HOSPICE NEWS NETWORK

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

Volume 29, Number 13 November 18, 2025

A Service of State Hospice Organizations

HOSPICE NOTES

~ **"PUMPING IRONY: When the Hospice Is Inhospitable" explores the challenges faced by dementia patients in hospice care, highlighting a study that reveals concerning medication practices.** The University of Michigan study found that nearly half of dementia patients in hospices were prescribed benzodiazepines, increasing their mortality risk by 41%. Antipsychotics also raised mortality by 16%. The study emphasizes the need for dementia-specific hospice interventions and better medication oversight. Geriatric psychiatrist Lauren Gerlach notes, "Dementia is now the most common qualifying condition among hospice enrollees, yet many of these patients are not imminently dying." (*Experience Life*, 10/22, experiencelife.lifetime.life/article/pumping-irony-when-the-hospice-is-inhospitable)

~ **The NAACP's resolution on "Racial Disparities in Hospice Care" highlights significant inequities faced by racial and ethnic minorities in accessing quality hospice services.** The resolution underscores that African American and Hispanic communities experience lower hospice utilization rates and delays in referrals, often due to systemic inequities and mistrust in healthcare. The NAACP calls for comprehensive data collection, enhanced funding for culturally competent care, and educational campaigns to address these disparities. This resolution aims to ensure equitable end-of-life care for all individuals. (*NAACP*, 2025, https://naacp.org/resources/racial-disparities-hospice-care)

~ **"A Strategic Path Forward for Hospice & Palliative Care" discusses the urgent challenges and potential solutions for improving hospice and palliative care in the U.S.** Ira Byock, Kristi Newport, and Brynn Bowman highlight issues such as variable care quality, unethical practices, and stalled program growth. Byock proposes a four-part solution: establishing clear standards, ensuring transparency through data, fostering quality-based competition, and embracing the authentic brand of hospice care. The discussion, available in transcript and webinar versions, emphasizes the need for collaboration among stakeholders to address these challenges and improve care quality. (*GeriPal*, 11/13, geripal.org)

~ **"Keys to Compliance With Hospice Volunteer Rules" highlights the complexities hospices face in meeting Medicare's volunteer requirements.** The article discusses the necessity for hospices to ensure that volunteers provide at least 5% of patient care hours, as mandated by Medicare Conditions of Participation (CoPs). Lori Asmus from Hospice of Cincinnati emphasizes the importance of accurately tracking volunteer hours to avoid compliance issues, noting that "volunteerism falls into two broad categories of patient-facing and administrative support." (*Hospice News*, 10/20, hospicenews.com)

~ “Ames hospice center to close due to decline in patient numbers, rising costs” reports on the upcoming closure of the Israel Family Hospice House after over 25 years of service. The decision, effective December 31, 2025, is pending approval by the hospital’s Board of Trustees. Factors influencing the closure include low patient numbers, increased competition, and financial deficits, with the facility averaging only four patients daily. Despite the closure, Mary Greeley Medical Center assures that hospice services will continue through home hospice programs and partner hospitals. (*WeAreIowa*, 10/26, weareiowa.com/article/news/local/ames-israel-family-hospice-house-mary-greeley-medical-center-closing-decline-patient-numbers-rising-operational-costs/524-621d3501-e8f1-45cf-9bad-fdfac7b3c89e)

~ “Here Is What No One Tells You About Watching Your Wonderful Dad Slowly Slipping Away In Front Of You” shares a deeply personal account of coping with a parent’s decline in hospice care. Jill Bodach reflects on the emotional complexities of watching her father, once vibrant, now in hospice, and the struggle to balance her role as a caregiver with her responsibilities as a mother. She describes the profound sense of helplessness and the small acts of kindness that provide solace, such as warming her father’s cold hands. The narrative underscores the importance of expressing love and gratitude before it’s too late. (*HuffPost*, 10/25, huffpost.com)

~ “Letters Without Limits: Linda McDaniel” highlights the initiative by Johns Hopkins and Brown University students to connect volunteers with hospice patients to create ‘Legacy Letters.’ These letters capture memories and values, preserving stories that might otherwise be lost. Linda McDaniel’s letter reflects on her 55-year marriage, expressing gratitude and love for her late husband, Jerry. The initiative emphasizes the importance of humanism in medicine, reminding us that every patient’s voice deserves to be heard. (*The Johns Hopkins News-Letter*, 10/18, https://www.jhunewsletter.com/article/2025/10/letters-without-limits-linda-mcdaniel)

