

## Patients with lower incomes less likely to die at home

February 25 2013



Patients with limited financial resources are less likely to die at home, according to research published online Feb. 18 in *JAMA Internal Medicine*.

(HealthDay)—Patients with limited financial resources are less likely to die at home, according to research published online Feb. 18 in *JAMA Internal Medicine*.

Joshua S. Barclay, M.D., the from University of Virginia in Charlottesville, and colleagues analyzed data from the central administrative and clinical database of a for-profit, multi-state hospice care provider (Jan. 1, 1999, to Dec. 31, 2003) and correlated it to zip codes matched to U.S. census tracts to generate median annual household incomes, separated into \$10,000 increments (≤\$20,000 to >\$50,000).

The researchers found that, of the 61,063 enrollees admitted to routine care in a private residence, 13,804 (22.61 percent) transferred from



home to another location (such as an inpatient hospice unit or nursing home) with hospice care before death. Transferred patients had a significantly lower mean median household income (\$42,585 versus \$46,777) and were significantly less likely to have received any continuous care (49.38 versus 30.61 percent). Continuous care was received for a median of four days. For patients who did not receive continuous care, the odds of transfer from home before death increased with decreasing median annual household incomes (odds ratio range, 1.26 to 1.76). Transfer from home was not predicted by income for patients who received continuous care.

"<u>Patients</u> with <u>limited resources</u> may be less likely to die at home, especially if they are not able to access needed support beyond what is available with routine <u>hospice care</u>," the authors write.

**More information:** Abstract

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