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August 8, 2017

Ms. Elizabeth Brown
Healthcare Planning and CON Section
Division of Health Service Regulation
State Health Coordinating Council
NC Department of Health and Human Services
809 Ruggles Drive
2701 Mail Service Center
Raleigh, NC 27699-2701

RE: Continuum Care Hospice – California
Petitioner Requesting Adjusted Need Determination
Proposed 2018 SMFP

Dear Ms. Brown,

Hospice & Palliative Care Charlotte Region (HPCCR) is submitting this document in response to the petition from Continuum Care Hospice of Oakland California (Continuum). Continuum has filed a petition for an adjusted need determination in Mecklenburg County for an additional Hospice Home Care Office. While Continuum states that the rationale behind their petition is “because there is a greater need for rectifying the disparity in Mecklenburg County than in any other North Carolina county”, Continuum provides only minimal evidence to support this claim. Continuum also ignores readily available data that confirms that their claim is not factually accurate.

Throughout the petition, much of Continuum’s evidence is based upon generic articles or anecdotal evidence. In our response, HPCCR provides data that demonstrates that Mecklenburg County hospice providers do a highly effective job in serving our African American and non-White citizens in the county. In addition, Mecklenburg County hospice providers are very active in our community with minority outreach and end-of-life care educational events in the African American community.

Minority and African American Hospice Services in Mecklenburg County

Hospice death data is not available for payer sources other than Medicare. Medicare data alone does not provide the full picture of hospice utilization as minority’s deaths are proportionally higher in non-Medicare age categories. The only hospice utilization data provided in the Continuum petition was 2014

Medicare data which, per the petition, states that 51.5% of Mecklenburg County's Medicare beneficiaries utilized hospice and that 55% of these beneficiaries were white and 42% were African American. The petitioner references a 12.6% difference between the utilization by race. When analyzing the 2014 Mecklenburg death data, from the North Carolina State Center for Health Statistics, Mortality Statistics data, among the Medicare appropriate age category of 65 and over, we see that there were 2,733 white deaths in this age category compared to 1,020 African American deaths. This is a ratio of nearly three White deaths for every one African American death. In terms of total Mecklenburg County deaths, White deaths make up 62.06% of total deaths while African Americans make up 32.13% of total deaths, a ratio of approximately two to one. Clearly there exists a variance in death rates between Whites and African Americans with the progression of age. It should also be noted that among all Mecklenburg County deaths that approximately 55% of African Americans die at ages 65 and over while 77% of whites die at ages 65 and over. If the petitioner's data is indeed accurate, it actually presents, on a proportional basis, a much higher hospice utilization among Medicare eligible African American's than whites.

While hospice death data by race among all payer classes is not available, North Carolina does collect hospice admission by race on the Hospice Homecare Agency Annual Data Supplement to Licensure Application. The data is not specific to a county but is specific to a license and does provide some perspective of hospice admissions by race in a generalized geographic region. In terms of African American admissions, as a percent of total admissions, the aggregated Mecklenburg County licensure data ranks 24th in the state at 20.96%¹, out of the 86 counties that have a licensed hospice facilities located in their county. The Mecklenburg County data ranks 20th in the state for all aggregated county licensure data, for non-White admissions, with a rate of 28.09%². HPCCR believes these numbers support our position that Mecklenburg County hospice providers are effective, relative to all counties in the state, in serving their African American population. These efforts are even more significant given that 39.22% of all African American deaths in Mecklenburg County occur in the hospital where admitting patients to hospice services can be more challenging.

As stated in the petition, nationally in 2014, only 7.6% of hospice patients were African American. Based upon the most recently published North Carolina hospice data, 13.55% of hospice admissions were African American. However, the most recent aggregated Mecklenburg licensure data shows hospice admissions at 20.96%, a rate 54.7% higher than the state average. We believe this data conclusively refutes the claim of Continuum Care Hospice that Mecklenburg County has a greater disparity in service to the African American community than any other county in North Carolina.

It is important to note that North Carolina does not currently collect county specific admission or death data by race therefore adequate data does not currently exist to establish a need determination for hospice homecare services in a specific geographic service area based on race.