~ “How Optum’s Amedisys Deal Could Shake Up the Hospice Market” explores the implications of UnitedHealth Group’s acquisition of Amedisys for the hospice industry. The $3.3 billion deal, finalized in August 2025, highlights the growing importance of home-based care and may accelerate consolidation in the hospice sector. James Dismond, CEO of MiraSol Health, notes that this merger represents a structural shift, potentially forcing hospices to align with payers or larger systems to remain competitive. The acquisition also underscores the trend of ‘payviders,’ where insurers own healthcare providers to manage costs and care coordination. Regulatory scrutiny is expected to increase for similar transactions in the future. (*Hospice News*, 10/21, hospicenews.com/2025/10/21/how-optums-amedisys-deal-could-shake-up-the-hospice-market)

~ “The Katherine House: Hospice care for homeless people coming to Dallas” highlights a new initiative to provide end-of-life care for homeless individuals in Dallas. The Visiting Nurse Association of Texas, in partnership with The Meadows Foundation, plans to convert a historic Victorian-style house into a hospice facility. This $5 million project will offer free hospice care to those without a safe place to live, addressing a critical gap in services for the homeless population. The facility will begin renovations in January 2026 and aims to admit its first patients by early 2027. (*The Dallas Morning News*, 10/30, https://www.dallasnews.com/news/2025/10/30/the-katherine-house-hospice-care-for-homeless-people-coming-to-dallas)

~ "Hospice Patients on ACA Marketplace Plans Face Heavy Costs" highlights the financial burdens faced by hospice patients enrolled in ACA marketplace plans. Unlike Medicare, which covers 100% of hospice costs, ACA plans require significant cost-sharing, with median deductibles reaching $4,000 and maximum out-of-pocket costs up to $8,550. The study suggests that these financial barriers may deter patients from seeking hospice care, potentially leading to increased hospital-based care. Proposed solutions include episode-based cost-sharing and state-funded subsidies to alleviate these costs. (*Hospice News*, 10/28, hospicenews.com/2025/10/28/hospice-patients-on-aca-marketplace-plans-face-heavy-costs)

~ "Expired Telehealth Regulations 'Disruptive' to Underserved Rural Hospice Patients" highlights the challenges faced by rural hospices following the expiration of telehealth flexibilities. These waivers, initially introduced during the COVID-19 pandemic, allowed for remote patient re-certifications and expanded telehealth services, which were crucial for underserved rural populations. The end of these waivers has led to increased labor and financial burdens, slowing admission processes and complicating care delivery. Calls for permanent telehealth regulations are growing, as stakeholders emphasize the need for equitable access to care. (*Hospice News*, 10/31, hospicenews.com/2025/10/31/expired-telehealth-regulations-disruptive-to-underserved-rural-hospice-patients)

~ "National Alliance CEO Steve Landers on Hospices' Top Policy Priorities" discusses the key policy focuses for the National Alliance for Care at Home, including Medicare Advantage and telehealth. The Alliance, formed from the merger of the National Hospice and Palliative Care Organization and the National Association for Home Care & Hospice, is working to prevent proposed payment and Medicaid cuts. Landers highlights the importance of grassroots advocacy and the integration of the two organizations, which is nearly complete. The Alliance is also addressing issues with the Hospice Outcomes and Patient Evaluation (HOPE) tool. (*Hospice News*, 11/06, hospicenews.com)

~ "New HOPE Tool, 2026 Final Rule Spur Hospice Concerns" discusses the challenges hospices face with the implementation of the 2026 payment rule and the new Hospice Outcomes and Patient Evaluation (HOPE) tool. Implemented on October 1, these changes require significant staff training and adaptation, particularly in ensuring electronic medical record systems are compliant. Katy Barnett from LeadingAge highlights the complexity of these changes, noting, "It's a lot to manage and coordinate and a lot of education and training." The new requirements, including symptom follow-up visits, may increase operational costs. (*Hospice News*, 11/07, hospicenews.com/2025/11/07/new-hope-tool-2026-final-rule-spur-hospice-concerns)

~ "Hospice Fraud Sentences, Indictments Handed Down in 2 Hotbed States" reports on significant legal actions against individuals involved in hospice fraud in California and Texas. In California, Ralph and Rochell Canales were sentenced for submitting false claims and paying illegal kickbacks, with Ralph receiving over seven years in prison. In Texas, seven women face charges for defrauding Medicare of over $100 million, involving false patient eligibility and kickbacks. These cases highlight ongoing issues in hospice fraud, particularly in states identified as fraud hotbeds. (*Hospice News*, 11/10, hospicenews.com/2025/11/10/hospice-fraud-sentences-indictments-handed-down-in-2-hotbed-states)

