
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

~ **“Addressing Hospice Care Medicare Fraud: Awareness and Action”** highlights the growing concern of hospice care Medicare fraud, as spotlighted by the New York StateWide Senior Action Council. This initiative, part of the Senior Medicare Patrol, aims to educate seniors and caregivers on detecting and preventing healthcare fraud. Maria Alvarez, Executive Director of StateWide, warns of scams where seniors are falsely enrolled in hospice care, leading to unauthorized Medicare charges. Seniors are advised to be cautious of unsolicited offers and verify services through trusted sources. (*Investors Hangout*, 08/18, <https://investorshangout.com/addressing-hospice-care-medicare-fraud-awareness-and-action-364605-/>)

~ **“Hospice Quality: In the Eye of the Beholder”** explores the multifaceted nature of quality in hospice care, emphasizing that it is perceived differently by patients, families, providers, and regulators. The article, authored by Sheila Clark of the California Hospice and Palliative Care Association, highlights that while regulations ensure accountability and safety, true quality often manifests in personal experiences, such as a nurse’s comforting presence. Clark argues for a balanced approach that values both measurable standards and compassionate care, urging stakeholders to consider diverse perspectives. (*California Hospice and Palliative Care Association*, 08/24, <https://www.linkedin.com/pulse/hospice-quality-eye-beholder-care-association-sheila-clark--e5aqc/>)

~ **“For-profit hospice operations restricted in pending bill”** discusses New York lawmakers’ efforts to limit the expansion of for-profit hospice businesses in the state. The proposed legislation aims to prohibit existing for-profit hospice operators from expanding and prevent new for-profit entities from entering New York. Jeanne Chirico, CEO of the Hospice and Palliative Care Association of New York State, provides insights into the low rate of hospice services in the state. This legislative move reflects ongoing concerns about the quality and accessibility of hospice care. (*Capitol Pressroom*, 8/20, <https://capitolpressroom.org/2025/08/20/for-profit-hospice-operations-restricted-in-pending-bill/>)

~ **“Redefining Hospice: Living Life To The Fullest Is Not About Giving Up”** explores how hospice care can be a transformative experience for patients and families, emphasizing quality living until the end. Tom Koutsoumpas, CEO of the National Partnership for Healthcare and Hospice Innovation, argues against the misconception that hospice is only for those imminently dying, advocating instead for its role in enhancing life quality. Innovations like telemedicine and robotic companion pets are highlighted as tools that improve care delivery. The

article also addresses disparities in hospice care, particularly for Black patients, and underscores the importance of equitable access. (*Forbes*, 08/25, forbes.com)

~ **“Transparency ‘Front, Center’ for AI in Hospice” explores how hospices are integrating artificial intelligence (AI) to enhance sustainability and care quality.** The article highlights the importance of transparency in measuring AI’s impact on efficiency, costs, and patient care. Dina Yankelewitz, CEO of Vitalis Care, emphasizes the need for hospices to navigate compliance and revenue challenges while leveraging AI for documentation and predictive analytics. Meg Pekarske from Husch Blackwell notes the rising costs and regulatory pressures that make AI a valuable tool for optimizing resource allocation and improving care delivery. (*Hospice News*, 7/23, hospicenews.com/2025/07/23/transparency-front-center-for-ai-in-hospice)

~ **“New Horizons and Persistent Obstacles for Hospice Volunteerism” explores the evolving landscape of hospice volunteerism, highlighting both opportunities and challenges.** Greg Schneider, president of the Hospice Volunteer Association, discusses how the diversification of volunteer services is hindered by regulations requiring volunteers to provide a minimum of 5% of patient care hours, excluding many common activities. The COVID-19 pandemic significantly impacted volunteer programs, but technology, including AI, offers new avenues for engagement and operational efficiency. Schneider emphasizes the potential of AI to enhance community collaboration and support. (*Hospice News*, 8/15, hospicenews.com/2025/08/15/new-horizons-and-persistent-obstacles-for-hospice-volunteerism)

