance of data security in healthcare settings. (*Strauss Borrelli PLLC*, 11/21, straussborrelli.com)

~ **“Arrive Where We First Began, A Strategic Path Forward with Dr. Ira Byock” explores the evolving role of Hospice and Palliative Care, particularly during the holiday season.**

Byock emphasizes the need to reframe the narrative around Hospice, focusing on life completion and strategic planning for the future. The discussion, on a TCNTalks podcast, highlights the importance of equity and inclusivity in Palliative Care, addressing barriers to quality care and the role of health plans. Byock, who speaks with Chris Comeaux and Cordt Kassner, advocates for a compassionate approach to dying, celebrating life while acknowledging mortality's challenges. (*Teleios Collaborative Network*, 12/3, teleioscn.org)

~ **“Geisinger medical students accompany Scranton, Wilkes-Barre Allied hospice patients with No One Dies Alone program” highlights a compassionate initiative where medical students provide companionship to hospice patients.** The program, a collaboration between Geisinger Commonwealth School of Medicine and Allied Services Hospice, ensures that patients are not alone in their final moments. Tommy Ahlin, a student inspired by his grandfather's solitary passing, emphasizes the program's value: “to be there for families when they do have to step away.” This initiative not only supports patients but also enriches the students' medical education. (*WVIA*, 11/23, wvia.org)

~ **“As Oregon Mulls Private Equity Hospice Merger, Lawmakers Hear of Grim Financial Logic” discusses the implications of a potential takeover of Oregon's largest home hospice network by a for-profit company.** The article highlights concerns about the financial motivations behind hospice care, noting that “patients that typically die within 7 to 14 days of being in hospice are not as profitable as those that have longer lengths of stay.” This merger, involving Compassus and Providence Oregon, raises questions about the impact of private equity on hospice care quality, as nonprofit hospices, reports the article, reportedly perform better on key metrics. (*Willamette Week*, 12/03, [wweek.com/news/health/2025/12/03/as-oregon-mulls-private-equity-hospice-merger-lawmakers-hear-of-grim-financial-logic/](https://www.wweek.com/news/health/2025/12/03/as-oregon-mulls-private-equity-hospice-merger-lawmakers-hear-of-grim-financial-logic/))

PALLIATIVE CARE NOTES

~ **“Six Pillars of Care for Palliative Care Providers with Meina Dubetz RN” introduces a training course designed to prepare professionals for the emotional and spiritual demands of palliative care.** Meina Dubetz, a registered nurse and author, discusses her course titled ‘6 Pillars of Care,’ which aims to equip caregivers with essential skills for handling grief and end-of-life situations. The podcast highlights the importance of understanding personal histories with death and the need for healthcare providers to share their struggles with peers. (*End of Life University*, 12/01, eolupodcast.com)

~ **“CAPC's Andrew Esch: Palliative Care Delivery ‘Maturing into Innovation’” discusses the evolution of palliative care delivery, emphasizing its growing recognition as essential in healthcare.** Dr. Andrew Esch, departing director of palliative care program development at CAPC, highlights the shift from proving the importance of palliative care to enhancing its delivery across various settings. He notes the integration of interdisciplinary teams and technology, stating, “Palliative care isn't just for the last weeks of life, it's about helping people live well throughout serious illness.” Esch plans to return to direct clinical care, focusing on hospice and palliative care work. (*Hospice News*, 11/19, hospicenews.com/2025/11/19/capcs-andrew-esch-palliative-care-delivery-maturing-into-innovation/)

~ **“States' Promising Practices to Improve Care of Serious Illness” highlights how states are enhancing palliative care through diverse policy measures.** The report from the Center to

Advance Palliative Care outlines state efforts like legislation, Medicaid innovation, and workforce development to improve access and quality. Despite palliative care's standardization in large hospitals, access gaps persist in for-profit and rural hospitals. Kansas and Minnesota are noted for their strategic initiatives, such as Kansas's telehealth expansion and Minnesota's comprehensive aging support system. These efforts aim to ensure equitable access to palliative care. (*National Academy for State Health Policy*, 11/17, nashp.org/states-promising-practices-to-improve-care-of-serious-illness)