~ "Bridging care and support: Social services in hospice" explores the integration of social services into hospice care to address the broader needs of patients and families. The article highlights the importance of services like counseling, transportation, and legal assistance, which are often not covered by Medicare or insurance, to support hospice patients and their families. It emphasizes the role of social services in promoting equity and enhancing the quality of life by filling gaps in care and providing a safety net. The study calls for further research to optimize these services for diverse communities. (*Palliative Care and Social Practice*, 10/14, https://journals.sagepub.com/doi/10.1177/26323524251386063)

~ "Hospice chaplains play key role in addressing emotional pain, VITAS spiritual lead explains" highlights the essential role of chaplains in hospice care. Jason Cooper, national spiritual lead at VITAS Healthcare, emphasizes that chaplains provide holistic care by addressing the mental and emotional needs of patients, complementing the physical care provided by medical staff. Chaplains are trained to be inclusive and nondenominational, offering support during vulnerable moments. Cooper notes that emotional issues like guilt or shame can manifest physically, and chaplains help patients navigate these challenges. (*McKnight's Home Care*, 10/26, mcknightshomecare.com)

~ "Hospice Market Expands at 9.6% CAGR, Projected to Hit USD 182.1 Billion" highlights the significant growth in the global hospice market driven by an aging population and increasing chronic illnesses. The market is expected to grow from USD 72.8 billion in 2023 to USD 182.1 billion by 2033. Key trends include a shift towards home-based care, supported by telehealth and personalized care models. Government policies and technological advancements are enhancing service delivery, though challenges like workforce shortages and compliance pressures persist. The sector's evolution towards integrated care models underscores its commitment to holistic end-of-life care. (*Market.us Media*, 10/26, https://media.market.us/hospice-market-news-2025/)

~ "Live Discharges of Patients in Hospice Home Settings-Relief or Grief: A Narrative Study" explores the emotional and logistical challenges faced by caregivers when hospice patients are discharged alive. The study, conducted at a Midwest medical center, reveals that approximately 6.9% of hospice patients are discharged alive, often due to Medicare regulations, leading to feelings of abandonment among caregivers. The research highlights the importance of clear communication, care planning, and interdisciplinary support to mitigate these challenges. The study underscores the need for team-based communication and access to essential resources to improve caregiver confidence and continuity of care. (*Am J Hosp Palliat Care*, 10/07, https://pubmed.ncbi.nlm.nih.gov/41058121/)

~ "The Future of Hospice Care: Opportunities and Challenges," an episode of TCN Talks, discusses the evolving landscape of hospice care, focusing on AI, innovations, and personal experiences. Chris Comeaux and Cordt Kassner explore the ethical implications of AI in life-or-death decisions and emphasize the need for equitable access to hospice care. They also highlight how technology can enhance care delivery and the importance of personal stories in shaping healthcare perspectives. The discussion underscores ongoing challenges in the hospice industry. (*Teleios Collaborative Network*, 11/5, teleioscn.org)

~ "Love, Loss and Last Wishes Fulfilled at Duke HomeCare & Hospice" highlights the compassionate care provided by staff at Duke's Hock Family Pavilion. The article shares the story of Erik Sundelöf, a patient who found peace and comfort during his final days, thanks to the dedicated hospice team. Staff members often fulfill last wishes and create meaningful experiences for patients, such as arranging weddings or final meals. Sundelöf's gratitude was expressed in a heartfelt letter, emphasizing the profound impact of the hospice workers. (*Duke Today*, 10/29, https://today.duke.edu/2025/10/love-loss-and-last-wishes-fulfilled-duke-homecare-hospice)

~ "Hospice Marketer Sentenced in Fraud Case" reports on the sentencing of Callie Jean Black for her role in a hospice fraud scheme. Black was sentenced to 12 months of home detention and fined $100,000 for recruiting patients in exchange for illegal kickbacks, contributing to a $30 million Medicare fraud. The case involved two California hospice providers, Saint Mariam Hospice Inc. and Arcadia Hospice Provider Inc., and included false claims and certifications for non-terminally ill patients. Dr. Victor Contreras, also involved, was sentenced to 24 months in prison. (*Hospice News*, 10/24, hospicenews.com/2025/10/24/hospice-marketer-sentenced-in-california-fraud-case)