~ **“Some Hospices Expand Reach; Others, Hit Sustainability Hurdles” highlights the contrasting fortunes of hospice providers amid financial and operational challenges.** Sanford Bemidji Home Care and Hospice in Minnesota has expanded its services to underserved rural areas, emphasizing a commitment to comprehensive care. Conversely, Iowa-based Hospice Serving Davis and Wapello Counties has closed due to funding cuts and rising costs, despite efforts to secure donations. Similarly, SpiriTrust Lutheran in Pennsylvania has shut down its hospice program, citing staffing shortages and inadequate reimbursement. These closures reflect broader industry challenges. (*Hospice News*, 8/18, hospicenews.com/2025/08/18/some-hospices-expand-reach-others-hit-sustainability-hurdles)

~ **“National Alliance for Care at Home Affiliates with Research Institute for Home Care” highlights a strategic partnership aimed at enhancing research and policy in home care and hospice.** The affiliation between the National Alliance for Care at Home and the Research Institute for Home Care seeks to expand research efforts to better inform policy decisions and improve clinical practices. Dr. Steve Landers, CEO of both the Alliance and the Research Institute, emphasized that this collaboration will demonstrate that home care is the preferred choice for patients and families. The partnership aims to address challenges in hospice and home-based care by leveraging combined resources and expertise. (*Hospice News*, 8/20, hospicenews.com/2025/08/20/national-alliance-for-care-at-home-affiliates-with-research-institute-for-home-care)

~ **“California Attorney General’s Office Reviewing Nonprofit Hospice Affiliations” discusses the recent scrutiny and regulatory measures applied to nonprofit hospice affiliations in California.** The California Attorney General’s Office, led by Rob Bonta, is now conditionally approving transactions involving nonprofit hospice care providers to prevent potential fraud and abuse. The first review involved the affiliation of Hospice East Bay with Chapters Health, which will expand into Oregon and California. Conditions for approval include

maintaining nonprofit status, ensuring quality care, and reporting compliance annually. (*Hospice News*, 8/22, hospicenews.com/2025/08/22/california-attorney-generals-office-reviewing-nonprofit-hospice-affiliations)

~ **“Hospice Physician: Regulations Hinder Medication Access for Patients with Dementia” discusses the challenges faced by hospice providers in prescribing antipsychotic medications to dementia patients in nursing homes.** Dr. Brian Haas, national medical director for Ascend Hospice, highlights that federal regulations require nursing homes to keep antipsychotic use below national averages, which complicates care for patients with severe dementia. Haas argues that these regulations can penalize facilities without considering individual patient needs, suggesting that hospice patients should be exempt from such restrictions. (*Hospice News*, 8/22, hospicenews.com/2025/08/22/hospice-physician-regulations-hinder-medication-access-for-hospice-patients-with-dementia)

~ **“Shedding ‘New Light’ on Barriers Among Underserved Hospice Patient Populations” explores the significant barriers to equitable hospice access among underserved groups, particularly Black communities.** The article highlights that racial mortality disparities persist, with Black patients experiencing higher death rates than their white counterparts, and suggests that this could be “fueled” by prejudices. Co-author Robert Kaestner emphasizes the need for interventions between treatment and outcomes to address these disparities. The study also notes that racial disparities in mortality decrease with age, but economic inequality and differential health investments continue to widen the Black-white mortality gap. (*Hospice News*, 08/25, hospicenews.com/2025/08/25/shedding-new-light-on-barriers-among-underserved-hospice-patient-populations)

~ **Husch Blackwell’s podcast “Where’s the Line: When Does Poor Quality Create False Claims Liability” explores the implications of substandard care in hospice and palliative care settings.** Hosts Meg Pekarske and Jonathan Porter discuss the Justice Department’s use of the ‘worthless services’ theory in a recent multi-million dollar settlement, highlighting its potential resurgence. They delve into the complexities of distinguishing between negligent and worthless care, emphasizing the challenges of litigating such cases under the False Claims Act. The discussion underscores the importance of understanding legal nuances in hospice care. (Husch Blackwell, 08/27, huschblackwell.com/newsandinsights/wheres-the-line-when-does-poor-quality-create-false-claims-liability)

~ **Husch Blackwell’s podcast episode “Where’s the Line: When Does Poor Quality Create False Claims Liability” explores the implications of substandard care in hospice settings and its potential to trigger false claims liability.** Hosted by Meg Pekarske and Jonathan Porter from Husch Blackwell LLP, the discussion highlights how the Justice Department has used the ‘worthless services’ theory to support claims, particularly following a recent multi-million dollar settlement. This development raises questions about whether such cases will become more common, impacting how hospices manage quality and compliance. (Husch Blackwell, 08/27, jdsupra.com)

