

Hospice care doesn't up costs for nursing home decedents

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(HealthDay)—For long-stay nursing home (NH) decedents, use of

hospice does not increase Medicare costs in the six months before death, according to a study published online April 5 in the *Journal of the American Geriatrics Society*.

Kathleen T. Unroe, M.D., from Indiana University in Indianapolis, and colleagues conducted a [retrospective cohort study](#) to examine costs for long-stay (more than 90 days) NH decedents with and without hospice care. A 1999-to-2009 data set of linked Medicare and Medicaid claims was analyzed. The Medicare costs were calculated for two, seven, 14, 30, 90, and 180 days before death; for dual-eligible beneficiaries, Medicaid costs were also calculated.

The researchers found that 35 percent of the 2,510 long-stay NH decedents received hospice. The mean length of hospice was 103 days, and the median was 34 days. For all time periods up to and including 90 days before death, hospice users had lower total Medicare costs in propensity score analyses. Among dual-eligible beneficiaries, hospice users had significantly lower overall costs and Medicare costs up to 30 days before death. Except for the two-day time period, Medicaid costs were not different between the groups.

"In this analysis of costs to Medicare and Medicaid for long-stay NH decedents, use of [hospice](#) did not increase costs in the last six months of life," the authors write.

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