

Study Finds Hospice Discharge Disparities Among Black and Hispanic Populations

A study published in the Journal of the American Medical Association (JAMA) Network Open found discharge rate and outcome disparities among Black and Hispanic populations. The study was conducted by co-authors from Care Dimensions, VNS Health, [Weill Cornell Medicine](#) and Emory University

Black and Hispanic patients are more likely to be discharged from hospice into a hospital and have shorter lengths of stay. These populations are more likely to face troublesome care transitions compared to white populations. These findings point out how health inequities impact end-of-life care among underserved populations.

The study examined the trajectories from 2014-2019 of more than 115,000 Medicare decedents. It also found that about 15% of patients are discharged from hospice due to unplanned hospitalizations or to seek treatment for their condition, among other reasons. Roughly 1 in 7 of these patients were either hospitalized or readmitted to hospice within two days of a discharge. Black and Hispanic patients had the highest rates of rehospitalization or death after a discharge and had a hospice length of stays of seven or less days. Researchers found that 42% of hospice patients die within 6 months after being discharged from hospice. These data points can help hospices better strategize their approach to care and improve patient

outcomes.

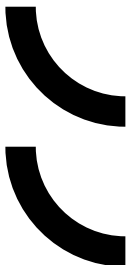
The study revealed that patients who receive general inpatient or respite care have a lower likelihood of hospitalization and readmission. Respite services may also reduce troublesome care transitions and support patients with more complex care needs. The researchers stated that widespread implementation of systematic discharge planning can foster better care transitions for Black and Hispanic patients.

Provider collaboration and more awareness are key to address needs of underserved populations. Adjusting for hospice reimbursement that discourages discharge can also reduce costly care and readmission.

Read the full article [here.](#)

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