~ **“NMDOJ charges ‘Imposter nurse’ who treated hospice patients in Albuquerque” highlights a serious breach of trust in hospice care.** A certified New Mexico nurse assistant, April Guadalupe Hernandez, is facing charges for allegedly stealing the identities of three nurses and illegally providing care to hospice patients, including nearly causing a morphine overdose. The New Mexico Department of Justice has indicted her on 19 counts, including identity theft

and nursing without a license, with potential penalties of up to 27.5 years in prison. Attorney General Raúl Torrez emphasized the gravity of exploiting vulnerable patients. (*KRQE News 13*, 08/28, krqe.com/news/crime/nmdoj-charges-imposter-nurse-who-treated-hospice-patients-in-albuquerque)

~ **“Transformative impacts of clinical pharmacists in hospice care” highlights the critical role of pharmacists in enhancing hospice care through symptom management and cost-effective prescribing.** The article emphasizes that pharmacists are essential in managing complex symptoms and advising on medication regimens, ensuring safe and effective patient care. They also contribute strategically at the organizational level by developing protocols and identifying cost-saving opportunities. As hospice care evolves, pharmacists’ expertise remains vital, especially in complex cases or when preferred medications are unavailable. Their collaboration with hospice teams ensures high-quality, patient-centered care. (*McKnight’s Home Care*, 08/20, mcknightshomecare.com/transformational-impacts-of-clinical-pharmacists-in-hospice-care)

~ **Hospice Analytics is seeking participants for various research initiatives, ranging from online surveys to clinical trials.** “Hospice Research Information” invites hospice leaders to engage with current research projects to advance the field and improve care. The aim is to connect hospice leaders with researchers, facilitating collaboration without any obligation to participate. Interested parties can sign up to receive information about potential research opportunities. This initiative underscores the importance of research in enhancing hospice care. (*Hospice Analytics*, 10/25, <https://www.nationalhospiceanalytics.com/hospice-care-products-and-services/hospice-research>)

~ **“Attorney General Bonta Conducts First-Ever Review of Proposed Hospice Affiliations” highlights the conditional approval of affiliations between Chapters Health System, Inc. and two California nonprofit hospice providers.** This marks the first review of nonprofit hospice affiliations by the California’s Attorney General’s Office, aiming to ensure continued access to hospice services. The conditions include maintaining nonprofit status, ensuring staffing levels, and providing specialty services like veteran’s programs and music therapy. These measures are designed to protect the public interest and enhance hospice care quality. (*State of California - Department of Justice*, 08/20, oag.ca.gov/news/press-releases/attorney-general-bonta-conducts-first-ever-review-proposed-hospice-affiliations)

~ **The American Academy of Hospice and Palliative Medicine (AAHPM) has announced Pierre M. Désy, MPH, CAE, as its new Chief Executive Officer, effective July 23, 2025.** Désy brings a wealth of experience from his previous roles as CEO of the Society of Gynecologic Oncology and the Foundation for Women’s Cancer, where he led strategic initiatives and enhanced organizational growth. His appointment is expected to further AAHPM’s mission of expanding access to high-quality palliative care and advancing the discipline through education, research, and public policy. Désy expressed his enthusiasm for joining AAHPM, highlighting his commitment to health equity and interdisciplinary collaboration. (*PR Newswire*, 05/20, prnewswire.com/news-releases/american-academy-of-hospice-and-palliative-medicine-announces-pierre-m-desy-mph-cae-as-new-chief-executive-officer-302460291.html)

~ **“Hospice was meant to offer dignity in death — but it fails the most marginalized” argues for a more inclusive approach to hospice care, highlighting systemic inequities.** The article

by Christopher M. Smith emphasizes that hospice care often excludes the unhoused, incarcerated, people of color, LGBTQ+ individuals, and those with disabilities. Smith calls for hospice programs to extend their reach to streets, shelters, and prisons, advocating for training in cultural humility and trauma-informed care. He stresses the need for a shift from profit-driven models to those centered on empathy and justice. (*STAT*, 08/26, <https://www.statnews.com/2025/08/26/hospice-care-inequity-terminal-justice-book/>)