~ "Letter To The Editor: Medicare Fraud In California Shouldn't Cost Seniors Their Care" highlights the impact of Medicare fraud in Los Angeles on seniors' access to care nationwide. The article discusses how inflated billing in Los Angeles County skews national Medicare payment rates, adversely affecting rural providers and reducing care access for seniors. It calls for CMS to address fraudulent billing practices and correct data to prevent further harm. The piece emphasizes the need for immediate action to protect taxpayer dollars and ensure seniors receive the care they deserve. (*Home Health Care News*, 11/13, homehealthcarenews.com)

~ **"Driving Sales and Admission Success in Hospice Care" is a publication of Transition Strategy Group.** Hospice growth, says the booklet that is now available online at the link below, depends on building trust with referral sources and families, responding quickly—often the same day—and keeping sales, intake, and clinical teams tightly aligned. Many delays come from misunderstandings about hospice eligibility, so educating both providers and families is essential. The document emphasizes that rapid admissions only succeed when they remain grounded in the hospice mission of compassionate, high-quality care. (Transition Strategy Group, September 2025, https://transcend-strategy.com/wp-content/uploads/2025/09/transcend.insights-sales_admissionfnl.pdf)

~ The Hospice and Palliative Care Network of Maryland shares "Short Hospice Stays in Maryland." The report highlights that in Maryland, many patients enroll in hospice care rather late in their illness trajectory—resulting in a median length of stay of just 18 days in 2023. It underscores how short hospice stays often correlate with poorer outcomes for patients and families, including reduced opportunities for meaningful comfort-care interventions. The document identifies referral delays, lack of provider education about hospice eligibility, and inadequate coordination among hospitals, nursing homes, and hospice providers as key drivers of these late enrollments. Finally, it calls for increased collaboration, clearer referral pathways, and enhanced outreach to ensure patients receive hospice services earlier and experience care that aligns with the full intent of hospice. (Hospice and Palliative Care Network of Maryland, October 2025, https://cdn.ymaws.com/www.hnmd.org/resource/resmgr/white_papers_/HPCNM_SLOS_issues_paper_2025.pdf)

~ "Hospice workers call for Gov. Hochul to sign bill restricting for-profit hospices" highlights a push for legislation to limit the expansion of for-profit hospices in New York until stronger patient safeguards are established. Jeanne Chirico, president of the Hospice and

Palliative Care Association of New York State, emphasizes the bill's importance, citing studies that show for-profit hospices often provide inferior care compared to non-profits. The bill, which has passed the state Senate and Assembly, aims to prevent issues like exploitation and reduced services seen in other states. (*WAMC*, 11/14, wamc.org/2025-11-14/hospice-workers-call-for-gov-hochul-to-sign-bill-restricting-for-profit-hospices)

PALLIATIVE CARE NOTES

~ "The Results Are In: Palliative Care Professionals Share How They're Doing in 2025" provides insights from CAPC's second annual Palliative Pulse survey, highlighting the current state and concerns of palliative care professionals. Conducted with over 800 participants, the survey reveals that team morale and emotional well-being remain top concerns, alongside misconceptions about palliative care and the need for community resources. Despite increased consult volumes, staffing levels have stagnated, and while concerns for program sustainability have decreased, perceptions of palliative care's value remain stable. CAPC plans to address these issues with new tools and programs. (*Center to Advance Palliative Care*, 10/8, https://www.capc.org/blog/the-results-are-in-palliative-care-professionals-share-how-theyre-doing-in-2025/)

~ "Providing Service and Support at Every Stage of Illness" highlights the vital role of palliative nurses in enhancing the quality of life for patients with terminal or chronic illnesses. Marina Sargin, a care coordinator at Cleveland Clinic, describes palliative care as a calling that brings purpose and fulfillment, emphasizing its distinction from hospice care. Palliative care is tailored to patient needs, offering symptom relief and support without prognostic limitations. It involves interdisciplinary teams providing holistic care, addressing physical, emotional, and spiritual needs. Sargin notes, "We don't just treat illness, we treat the whole person." (*Cleveland Clinic*, 10/28, consultqd.clevelandclinic.org/providing-service-and-support-at-every-stage-of-illness)

~ "The Valerie Fund Pledges 3.5 Million to Establish New Pediatric Pain and Palliative Care Program" highlights a significant expansion in pediatric palliative care services at Joseph M. Sanzari Children's Hospital. The Valerie Fund's $3.5 million donation will double patient visits and enhance family-centered care for children with serious illnesses. The program will add key positions, including a social worker and a pediatric pain management psychologist, to address both physical and emotional needs. This initiative aligns with The Valerie Fund's mission to support children with cancer and blood disorders. (*Hackensack Meridian Health*, 11/03, https://www.hackensackmeridianhealth.org/en/news/2025/11/03/the-valerie-fund-pledges-millions-to-establish-new-pediatric-pain-and-palliative-care-program)

