

**Return to the [referring page](#).**

---

[Las Vegas SUN](#)

---

November 18, 2007

## **Editorial: A morbid six-month deadline**

### **Medicare hospice patients who live longer than expected lose their coverage**

Only in the context of government reimbursements could a terminally ill person's good fortune to live longer than expected present a major problem.

Such is the predicament at many hospice programs throughout the country today.

With advances in modern medicine, many hospice patients are outliving their six-month prognoses to die. This is a problem only in the sense that Medicare's coverage is capped at \$21,410.

At the reimbursement rate of \$117 a day, that amount of money runs out after about six months.

Hospice as a movement traces to the 1960s. Its name derives from the word "hospitality." The first hospice in the United States opened in 1974, in Connecticut, and today there are more than 3,200 hospice programs across the country.

Hospices were never intended to cover the costs of major operations or procedures undertaken to save lives. Their mission is to provide daily care for dying people so their final days can be spent as pain-free and with as much dignity as possible.

Medicare coverage began in 1982. To be eligible for the coverage, federal rules say, a patient must have a doctor's prognosis of no more than six months to live.

Prognoses for cancer patients have been the most accurate at predicting impending death. So for many years the Medicare hospice benefit went mostly to cancer patients. But in 1998, Congress expanded the Medicare benefit to add patients whose diseases were less predictable than cancer, according to a Newhouse News Service report last week.

The report noted that although the dollar amount of the cap over the years has been adjusted for inflation, it has never been adjusted to account for hospice care extending past six months.

The result is that many hospices, which also receive income from individual and group donations, are being forced to repay Medicare for any reimbursements they received beyond a patient's eligibility. The payments in total can be staggering - more than \$500,000 for some hospices.

Sen. Pete Domenici, R-N.M., supports a three-year freeze on the refunds. That would allow time to study not only whether the cap should be increased, but also whether hospice admission policies should be tightened.

We support hospice care and believe a freeze of some reasonable duration is necessary. If some hospices are consciously admitting people too soon, that should be corrected. But we suspect the main problem is a benefit cap that needs updating.

For caregivers, the comforting promise of hospice is hard to keep when they must trouble patients in their final weeks - and their families - with news about expiring reimbursement benefits.

---

**Return to the [referring page](#).**

[Las Vegas SUN main page](#)

---

**Questions or problems? [Click here](#).**

*All contents copyright 2005 Las Vegas SUN, Inc.*