~ **“Preparing Patients, Caregivers, and Hospice Staff for Hospice-Initiated Live Discharges: Social Work Perspectives” explores the complexities of live discharges from hospice care.** The study highlights the lack of a standardized discharge process, emphasizing the need for more research to support a reimbursable and systematic approach. Key themes include the challenges of preparing patients and caregivers, as well as the logistical and emotional hurdles faced by hospice staff. The findings underscore the intricacies involved in ensuring continuity of care during such transitions. (*Journal of Gerontological Social Work*, 05/09, <https://www.tandfonline.com/eprint/YTD4CUM9IU7UH5IATAXR/full?target=10.1080/01634372.2025.2503266>)

~ **A Teleios webinar, “Navigating the Wage Index: Insights from Industry Experts,” explores the challenges hospice providers face with Medicare’s outdated reimbursement systems amidst a shift towards home-based care models.** The webinar highlights a discussion with Annette Kiser and Judi Lund Person, who delve into the complexities of the 2026 Hospice Wage Index and its implications for hospice organizations. They address the minimal 2.6% rate increase against significant inflation, offering strategic insights for navigating these challenges. This conversation is crucial for hospice staff, leaders, and boards. (*Teleios Collaborative Network*, 8/20, teleioscn.org)

~ **“Hospices Nationwide Pursue Organic Growth with New Sites” highlights the expansion efforts of several hospice organizations across the U.S.** Hosparus Health is set to open a new facility in Louisville, Kentucky, supported by \$20 million in donations, while Heart to Heart Hospice has launched a new site in Kalamazoo, Michigan, driven by rising demand. Pathways Healthcare received approval for a new facility in Rhode Island, despite competition concerns, and Home Hospice of Grayson County opened a new inpatient facility in Texas, emphasizing accessibility regardless of patients’ ability to pay. These expansions reflect a growing need for hospice services nationwide. (*Hospice News*, 08/28, hospicenews.com/2025/08/28/hospices-nationwide-pursue-organic-growth-with-new-sites)

~ **“Publicly Traded Hospice Companies Seeking Acquisitions, Reporting Substantial Growth” highlights the significant growth and acquisition strategies of major hospice companies.** The article discusses how companies like VITAS Healthcare and Enhabit Inc. are experiencing leadership changes and exploring mergers and acquisitions to expand their reach. Notably, Addus Homecare Corp. has re-entered the hospice market with a \$21.3 million acquisition, while UnitedHealth Group’s Optum is acquiring Amedisys for \$3.3 billion. These moves reflect a broader trend of consolidation and growth in the hospice sector. (*Hospice News*, 08/28, hospicenews.com/2025/08/28/publicly-traded-hospice-companies-seeking-acquisitions-reporting-substantial-growth)

~ **“Conversational AI in Hospice Care: Risks and Benefits” explores the integration of conversational AI in hospice settings, highlighting both its potential and challenges.** The article discusses how AI technologies, like virtual assistants and chatbots, are being used for

tasks such as scheduling, medication reminders, and after-hours support. Dr. Wendy Sue Swanson emphasizes the importance of transparency and informed consent as AI becomes more prevalent in health care. The World Health Organization has also released guidelines to address ethical concerns associated with AI. (*Hospice News*, 8/29, hospicenews.com/2025/08/29/conversational-ai-in-hospice-care-risks-and-benefits)

~ **“The State of Hospice Dealmaking in Mid-Year 2025” explores the current challenges and potential future of mergers and acquisitions (M&A) in the hospice sector.** The article highlights that while deals are currently harder to close, there is optimism for increased activity in Q4 2025 and early 2026, contingent on potential interest rate cuts. Les Levinson from Robinson+Cole notes that due diligence has become more comprehensive due to economic and regulatory factors. (*Hospice News*, 09/03, hospicenews.com/2025/09/03/the-state-of-hospice-dealmaking-in-mid-year-2025)

~ **The podcast episode “Where’s the Line: When Does Poor Quality Create False Claims Liability” discusses the implications of substandard care in hospice settings and its potential to trigger false claims liability.** Hosted by Meg Pekarske and Jonathan Porter from Husch Blackwell LLP, the episode explores the ‘worthless services’ theory of liability, which has been used by the Justice Department in recent cases. A notable multi-million dollar settlement highlights the increasing attention on this issue, suggesting a possible rise in such cases. (*Husch Blackwell LLP*, 08/27, jdsupra.com)