~ **“He built a nursing home empire despite state investigations. Now, lawsuits are piling up” highlights the legal challenges faced by Shlomo Rechnitz’s nursing home chain in California.** The article details multiple lawsuits alleging neglect, abuse, and negligence, including cases of patient rights violations and COVID-19 related deaths. Despite past state scrutiny and attempts to block his acquisitions, Rechnitz's facilities continue to operate, raising concerns about regulatory oversight. Elder care advocates argue for greater accountability from state regulators to protect vulnerable residents. (*CalMatters*, 11/20, calmatters.org)

~ **“The Chaplain and the Doctor: A Podcast with Betty Clark and Jessica Zitter” explores the intersection of personal narratives and biases in healthcare through a documentary film.** The podcast episode features Betty Clark, a chaplain, and Dr. Jessica Zitter, a physician and filmmaker, discussing how personal stories and biases influence patient care and professional relationships. The film highlights the essential role of storytelling and chaplaincy in fostering empathy and understanding within healthcare teams. The episode underscores the importance of recognizing and addressing biases to improve patient care and team dynamics. (*GeriPal*, 11/20, geripal.org/the-chaplain-and-the-doctor-a-podcast-with-betty-clark-and-jessica-zitter)

END-OF-LIFE NOTES

~ **The important role of the hospitalist in addressing needs at end of life is explore in a Medscape article.** Karen Wyatt, MD, California-based retired family and hospice physician and host of the “End-of-Life University” podcast, and Kristina Newport, MD, chief medical officer at the American Academy of Hospice and Palliative Medicine, encourage hospitalists to directly address these needs with patients, and provide tips to do so. They note that doctors often feel unprepared to talk with patients about end-of-life care, even though many people die in the hospital and would benefit from honest, compassionate conversations. The two say that reframing the goal of care—from prolonging life at all costs to relieving suffering and improving quality of life—helps clinicians navigate these discussions. Understanding cultural differences, involving families, and bringing in palliative care teams early all improve decision-making and patient comfort. (*Medscape*, 12/2, <https://www.medscape.com/viewarticle/approaching-end-life-discussions-hospital-patients-2025a1000xnu>)

~ **“End-of-Life Palliative Care: Role of the Family Physician” discusses the critical role family physicians play in managing end-of-life care by balancing treatment effectiveness with patient values.** The article emphasizes the importance of evaluating symptoms, distinguishing between distressing symptoms and common end-of-life changes, and using opioids and adjuvant medications for severe pain and dyspnea. It also highlights the need for early recognition of delirium and mood disturbances, and the prevention of constipation. The

article underscores the necessity of a person-centered approach to improve quality of life for aging and seriously ill patients. (*American Family Physician*, November 2025, aafp.org/pubs/afp/issues/2025/1100/end-of-life-palliative-care.html)

~ **“Growing Demand for Death Doula Training Signals a Shift in How Americans Approach End-of-Life Care”** highlights the increasing role of death doulas in providing compassionate end-of-life support. Membership in the National End-of-Life Doula Alliance has surged by over 500% in four years, reflecting a cultural shift towards recognizing death as a natural part of life. Rachel Cao of the Conscious Dying Collective notes that this trend is driven by a desire for personalized, holistic care. The growth in training programs is helping doulas offer emotional, practical, and spiritual support, fostering community conversations around death and grief. (*EIN Presswire*, 11/26, cbs42.com)

~ **“How Much Power Should We Give AI In End-Of-Life Decisions?”** explores the emerging role of AI in end-of-life care, questioning its potential to predict patient preferences more accurately than human surrogates. Two studies highlight AI’s capabilities: one showed a personalized AI model predicting patient preferences with 71% accuracy, while another demonstrated increased end-of-life planning when AI predictions were shared with clinicians. Despite these advancements, the article stresses the importance of human involvement, cautioning against over-reliance on AI and emphasizing the need for AI to complement human decision-making. (*Forbes*, 11/20, forbes.com)