~ "Palliative Care & Hospice Poll Reveals Major Gaps" highlights significant knowledge gaps among older adults regarding palliative and hospice care. The University of Michigan National Poll on Healthy Aging found that only 36% of adults over 50 know about palliative care, while 68% are aware of hospice care. Despite this, interest in receiving these services is high once explained, with 84% interested in palliative care and 85% in hospice care. The poll also reveals demographic disparities in awareness and interest, emphasizing the need for better education on these care options. (*Newswise*, 11/06, newswise.com/articles/palliative-care-hospice-poll-reveals-major-gaps)

~ "TRUE Palliative Care Launches as California Strengthens Commitment to Compassionate Care Under SB 403" highlights the introduction of a new in-home palliative care service in California. Dr. Bob Uslander has launched TRUE Palliative Care (TPC), which aims to provide comprehensive support for patients with serious or chronic illnesses, focusing on early intervention and whole-person care. This initiative aligns with California's recent legislative changes under Senate Bill 403, which ensures permanent access to end-of-life options. Dr. Uslander emphasizes that healthcare should empower individuals to live with comfort and clarity. (*Palladium-Item*, 10/28, https://www.pal-item.com/press-release/story/11620/true-palliative-care-launches-as-california-strengthens-commitment-to-compassionate-care-under-sb-403/)

~ "Home-based psilocybin-assisted therapy for a patient with advanced cancer: A case report" explores the potential of psilocybin-assisted therapy (PAT) in alleviating psychospiritual distress in cancer patients. The case study highlights a 51-year-old man with metastatic lung cancer who experienced significant reductions in anxiety and depression following a home-based PAT session. The therapy was well tolerated and led to sustained improvements in well-being. The report suggests that PAT could be a viable option for managing existential distress in palliative care, warranting further research into homecare settings. (*Palliative Support Care*, 10/23, https://pubmed.ncbi.nlm.nih.gov/41127918/)

~ A recent study published in *JAMA Health Forum* examines trends in state-level legislation regarding palliative care in the U.S., analyzing laws introduced and enacted between 2009 and 2023. The study found that while the number of bills has increased over time—peaking around 2018–2019—there are significant regional disparities, with the Northeast introducing and passing more legislation than the Midwest. Most of the laws focused on improving quality and standards, public awareness, and payment mechanisms, whereas fewer addressed workforce, patient rights, or telehealth. The ratio of bills passed to bills introduced was just under 30 percent overall, and bills that were re-introduced had much lower chances of passage. The authors conclude that although legislative momentum exists, sizable gaps remain in policy coverage that may limit equitable access to palliative care services across states. (*JAMA Health Forum,* 10/23, https://jamanetwork.com/journals/jama-health-forum/fullarticle/2840340)

END-OF-LIFE NOTES

~ "Bill allowing terminally ill adults to choose medically assisted death heads to Gov. Pritzker" discusses a new legislative measure in Illinois. The bill, now awaiting Governor JB Pritzker's decision, would permit doctors to prescribe life-ending medication to terminally ill adults with six months or less to live. State Sen. Linda Holmes supports the bill, emphasizing it provides an option for patients to end their suffering. However, Illinois' Right to Life group opposes it, labeling the bill as 'horrible.' This development follows similar laws in ten other states. (*ABC7 Chicago*, 10/31, abc7chicago.com)

~ "Students confront the end of life to learn more about how to live" explores how a unique course at the University of Tennessee at Chattanooga encourages students to engage with the concept of death to enhance their understanding of life. The course "Perspectives on Death and Dying" combines philosophical, medical, and sociological views on death. Students participate in service-learning projects with Welcome Home of Chattanooga, a nonprofit aiding those facing serious illness or death. The course aims to foster comfort in discussing death, emphasizing its role in living meaningful lives. (*UTC News*, 11/06, https://blog.utc.edu/news/2025/11/students-confront-the-end-of-life-to-learn-more-about-how-to-live/)