~ **“Texas expands medical marijuana access under new law” highlights the recent changes to Texas’s Compassionate Use Program, which now includes hospice care patients among others.** The expansion, under House Bill 46, allows individuals with chronic pain, traumatic brain injuries, and Crohn’s disease to access medical marijuana. The law permits new delivery formats like patches and inhalable devices, while maintaining a THC limit of 10 milligrams per dose. The state plans to issue up to 15 licenses for dispensaries to improve access. Local residents largely support the changes, emphasizing the need for controlled access. (*KFOX14/CBS4*, 09/01, kfoxtv.com/news/local/texas-expands-medical-marijuana-access-under-new-law)

~ **“Exploring Hospice Care Innovations - Top News Stories, August 2025” highlights the evolving landscape of hospice care amid significant healthcare challenges.** The podcast, featuring host Chris Comeaux and guest Cordt Kassner, discusses how the potential bankruptcy of Medicare and rising employer premiums could lead to a major healthcare reform opportunity by 2026-2027. It emphasizes the role of AI, research, and innovation in shaping the future of hospice care, offering insights into the implications for providers and patients. (*Teleios Collaborative Network*, 9/3, <https://www.teleioscn.org/tcntalkspodcast/exploring-hospice-care-innovations-top-news-stories-august-2025>)

PALLIATIVE CARE NOTES

~ **The U.S. Conference of Catholic Bishops and the Catholic Health Association have endorsed the Palliative Care and Hospice Education and Training Act, a bipartisan bill aimed at expanding access to palliative care.** This legislation, reintroduced in the Senate, seeks to address critical gaps in palliative care by funding training programs, supporting research, and promoting public education. The bill aligns with Catholic teachings, emphasizing compassionate

care without endorsing euthanasia or assisted suicide. The endorsement highlights the importance of expanding the palliative care workforce and improving care delivery for seriously ill patients. (*Catholic News Agency*, 09/01, catholicnewsagency.com/news/266141/us-conference-of-catholic-bishops-catholic-health-association-endorse-palliative-care-legislation)

~ **“35 Years of Palliative Care Progress: What Lies Ahead for Society Engagement?”** explores the evolution of palliative care from a niche service to a global health priority. The article highlights the transition of palliative care from the 2007 ‘Umbrella’ strategy to the 2021 ‘House’ framework, emphasizing the need for equity and community involvement. Despite advancements, access to palliative care remains unequal, particularly in low- and middle-income countries. The authors stress the importance of political will, resource allocation, and community participation to address increasing health-related suffering by 2060. (*Journal of Pain and Symptom Management*, 08/14, <https://pubmed.ncbi.nlm.nih.gov/40818829/>)

~ **“Top Ten Tips Palliative Care Clinicians Should Know About the Future of Generative Intelligence”** explores the transformative role of artificial intelligence (AI) in palliative care and serious illness communication. The article highlights how AI-driven tools, such as predictive analytics and AI-assisted communication, can enhance care efficiency and patient-centered outcomes. It also emphasizes the need to address ethical, logistical, and equity considerations. This interdisciplinary insight aims to equip palliative care clinicians with strategies to effectively integrate AI into their practices. (*Journal of Palliative Medicine*, 8/16, <https://pubmed.ncbi.nlm.nih.gov/40824746/>)

END-OF-LIFE NOTES

~ **The article “Life-Prolonging Treatment Preferences and Their Association With Health Care Utilization and End-Of-Life Experiences in Older Adults”** explores the impact of life-prolonging treatment (LPT) preferences on healthcare utilization and end-of-life experiences. The study found that preferences for LPT did not significantly influence healthcare utilization, costs, or perceived quality of end-of-life care. Notably, those who accepted LPT for severe disability and pain had higher odds of dying in a hospital. The findings suggest that LPT preferences may not always align with actual care received, highlighting the need for further research into how preferences influence end-of-life care. (*Journal of the American Geriatrics Society*, 08/29, <https://agsjournals.onlinelibrary.wiley.com/doi/10.1111/jgs.70055>)