~ **“More People Are Caring for Dying Loved Ones at Home. A New Orleans Nonprofit Is Showing Them How”** highlights the growing trend of home-based end-of-life care and the role of nonprofits in supporting caregivers. The article discusses Wake, a New Orleans nonprofit, which offers free workshops to equip family caregivers with essential skills for end-of-life care. With the rise in demand for at-home hospice care, largely due to the pandemic, organizations like Wake are crucial in filling the training gap. The article also touches on the potential impact of Medicaid cuts on at-home hospice affordability. (*KFF Health News*, 11/25, kffhealthnews.org)

~ **The New York State Bar Association (NYSBA) has initiated a letter writing campaign to urge Governor Hochul to sign the Medical Aid in Dying Act into law.** This legislation would allow terminally ill, mentally capable adults with a prognosis of six months or less to request life-ending medication. NYSBA President Kathleen Sweet emphasized that the act provides dignity and autonomy for those facing terminal illness, ensuring a full range of end-of-life options. The association has been a strong advocate for the bill, which aligns with their legislative priorities for 2025. (*New York State Bar Association*, 11/21, nysba.org)

~ **“Above All, Listen: Studying the Experience of Death”** explores the importance of listening to the dying to deepen our understanding of their experiences. The article emphasizes the need for systematic curiosity and careful documentation of what dying individuals report, without immediate judgment or interpretation. It highlights the missed opportunities in understanding unique experiences, such as those of composer Sergei Rachmaninoff, who reported hearing beautiful music on his deathbed. The piece advocates for accepting and documenting these experiences to enrich our understanding of consciousness at life’s end. (*Psychology Today*, 11/15, psychologytoday.com)

~ **The article “Allowing Natural Death in End-of-Life Decision-Making” explores the impact of the term ‘Allow Natural Death’ (AND) compared to ‘Do Not Resuscitate’ (DNR) in end-of-life care discussions.** The review of empirical literature reveals that while AND is perceived as more acceptable and family-centered, it remains ambiguous among healthcare providers and surrogate decision-makers. The article suggests that AND may enhance communication and emotional healing, but further research is needed to understand its impact on real-world decision-making. (*Geriatric Nursing*, 11/01, <https://www.sciencedirect.com/science/article/abs/pii/S0197457225004689>)

~ **“Americans are going into debt over death. Here are affordability tips.” highlights the financial burden many face after a loved one’s passing, with 37% of Americans incurring debt for end-of-life expenses.** The article, based on a Debt.com survey, reveals that 59% of those in debt used credit cards, and 4 in 10 Americans cannot cover funeral costs without borrowing. The median funeral cost was \$7,848 in 2023, but industry experts suggest it may now be higher. The article emphasizes the importance of planning and understanding consumer rights to manage these expenses effectively. (*USA TODAY*, 11/21, <https://www.usatoday.com/story/money/2025/11/21/americans-going-into-debt-over-death/87380829007/>)

~ **“I went to a conference about death. Everyone was laughing” explores the unique atmosphere of the EndWell Summit, where over 700 caregivers, clinicians, and advocates gathered to discuss end-of-life care.** The event, founded by Dr. Shoshana Ungerleider, aims to change conversations around death, emphasizing ‘radical bravery’ and the coexistence of life and death. Attendees, including celebrities and healthcare professionals, engaged in discussions that were both emotional and humorous. As death educator Gail Rubin noted, “Being around death makes you really appreciate life.” (*USA TODAY*, 12/2, <https://www.yahoo.com/lifestyle/articles/went-conference-death-everyone-laughing-130040075.html>)