~ **"HBO's 'The Pitt' Inspires Viewers To Consider Organ Donation, End-Of-Life Planning" highlights how the series encourages viewers to engage with organ donation and end-of-life planning.** A study from the University of Southern California found that 26.9% of viewers sought information on organ donation, and 38.8% explored end-of-life planning after watching the show. The series is praised for its authentic portrayal of healthcare challenges, resonating particularly with Black audiences, who are overrepresented on transplant waiting lists. (*BOG Country*, 10/28, https://bogcountry.com/2025/10/28/hbos-the-pitt-inspires-viewers-to-consider-organ-donation-end-of-life-planning)

~ **"Improving End-of-Life Care: Making Hospice and Home Support Accessible" discusses the need for policy changes to enhance hospice and home care accessibility.** Experts Maureen Canavan and Dr. Kerin Adelson highlight how current reimbursement structures inadequately support end-of-life care, often forcing patients to remain in costly hospital settings. Dr. Adelson notes, "Many, many patients can't afford to die at home because there's nobody to look after them." The article calls for better reimbursement policies to allow more patients to receive compassionate care at home. (*CURE*, 10/22, https://www.curetoday.com/view/improving-end-of-life-care-making-hospice-and-home-support-accessible)

~ **"Ethical Dilemmas in Pain Management for Frail and End-of-Life Elderly Patients: Balancing Relief, Autonomy, and Clinical Uncertainty" explores the complex ethical challenges in managing pain for elderly patients nearing the end of life.** The article highlights the difficulties in balancing effective pain relief with the risks of overtreatment, such as sedation and loss of autonomy, and the under-treatment due to fear of opioid side effects. It emphasizes the importance of interdisciplinary collaboration and the need for ethical guidelines that consider the unique vulnerabilities of frail elderly patients. Innovations like AI and digital monitoring offer promise but also raise ethical concerns about depersonalization. (*Cureus*, 11/11, https://www.cureus.com/articles/420333-ethical-dilemmas-in-pain-management-for-frail-and-end-of-life-elderly-patients-balancing-relief-autonomy-and-clinical-uncertainty#!/)

~ **"Dignity in the Final Chapter: Delaware's End of Life Options Law and What It Means for Clients and Counsel" discusses the implications of Delaware's new law allowing terminally ill adults to end their lives with medical assistance.** Signed into law on May 20, 2025, House Bill 140 empowers mentally capable adults with a terminal diagnosis to request medication to end their lives, emphasizing autonomy and dignity. The law includes strict procedural safeguards, such as dual medical confirmation and informed consent, and ensures that participation by medical professionals is voluntary. This legislation complements existing advance directives and offers a new dimension to end-of-life planning. (*Delaware Today*, 11/1, https://delawaretoday.com/partner/zelvin-law-november-2025/)

~ **End of Life University offers a podcast titled "End-of-Life Planning: Small Steps to Complete the Work with Jennifer Tadjedin and Karen Callahan" highlights the importance of taking manageable steps in end-of-life planning to achieve peace of mind.** Jennifer Tadjedin and Karen Callahan, co-founders of The Heartwood Collective, emphasize the need for death education and normalizing conversations about death to reduce stress and grief for loved ones. They advocate for breaking down large tasks into smaller, actionable steps and the benefits of group planning. The episode also discusses barriers to end-of-life planning and the importance of selecting a suitable healthcare proxy. (*End of Life University*, 11/03, eolupodcast.com)

~ "Ana Maria Rodriguez files a bill to better ensure patient choices are honored in end-of-life care" discusses a new legislative effort in Florida to prioritize patient autonomy in end-of-life decisions. The bill, SB 312, aims to establish 'patient-directed medical orders' to ensure that patient preferences, such as withholding life-sustaining interventions, are respected across healthcare settings. These orders would be portable, stored in an online registry, and could be combined with DNR orders. The bill also seeks to protect medical professionals from liability when following these directives. If passed, it would take effect on July 1, 2026. (*Florida Politics*, 10/31, floridapolitics.com)

~ "Patients with advanced cancer often receive treatments that conflict with their goals" highlights a significant communication gap in care for advanced cancer patients. The article reveals that nearly 40% of patients with advanced cancer who prefer comfort-focused care receive life-extending treatments instead. Dr. Manan P. Shah emphasizes the need for better communication to align treatment with patient goals, noting, "There's something missing. We need to talk about it, especially before treatment starts." The study suggests that improved discussions could enhance patient satisfaction and quality of life. (*Healio*, 10/20, healio.com/news/hematology-oncology/20251016/patients-with-advanced-cancer-often-receive-treatments-that-conflict-with-their-goals)