~ **“Georgia committee discusses physician-assisted death for terminally ill Georgians”** explores the complex issues surrounding medical aid in dying (MAID) for terminally ill patients. The article highlights the testimony of Jamie McNeil, whose sister Jennifer Bullard sought MAID due to ALS, emphasizing the need for control over her death to avoid locked-in syndrome. Dr. Adrienne Mims clarified that MAID is distinct from suicide and presents data from Oregon, where it is legal. Concerns about resource availability and potential financial incentives from insurance companies were also discussed. (*Georgia Recorder*, 8/25, georgiarecorder.com)

~ **“Informed Decision-Making Among Hospice Patients with Disabilities”** highlights the complexities of end-of-life planning for patients with intellectual and developmental disabilities (IDD). The article emphasizes the need for patient-centered care that prioritizes autonomy, noting that hospice and palliative care clinicians often feel unprepared to navigate

decision-making for IDD patients. The authors highlight the importance of understanding state-specific statutes and the role of surrogate decision-makers. The article also underscores the need for inclusive discussions that align with patients' values. (*Hospice News*, 8/22, hospicenews.com/2025/08/22/informed-decision-making-among-hospice-patients-with-disabilities)

~ **“A look at arguments around Colorado’s medical assistance in dying law” explores the contentious debates surrounding laws that allow terminally ill patients to end their lives with medical assistance.** The article highlights the case of Tim Hartley, a terminally ill patient who chose to utilize Colorado’s Medical Aid in Dying law, which permits doctors to prescribe lethal drugs to terminally ill patients. However, disability rights activists argue that such laws are discriminatory and pose a risk to people with disabilities. Despite the law, Hartley had to leave his hospice, run by a religious organization, to end his life elsewhere. His family felt the law allowed them to face mortality on their own terms. (*NPR*, 08/19, npr.org/2025/08/19/nx-s1-5487529/a-look-at-arguments-around-colorados-medical-assistance-in-dying-law)

~ **“Everyone Deserves a Dignified Death. But Will Everyone Get One?” is an opinion piece that explores the challenges facing nonprofit hospice care amid Medicaid cuts and profit-driven pressures.** The article highlights the transformation of end-of-life care since the 1970s, emphasizing the importance of nonprofit hospices that prioritize patient dignity over profits. It warns of the potential negative impact of nearly \$1 trillion in Medicaid cuts and the dominance of for-profit hospices. The piece calls for advocacy and policy changes to support community-based, compassionate hospice care. (*US News Opinion*, 8/18, usnews.com/opinion/articles/2025-08-18/health-death-medicaid-healthcare-hospice)

~ ***End of Life University*’s webinar “Ep. 516 Ethical Service for End-of-Life Workers with Kathy Ginn” explores the importance of ethical service in end-of-life care.** Ginn, a massage therapist, bodyworker, and End-of-Life Care Doula, discusses the transformative power of ethics in caregiving. She emphasizes the need to cultivate seven key qualities to enhance professional healing relationships and better serve those at the end of life. The episode highlights how these qualities can be assessed and improved to ensure integrity in service. (*End of Life University*, 09/01, eolupodcast.com/2025/09/01/ep-516-ethical-service-for-end-of-life-workers-with-kathy-ginn/)

~ ***People* magazine offers “This Calif. Woman Is Dying of Pancreatic Cancer: ‘Why I’m Choosing to End My Life in 2 Days,’” a story of Roseana Spangler-Sims, who plans to use California’s Medical Aid in Dying (MAID) law to end her life.** Diagnosed with stage 4 pancreatic cancer, Spangler-Sims found her treatment ineffective and her pain overwhelming, leading her to choose MAID. She hopes her story will raise awareness about MAID as an end-of-life option. Her decision is supported by her family, who will be with her when she takes the medication. “I’m glad I can take a graceful way out of this life and this pain,” she states. (*PEOPLE*, 08/29, people.com)

~ **“New Palliative Care Research Consortium to Tackle the Field’s Toughest Problems” highlights the establishment of the ASCENT consortium, funded by a \$64 million NIH award, to enhance palliative care research.** The consortium aims to improve quality of life for seriously ill patients by supporting research across various illnesses and care settings. Dr. Melissa Aldridge emphasizes its broad research scope, while Dr. Jean Kutner and Dr. Ab Brody stress the need to bridge gaps between practice and research. The initiative seeks to address

disparities and advocate for policy changes. (*Hospice News*, 8/28, hospicenews.com/2025/08/28/new-palliative-care-research-consortium-to-tackle-the-fields-toughest-problems)