GRIEF AND ADVANCE CARE PLANNING NOTES

~ **“Letters Without Limits: Jesse Tetterton” highlights a student-led initiative that connects volunteers with palliative care and hospice patients to create ‘Legacy Letters.’** These letters capture the memories, values, and lessons patients wish to share, preserving their stories. Jesse Tetterton’s letter reflects on his life experiences, emphasizing positivity, faith, and the importance of knowing oneself. The initiative aims to affirm the role of humanism in medicine, reminding us that every patient is more than their illness. (*The Johns Hopkins News-Letter*, 11/22, <https://www.jhunewsletter.com/article/2025/11/letters-without-limits-jesse-tetterton>)

~ **“Shifting to online and telephone bereavement support provision during the COVID-19 pandemic” explores the transition of bereavement services to remote formats during the pandemic.** The study reveals that before the pandemic, less than 10% of bereavement organizations offered remote support, but by spring 2021, there was a significant increase in online and telephone support options. This shift presented challenges, particularly for smaller organizations, but also increased service efficiency and access. The study emphasizes the need for tailored approaches and adequate training for staff and volunteers. (*Palliative Medicine*,

11/24, <https://pubmed.ncbi.nlm.nih.gov/41277252/>; *Hospice News*, 11/24, ramaonhealthcare.com)

~ **“Congress Mulls Centralized Depository for End-of-Life Planning Documents” discusses new legislation aimed at ensuring individuals’ end-of-life wishes are respected.** Introduced by Reps. Tom Suozzi (D-NY) and Dr. Greg Murphy (R-NC), the Legacy Act seeks to create a centralized depository for advance care plans, facilitating easier access for healthcare providers. This initiative addresses the issue of misplaced or inaccessible directives, which often leads to confusion and distress for families. The bill has garnered support from hospice and serious illness care organizations, emphasizing its potential to uphold patient dignity and reduce family stress. (*Hospice News*, 12/02, hospicenews.com)

~ **“What doctors wish patients knew about end-of-life care planning” highlights the importance of advance directives in ensuring patient wishes are respected and easing decision-making for families.** Dr. Susan E. Nelson emphasizes that advance directives, such as living wills and health care powers of attorney, are crucial for aligning medical care with patient values and reducing emotional burdens on loved ones. Despite their importance, only about one-third of U.S. adults have completed these documents. Dr. Nelson advises making these documents accessible and reviewing them annually, especially during life changes. (*American Medical Association*, 11/26, ama-assn.org)

~ **“A Geriatrician Explains: Supporting Loved Ones Through End-of-Life Care” emphasizes the importance of advance directives in ensuring a person’s end-of-life wishes are respected.** Dr. Cheryl E. Woodson highlights that these documents, such as a Power of Attorney for Healthcare and Living Will, prevent confusion and conflict by clearly outlining treatment preferences. Completing these forms early is crucial, as it removes the burden of decision-making from family members during emotional times. This proactive approach is described as both an act of self-care and love, preserving family harmony and dignity. (*BlackDoctor.org*, 11/30, blackdoctor.org/a-geriatrician-explains-supporting-loved-ones-through-end-of-life-care)

OTHER NOTES

~ **The article “National Alliance for Care at Home: CMS Modifies Final Payment Rule Based on Stakeholder Feedback, but 1.3% Cut Still Undermines Access” discusses the recent adjustments made by CMS to the Home Health Perspective Payment System Final Rule for CY 2026.** Despite these changes, the National Alliance for Care at Home remains concerned that the 1.3% payment cut will continue to limit access to home health services, especially affecting rural and underserved communities. The Alliance emphasizes the need for further congressional action to ensure the sustainability of Medicare’s home health benefit, noting that “home health care is among the most trusted, cost-effective, and patient-centered services in the Medicare program.” (*National Alliance for Care at Home*, 11/28, <https://allianceforcareathome.org/national-alliance-for-care-at-home-cms-modifies-final-payment-rule-based-on-stakeholder-feedback-but-1-3-cut-still-undermines-access/>)