~ "How to Prepare for Your Death" offers practical advice on end-of-life planning to ease the burden on loved ones. Physician executive Joseph Pepe discusses the importance of organizing essential documents, creating a 'death folder,' and establishing wills, trusts, and life insurance. He emphasizes that facing mortality allows individuals to live more freely and meaningfully. Pepe notes that "preparing for death isn't morbid. It's a gift," as it helps loved ones focus on grieving and healing rather than chaos. (*KevinMD*, 10/31, kevinmd.com/2025/10/how-to-prepare-for-your-death-podcast.html)

~ "Best of Beth Ashley: After a life well lived, facing the sadness together" reflects on the inevitability of death and the role of hospice care in providing comfort during life's final stages. Beth Ashley shares personal experiences of loss and the emotional journey of accepting mortality, emphasizing the importance of expressing love and facing the end together. She recounts the support of her husband and the shift in priorities as she ages, highlighting the bittersweet nature of life's closing chapters. (*Marin Independent Journal*, 10/27, https://www.marinij.com/2025/10/27/best-of-beth-ashley-after-a-life-well-lived-facing-the-sadness-together/)

~ "Life Beyond the Grave" explores the growing movement of natural or 'green' burials as an eco-friendly alternative to traditional burial practices. The article highlights how natural burials use biodegradable materials and aim to restore and protect nature, resonating with individuals like Freddie Johnson, who founded the Prairie Creek Conservation Cemetery. This approach contrasts with conventional methods that involve toxic chemicals and non-biodegradable materials. Emily Miller of Colorado Burial Preserve emphasizes the participatory nature of these burials, which reconnects people with the earth and offers a personalized end-of-life experience. (*Sierra Club*, 10/31, https://www.sierraclub.org/sierra/life-beyond-grave)

~ **"Don't kick your bucket list, UT Arlington study says" explores how creating and fulfilling bucket lists can enhance end-of-life care by reducing anxiety and depression, and fostering family bonds.** The study from the University of Texas at Arlington highlights that bucket lists can provide hope and closure for patients and their families, despite being often overlooked in favor of symptom management. Swasati Handique, a co-author, notes that such lists can help patients reclaim their identity beyond illness. The study calls for more equitable access to wish-fulfillment opportunities. (*Texas Standard*, 11/03, texasstandard.org)

~ **"Who Will Care for Me When I'm Old?" explores the growing concern among caregivers about their own future care needs.** With 63 million caregivers in the U.S., many are beginning to question who will care for them as they age, especially as the caregiving burden is expected to rise with the aging Baby Boomer population. The article highlights the importance of early planning and conversations about end-of-life care, emphasizing that "women are both the backbone and the afterthought of our caregiving system." It also discusses the need for policy changes to support caregivers. (*Flow Space*, 11/05, theflowspace.com)

~ **"Patients, doctors sue Whitmer over Michigan law limiting end-of-life choices during pregnancy" highlights a legal challenge against Michigan's Pregnancy Exclusion law, which restricts honoring advance directives for pregnant patients if it results in death.** Filed in the Michigan Court of Claims, the lawsuit argues this law violates constitutional rights, including due process and equal protection. Plaintiffs, including four women with advance directives, assert the law discriminates against pregnant individuals, undermining their autonomy and reproductive freedom. This case follows similar legal actions in other states. (*WLNS Lansing*, 10/25, https://www.yahoo.com/news/articles/patients-doctors-sue-whitmer-over-230301044.html)

~ **A study titled "End-of-Life Care for Older Adults With Dementia by Race and Ethnicity and Physicians' Role" found that older adults with dementia from non-Hispanic Black and Hispanic racial/ethnic groups received more intensive end-of-life care—such as more emergency department visits, hospitalizations, ICU stays, and feeding-tube placements—than non-Hispanic White decedents, yet they were less likely to use hospice.** These disparities remained even when patients were treated by the same physician, suggesting that differences in care were not explained solely by provider assignment. The authors conclude that structural and social factors—not just physician practice patterns—are likely driving these racial/ethnic differences in end-of-life outcomes for people with dementia. (*JAMA Health Forum,* online 11/14, doi:10.1001/jamahealthforum.2025.4235)

GRIEF AND ADVANCE CARE NOTES

~ **"Writing as a Lifeline Through Loss and Grief" is a podcast that explores how Christina Holbrook and Jane Flynn used writing to navigate profound grief.** The podcast episode discusses their memoir, *Antiphon: A Call and Response in a Year of Grief and Renewal*, which chronicles their experiences with loss, including a glioblastoma diagnosis and a child's suicide. Through email exchanges, they found solace in sharing grief and life's small joys, illustrating how writing can express complex emotions and lighten burdens. (*End of Life University*, 10/27, eolupodcast.com)