~ **In “Voices: Mark Hendrix, CEO & Founder, nTakt, Inc.,” Mark Hendrix discusses the strategic considerations for hospice and home health agencies launching palliative care programs.** Hendrix emphasizes the importance of aligning a program with an agency’s mission and strategic goals, stating, “It’s not a check-the-box exercise.” He highlights the need for operational readiness, a clear patient volume plan, and a sustainable reimbursement model. Hendrix also stresses the significance of having a dedicated, mission-driven team to ensure program success. (*Hospice News*, 09/02, hospicenews.com)

~ **“Why Palliative Care is More Than Just End-of-Life Support” by Dr. Vishal Parackal highlights the broader scope of palliative care beyond terminal care.** The article emphasizes that palliative care aims to alleviate suffering and improve the quality of life for patients with serious illnesses, not just those at the end of life. It stresses the importance of a holistic approach, addressing spiritual, emotional, and psychological needs, and the necessity of strong communication across specialties. The piece also underscores the role of patient education and mental health assessments in enhancing care. (*KevinMD*, 09/01, kevinmd.com)

~ **“Palliative care researchers use qualitative data to understand the full picture of patients’ lives” highlights the importance of qualitative research in enhancing palliative care.** The article from St. Jude Research emphasizes how qualitative methods, such as patient interviews, complement quantitative data to provide a comprehensive understanding of patients’ experiences. This approach helps tailor interventions and improve care quality. Dr. Deena Levine notes that qualitative data adds depth to quantitative findings, enabling a holistic view of patient care. The integration of palliative care, especially in pediatric oncology, has shown to improve quality of life and reduce symptom burden. (*St. Jude Research*, 08/26, stjude.org)

GRIEF AND ADVANCE CARE PLANNING NOTES

~ **“Another Voice: Grief’s powerful effects must be understood and addressed” highlights the multifaceted impact of grief on individuals, emphasizing the importance of recognizing its serious health implications.** The article notes that grief can manifest physically, mentally, and emotionally, potentially leading to conditions like depression, anxiety, and PTSD. It stresses the importance of seeking mental health support, especially for those experiencing traumatic loss, to mitigate these risks. The piece urges awareness and proactive care. (*The Buffalo News*, 08/29, buffalonews.com)

~ **End of Life University’s webinar “Ep. 515 Collective Grief Rituals: Honoring Ancestors and Carrying Light” explores the significance of community-based rituals in addressing collective grief.** The episode highlights the ongoing cultural grief spiral, exacerbated by the COVID pandemic, and emphasizes the need for collective rituals to express and transform this grief. Dr. Karen Wyatt urges the death-positive movement to facilitate simple community gatherings to acknowledge and process grief, drawing inspiration from other cultures’ mourning practices. She states, “May we find ways, each in our own communities, to tend the tears of things, to honor our ancestors, and to carry light together through this dark season of grief.” (*End*

of Life University, 08/25, eolupodcast.com/2025/08/25/ep-515-collective-grief-rituals-honoring-ancestors-and-carrying-light)

~ **“Asking Older Adults With Impaired Cognition and Care Partners About Serious Illness Experiences Can Elicit Goals of Care During Advance Care Planning”** explores how serious illness experiences can shape end-of-life goals for older adults with cognitive impairment. The study highlights that these experiences often influence goals of care, ranging from longevity to comfort, and that negative clinician interactions can shift focus towards longevity, while severe disability or harm may emphasize comfort. Integrating these questions into advance care planning can clarify goals and improve decision-making. (*American Journal of Hospice and Palliative Medicine*, 08/13, <https://journals.sagepub.com/doi/10.1177/10499091251367337>)

~ **“IL law calls for annual report on prison hospice, palliative care”** highlights a new Illinois law mandating annual reports on hospice care for prisoners. Signed by Gov. JB Pritzker, the law requires the Illinois Department of Corrections to report demographic data on prisoners receiving hospice and palliative care by December 1 each year. This initiative aims to address inconsistencies in end-of-life care across different facilities, as noted by Rep. Nicole Grasse: “What is provided in various facilities is not consistently provided among all of the facilities.” The law, House Bill 2397, will take effect on January 1. (*WAND TV*, 08/15, wandtv.com/news/il-law-calls-for-annual-report-on-prison-hospice-palliative-care/article_627692bf-5ca4-4ef7-94e9-ba6c84e0ade0.html)