Occurrence of Disease

On page three of the petition, Continuum states that "African Americans suffer inequitably higher rates of three of the leading causes of death in the county", cancer, heart disease and stroke. Based upon

¹ 2017 North Carolina Hospice Annual Data Supplement to Licensure Application

² 2017 North Carolina Hospice Annual Data Supplement to Licensure Application

recent data from the North Carolina Vital Statistics for the leading causes of death in Mecklenburg County, the rates of occurrence are rather similar between Whites and African Americans; with cancer representing 22.3% of African American deaths and 21% of Whites deaths. For diseases of the heart, 19.4% of African American deaths can be attributed to this disease category while the percent of deaths for Whites is 18.8%. (See attached Table, Exhibit A, Leading Causes of Death)

Diversity of Staff

One of the concerns raised in the Continuum petition was the racial makeup of hospice staff and their ability to relate to African American patients. Hospice & Palliative Care Charlotte Region does not have employment data for all Mecklenburg County hospice providers, but our data shows that 29.94% of our workforce is African American. (See attached EEO1 summary report, Exhibit B)

Community Outreach

For 39 years, Hospice & Palliative Care Charlotte Region has intentionally and specifically targeted minority populations, especially the African American community, with the goal of increasing awareness and utilization of hospice and palliative medicine in Mecklenburg County. For example, current outreach measures to the African American community include partnering with African American churches, African American community and business organizations and African American academic institutions.

Our outreach to African American churches has focused on educating clergy and congregation members on hospice care, palliative medicine, advanced directives and coping with grief and loss. **For example:** Hospice & Palliative Care Charlotte Region has a long-standing, trusting relationship with *Friendship Missionary Baptist Church*, one of the largest African-American churches in Mecklenburg County. We have held our annual staff meetings on their campus the past three years as well as numerous education activities including a significant area-wide training for African American clergy and other members of the community on the *Diagnosis and Treatment of Spiritual Pain*. This three-hour seminar, which was planned by Friendship's associate pastor and Hospice & Palliative Care Charlotte Region's Spiritual Care Director, was attended by over 60 people. We have also done grief care training for lay ministers at Friendship and specific brochures are always available in the church narthex on hospice, palliative medicine, grief and loss, in-patient hospice care and volunteer opportunities.

Greater Providence Baptist Church is the home church of one of our four African-American staff chaplains (out of 14) and he regularly serves as a resource to the congregation. Additionally, we have provided specific education to the congregation about hospice and palliative medicine.

Nation's Ford Community Church choose Hospice & Palliative Care Charlotte Region to provide specific training in hospice care, advance care planning and grief and loss for its annual Deacon Family Ministry training day, a training that equips dozens of lay ministers to take an active role in the care of the congregation.

Progressive Baptist Church has utilized Hospice & Palliative Care Charlotte Region to provide educational events including a Lunch-n-Learn on all aspects of hospice and end of life care. The

church displays a Hospice & Palliative Care Charlotte Region banner on its property to point community members to our organization as the source for end of life care.

Just last month, Hospice & Palliative Care Charlotte Region held an in-service presentation at *Rockwell AME Zion Church* about hospice services and Advance Care Planning, particularly the Five Wishes document.

First Baptist Church-West hosted a Hospice & Palliative Care Charlotte Region memorial service for the survivors of our patients and their families as well as the community at large and also hosted one of our annual Light Up A Life interfaith memorial services.

Another one of the larger African-American churches in Mecklenburg County, *The Park Church* has called upon Hospice & Palliative Care Charlotte Region to participate in their PREPARE series for the past 12 years. This series addresses all aspects of end-of-life care. Hospice & Palliative Care Charlotte Region also provided a weeknight grief series for lay ministers, led by the spiritual care director and one of our African American chaplains.

We annually participate in health fairs at African American churches, including those at *Temple Church International and Temple of Refuge Church*.