~ “Engaging Community Health Workers in Advance Care Planning” highlights a new training program in Illinois aimed at equipping community health workers with skills for advance care planning. Developed by the Illinois Public Health Association, Illinois Hospice & Palliative Care Organization, and the HAP Foundation, the program uses a hybrid model of video modules and live instruction. The initiative seeks to empower community health workers to better serve underserved populations, including communities of color and the LGBTQ+ community, by fostering trust and improving end-of-life planning. (*Hospice News*, 10/24, hospicenews.com)

~ A study published in JAMA Network Open examined advance care planning (ACP) behaviors among a nationally representative sample of U.S. adults and found that those with self-reported serious illness were more likely to engage in ACP conversations with both close contacts and clinicians, but not significantly more likely to have formal documentation of their wishes. It also revealed that worries about making the right decisions, affording care, or accessing the best treatments were linked to higher rates of ACP engagement, suggesting motivation stems from specific concerns rather than general health status. Despite relatively high rates of discussions with loved ones, the study highlights ongoing gaps in communication with clinicians and completing written directives, pointing to system- and individual-level barriers that remain. (*JAMA Network Open,* 11/4, https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2840893)

~ “The Sliver of Light After Losing a Child” explores the profound and paradoxical gifts that can emerge from the grief of losing a child. The author, David R. Patterson, shares his personal journey following the loss of his son to a fentanyl overdose, highlighting how such a loss can lead to a deeper awareness of one’s own mortality and a renewed appreciation for life. Patterson reflects on how this painful experience has shifted his perspective, allowing him to live more fully in the present. He notes, “The gift that our lost children give us is a renewed appreciation for life that likely would not have otherwise existed.” (*Psychology Today*, 11/10, psychologytoday.com/za/blog/reducing-suffering/202511/the-sliver-of-light-after-losing-a-child)

~ “Religious Traditions and Grief in the USA: When it’s Less About G-d and More About the People” explores how religious practices serve communicative roles in the context of grief. The study, based on 159 survey responses from adults who experienced parental loss, highlights that religious rituals and faith communities often facilitate social connections and communication during bereavement. It examines how these practices impact interfaith family dynamics and contribute to the grieving process. The findings broaden the understanding of religion’s role in grief, offering insights for families and religious communities. (*J Relig Health*, 9/30, https://pubmed.ncbi.nlm.nih.gov/41028550/)

OTHER NOTES

~ The “National Healthcare at Home 2025 Best Practices and Future Insights Study” aims to advance the home healthcare industry through comprehensive research and collaboration. Sponsored by the National Alliance for Care at Home and other associations, the study seeks to identify best practices and future insights to guide the industry amidst challenges like proposed payment cuts and Medicare Advantage expansion. Participants will gain access to detailed benchmarks and insights. The study will unfold in three phases, starting with topic suggestions and culminating in data distribution. (*BerryDunn*, 10/25, https://www.berrydunn.com/resources-detail/national-healthcare-at-home-2025-best-practices-and-future-insights-study)

~ "Congress Member Calls on CMS to Investigate Health Care Fraud, Reconsider Home Health Proposed Rule" highlights a call for action against fraudulent practices in the home health sector. Rep. Claudia Tenney (R-N.Y.) urged CMS to investigate fraudulent billing in Los Angeles County, citing a physician who billed nearly $600 million to Medicare. Tenney emphasized the need to reevaluate data influencing the 2026 Medicare home health payment rule to prevent fraud from distorting national policy. She proposed measures like suspending payments to suspicious providers and revalidating enrollments. (*Hospice News*, 11/14, hospicenews.com/2025/11/14/congress-member-calls-on-cms-to-investigate-health-care-fraud-reconsider-home-health-proposed-rule/)

~ The National Funeral Directors Association (NFDA) has released "When Words Matter: A Funeral Director's Guide to Clear and Compassionate Communication," aiming to bridge the language gap between funeral professionals and families. This guide, unveiled at the 2025 NFDA International Convention & Expo, is based on research with over 1,100 U.S. consumers and highlights the disconnect in understanding industry terms. It offers strategies for improving clarity and trust, emphasizing the importance of clear, empathetic communication. The guide includes practical tools like conversation starters and roleplay scripts. (*National Funeral Directors Association*, 10/27, nfda.org/news/media-center/nfda-news-releases/id/9822/when-words-matter-nfda-releases-groundbreaking-communication-guide-for-funeral-professionals)

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

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