~ **“What Parents of Children With Cancer Say They Need” highlights the emotional and practical challenges faced by parents of children with cancer and the support they require.** The article emphasizes the importance of psychosocial support, noting that parents often feel

their emotional needs are overlooked. Key needs include emotional support, peer connections, and help managing financial stress. Clinicians are encouraged to offer tailored, ongoing assessments and integrate psychosocial and palliative care early. Parents value simple acknowledgments of their struggles, as these can provide significant comfort. (*Medscape*, 11/25, [medscape.com/viewarticle/what-parents-children-cancer-say-they-need-2025a1000wv8](https://www.medscape.com/viewarticle/what-parents-children-cancer-say-they-need-2025a1000wv8))

~ **The Centers for Medicare & Medicaid Services (CMS) has issued an interim final rule repealing the “Medicare and Medicaid Programs; Minimum Staffing Standards for Long-Term Care Facilities and Medicaid Institutional Payment Transparency Reporting.”** This decision follows Public Law 119-21, which prevents CMS from enforcing these staffing standards until September 30, 2034. The rule initially required a registered nurse to be onsite 24/7 and set minimum staffing hours per resident day. Concerns were raised about the potential impact on rural and tribal facilities, which could face closure due to staffing challenges. The repeal allows CMS to reassess these standards and engage further with affected communities. Comments on this rule are open until February 2, 2026. (*Federal Register*, 12/03, [federalregister.gov/d/2025-21792](https://www.federalregister.gov/d/2025-21792))

~ **“Empath Health Leans Into Value-Based Care” discusses the strategic expansion of Empath Health into value-based care models.** The Florida-based nonprofit is focusing on risk- and value-based payers through its ‘Full-Life Care Model,’ which includes hospice, palliative care, and other services. Empath plans to launch a Medicare Advantage organization in 2026, offering Institutional Special Needs Plans (ISNP) in partnership with American Health Plans. The organization is also scaling its PACE program, aiming to serve 1,000 participants. Empath’s CEO, Jonathan Fleece, emphasizes their commitment to becoming a market leader in value-based care. (*Hospice News*, 11/14, [hospicenews.com/2025/11/14/empath-health-leans-into-value-based-care](https://www.hospicenews.com/2025/11/14/empath-health-leans-into-value-based-care))

~ **“HHS Launches New Caregiving AI Initiative to ‘Spark Innovative Support’” highlights a new initiative by the U.S. Department of Health and Human Services to enhance caregiver support through AI technology.** The Caregiver AI Challenge is a national competition offering a \$2 million prize for innovative technologies that improve caregiver outcomes, efficiency, and sustainability. HHS Secretary Robert F. Kennedy, Jr. emphasized AI’s potential to transform caregiving by providing on-demand support and automating tasks. This initiative aims to address the growing demand for home-based care and the shortage of healthcare workers. (*Hospice News*, 11/18, [hospicenews.com/2025/11/18/hhs-launches-new-caregiving-ai-initiative-to-spark-innovative-support](https://www.hospicenews.com/2025/11/18/hhs-launches-new-caregiving-ai-initiative-to-spark-innovative-support))

~ **“Americans are unprepared for the expensive and complex process of aging – a geriatrician explains how they can start planning” highlights the urgent need for older adults to plan for their care as they age.** The article underscores the unpredictability of aging and the financial burdens associated with long-term care, which are most often not covered by Medicare. It stresses the importance of advance directives and open discussions with loved ones to ensure personal wishes are respected. The piece also warns of potential federal budget cuts that could impact Medicaid and other support programs for the elderly. (*The Conversation*, 11/18, <https://theconversation.com/americans-are-unprepared-for-the-expensive-and-complex-process-of-aging-a-geriatrician-explains-how-they-can-start-planning-259237>)

NOTE: Some URL links require subscription, membership and/or registration.

Hospice Analytics is the national sponsor of Hospice News Network for 2025. Hospice Analytics is an information-sharing research organization whose mission is to improve hospice utilization and access to quality end-of- life care. For additional information, please call Dr. Cordt Kassner, CEO, at 719-209-1237 or see www.HospiceAnalytics.com.

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