~ In **“Both my parents died. This letter explains how I kept going,”** Megan McArdle shares her personal journey of coping with the loss of both parents within a year. The article offers a heartfelt narrative on enduring the emotional turmoil of losing loved ones, emphasizing resilience and the inevitability of such experiences. McArdle’s reflections provide insights into the universal struggle of dealing with parental loss and the strength required to move forward. (*The Washington Post*, 09/02, [washingtonpost.com/opinions/2025/09/02/parents-death-coping/](https://www.washingtonpost.com/opinions/2025/09/02/parents-death-coping/))

OTHER NOTES

~ **“Why physician strikes are a form of hospice”** by Patrick Hudson, MD, explores the emotional and ethical dimensions of strikes by physicians, likening them to hospice care for the medical profession itself. Hudson argues that strikes are not acts of rebellion but rather a form of witnessing the decline of a system that no longer aligns with the values and ethics doctors trained for. He describes the emotional toll on physicians who continue to work within a system that feels increasingly disconnected from patient care. Strikes, he suggests, make visible the erosion of meaning in medical practice. (*KevinMD*, 08/24, kevinmd.com/2025/08/why-physician-strikes-are-a-form-of-hospice.html)

~ **“More Americans are choosing natural burials to minimize environmental impact”** highlights the growing trend of green burials as an eco-friendly alternative to traditional funeral practices. The number of cemeteries offering green burials has surged from 150 in 2016 to nearly 500 in 2025, driven by environmentally conscious individuals, particularly aging baby boomers. Green burials avoid embalming chemicals and synthetic materials, using biodegradable options instead, and often involve loved ones in the burial process. This shift reflects a broader cultural movement towards sustainable and personalized end-of-life practices. (*The Daily*

Climate, 08/26, <https://www.dailyclimate.org/more-americans-are-choosing-natural-burials-to-minimize-environmental-impact-2673922164.html>)

~ **“DFS Memorials Advocates for Modern End-of-Life Choices” highlights a shift towards direct cremation and personalized celebrations of life, reflecting evolving funeral trends.** This approach allows families to honor loved ones in cost-effective and personal ways, emphasizing simplicity and control. Nicholas V. Ille, Founder of DFS Memorials, notes that families are prioritizing affordability and meaningful remembrance. The article discusses the role of death doulas in providing holistic support and facilitating open dialogues about dying. This trend challenges traditional practices and empowers families to reclaim authority over end-of-life decisions. (*PR Newswire*, 08/19, prnewswire.com/news-releases/dfs-memorials-advocates-for-modern-end-of-life-choices-embracing-direct-cremation-and-personalized-celebrations-of-life-302533750.html)

~ **“70% of Americans Oppose Medicare Home Health Cuts, National Poll Finds” highlights significant public opposition to proposed Medicare home health funding cuts.** A poll by Fabrizio Ward, commissioned by the National Alliance for Care at Home, reveals that 70% of Americans oppose a 9% cut to Medicare home health funding, fearing it would jeopardize care for seniors and those with disabilities. The poll underscores bipartisan support for targeting fraud and waste instead of across-the-board cuts. Dr. Steve Landers, CEO of the Alliance, emphasizes that “cutting home health doesn’t save money – it hurts patients, worsens outcomes, and costs taxpayers more in the long run.” The Alliance urges Congress to reconsider the proposed cuts. (*National Alliance for Care at Home*, 09/04, <https://allianceforcareathome.org/70-of-americans-oppose-medicare-home-health-cuts-national-poll-finds/>)

~ **“Bipartisan Home Health Legislation Introduced to Protect Medicare Beneficiaries and Lower Medicare Costs” discusses the introduction of the Home Health Stabilization Act of 2025 by Representatives Kevin Hern and Terri Sewell.** This legislation aims to pause significant payment cuts proposed by CMS for 2026, which could harm access to home health care and increase Medicare costs. The Alliance emphasizes that home health is a cost-effective Medicare benefit, crucial for seniors, especially in rural areas. The bill seeks to prevent cuts that could lead to higher mortality and readmission rates. (*National Alliance for Care at Home*, 09/04, <https://allianceforcareathome.org/bipartisan-home-health-legislation-introduced-to-protect-medicare-beneficiaries-and-lower-medicare-costs/>)

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

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