Additional outreach efforts to 36 predominantly African American churches within Mecklenburg County have been conducted since January 2015. **Our outreach efforts to these churches includes:**

- Meetings with Pastors and congregation members to provide education on hospice and palliative medicine services available in Mecklenburg County.
- We provide educational literature to these communities of faith on hospice, palliative medicine, advance directives, Hospice & Palliative Care Charlotte Region Levine & Dickson Hospice House Locations, volunteering opportunities, coping with grief and loss and other end of life issues.
- We provide educational bulletin inserts to further education the church members on end of life care
- Open invitations are extended to conduct onsite education sessions to these communities of faith on all end of life care issues.
- We serve as a resource to the pastor and church members should they have any questions about hospice care in their community. Field calls from church pastors, staff and membership to answer questions on end of life care issues and to assist families and patients who need care to obtain the necessary paperwork to have access to our care.
- We offer grief counseling individually and in a group setting to church membership
- We offer our chaplains and faith community educator to attend and participate in memorial services conducted within these communities of faith
- We partner with Parish Nurses within these communities of faith to facilitate access to hospice services for hospice eligible church members and staff
- Participate and sponsor health fairs within these communities of faith to provide end of life education to the church membership and to the surrounding community
- We regularly advertise in church bulletins to create awareness about hospice and palliative medicine.

Hospice & Palliative Care Charlotte Region also partners with many local predominantly African American civic organizations to further our mission of educating the African American Community about the benefits of hospice and palliative medicine and to dispel the many myths about hospice care. When an elderly African American resident died traumatically at a high-rise apartment building operated by the Charlotte Housing Authority, we were called to provide critical incident stress management services (CISM) to the residents who were grieving his loss. Since January 2015 we have partnered with *The Bette Rae Thomas Recreation Center*, *The Harvey B Gantt Cultural Center*, *The McCrory YMCA*, *Mecklenburg County DSS*, *The Tuesday Morning Breakfast Forum*, multiple Mecklenburg regional Senior Nutrition Program sites, *The Centralina Area Agency on Aging*, and *Healthy Churches 2020*- a 3½-day, nationally recognized conference to find answers to today's complex health issues in our inner cities and rural areas; bringing together faith leaders, leading medical experts, health directors, community health workers, members of congregational health ministries and public health professionals to increase the skills and knowledge of those responsible for leading congregational and community health ministries. **Our outreach efforts to these civic organizations includes:**

- Provide education on hospice and palliative medicine services available in Mecklenburg County.
- Provide educational literature to these communities of faith on hospice, palliative medicine, advance directives, Hospice & Palliative Care Charlotte Region Levine and Dickson Hospice House Locations, volunteering opportunities, coping with grief and loss and other end of life issues.
- Open invitations are extended to conduct onsite education sessions to these civic organizations on all end of life care issues.
- We serve as a resource to staff and organization members should they have any questions about hospice care in their community. Field calls from staff and membership to answer questions on end of life care issues and to assist families and patients who need care to obtain the necessary paperwork to have access to our care.
- We offer grief counseling individually and in a group setting to organization membership
- Provide sponsorship and participation in health fairs and community education events organized by these civic groups

Hospice & Palliative Care Charlotte Region has also provided end-of-life care education at *Johnson C. Smith University*, a historically African American University located near Center-City Charlotte. We provided a guest clinician to speak about hospice and palliative medicine services at a Death and Dying class and also provided training to resident advisors on how to support grieving students through the development of the program "*Students and Grief on the College Campus*" which was also a poster presentation at a national clinical conference sponsored by the *National Hospice & Palliative Care Organization*. We provide classroom training on hospice and palliative care and dealing with end-of-life issues twice a year to the *Health & Human Services Department at Central Piedmont Community College*. Also, through *Central Piedmont Community College*, we have provided in-service training on dealing with grieving residents to managers working with *The Charlotte Housing Authority*.

Conclusion

It is the position of Hospice & Palliative Care Charlotte Region that the petitioner, Continuum Care Hospice, did not provide data to support their request for an adjusted need determination for a Hospice Home Care Office in Mecklenburg County. Continuum only provided one data set in their petition regarding hospice utilization by race and that data showed a greater relative hospice utilization among African Americans than Whites, a result contrary to the basis of their petition. In addition, HPCCR has provided numerous data points that support our position that Mecklenburg County hospice providers are effective in serving African American populations. While the petitioner states that they do not propose a change in the hospice methodology of the SMFP, race is not a determinate in the current need methodology. Clearly the methodology would have to be modified, and data collected, to identify a need based on the criteria of race.

In conclusion, we ask that the North Carolina Healthcare Planning and CON Section, along with the State Health Coordinating Council, reject the petition submitted by Continuum Care Hospice for an adjusted need determination for a Hospice Homecare Office in Mecklenburg County.

Sincerely,



Peter A. Brunnick
Chief Executive Officer
Hospice & Palliative Care Charlotte Region