

2005

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Wisconsin  
Hospices  
and Patients

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*Bureau of Health Information and Policy  
Division of Public Health  
Wisconsin Department of Health and Family Services*

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Hospices and Patients

2005

*December 2006*

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*Bureau of Health Information and Policy  
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## Foreword

This report presents selected statistics on Wisconsin hospices and patients in 2005. The source of data for this document is the Annual Survey of Hospices, which was conducted by the Bureau of Health Information and Policy, Division of Public Health (DPH), Department of Health and Family Services, in cooperation with Wisconsin-licensed hospices; the Bureau of Fee-for-Service Health Care Benefits, Division of Health Care Financing; and the DHFS Office of Quality Assurance. Wisconsin HOPE (Hospice Organization and Palliative Experts) has endorsed this survey.

The Bureau of Health Information and Policy would like to acknowledge and thank the personnel of Wisconsin hospices who provided information on their services and patients, and Wisconsin HOPE for its endorsement of the survey.

Yiwu Zhang prepared this report. Jane Conner coordinated and implemented the data collection and editing activities. Kitty Klement, LuAnn Hahn and Kim Voss implemented survey follow-up and data editing activities. Patricia Nametz edited the report. Review and comment were provided by Rita Hallett in the Bureau of Fee-for-Service Health Care Benefits, and Marianne Missfeldt in the Office of Quality Assurance. The report was prepared under the supervision of Judith Nugent, Chief, Health Care Information Section, and the overall direction of Patricia Guhleman, Interim Director, Bureau of Health Information and Policy.

Suggestions, comments and requests for additional hospice data may be addressed to:

Yiwu Zhang  
Bureau of Health Information and Policy  
Division of Public Health  
Wisconsin Department of Health and Family Services  
P.O. Box 2659  
Madison, WI 53701-2659  
Telephone: (608) 267-7809  
E-mail: zhangyw@dhfs.state.wi.us

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## **Introduction**

### **Background**

In general, *hospice* is a program that provides care to terminally ill persons who have a life expectancy of 6-12 months. (The patient must have a medical prognosis of 12 months or less to be eligible to receive services from a Wisconsin-licensed hospice. Medicare requires a prognosis of 6 months or less to elect the Medicare hospice benefit.) The goal of hospice is to care for people in the comfort of their own homes, including when “home” is a nursing home, community-based residential facility, adult family home, or other setting. “Hospice” can be an organization, a program within an organization, or a place (for details, see Wisconsin Administrative Code HFS 131).

Hospice care is significantly different in goals and emphasis from traditional medical practice. The goal of hospice care is palliative (seeking to improve patient comfort and to lessen pain and other symptoms of illness) rather than curative. It also emphasizes home care rather than institutional care, addresses the psychological, social, spiritual, and physical needs of the patient, and provides supportive services to the family. Volunteers are a unique component in hospice care.

Hospice care is provided by an interdisciplinary team of professionals including nurses, physicians, social workers, counselors (bereavement, spiritual, dietary, and other), nursing assistants, volunteers and therapists. The services provided include clinical pain management, personal hygiene maintenance, emotional and spiritual counseling, bereavement support, medications, medical supplies and equipment, inpatient stays if necessary, and ancillary services such as physical, occupational, and speech therapy.

Hospice services are available to all age groups, from newborn to elderly. Hospice services may be covered by Medicare, Medicaid (Medical Assistance), and private insurance companies.

### **Data Collection and Report Preparation**

The 2005 survey population consisted of all 62 hospices licensed by the State of Wisconsin to operate in 2005. The survey instrument, prepared by the Bureau of Health Information and Policy (BHIP), was mailed with the Hospice Annual Report (licensure) form to all Wisconsin-licensed hospices in early January, 2006 from the Office of Quality Assurance. The survey utilizes a survey date of December 31; that is, hospices are asked to report some survey items (such as number of patients) as of that date. Other data items (such as the number of patient days and the number of admissions and discharges) were reported for all of calendar year 2005. Staffing information was based on the number of personnel employed by hospices during the week of December 4-10, 2005.



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## Key Findings

- There were 62 hospices licensed to operate in Wisconsin in 2005, compared to 61 in 2004. One proprietary hospice opened in 2005.
- There were 3,104 hospice patients on December 31, 2005, a 16 percent increase from December 31, 2004. There were only 1,381 patients on December 31, 1999.
- Total hospice patients served increased 8 percent, from 18,213 patients in 2004 to 19,679 patients in 2005.
- The total number of FTE hospice employees increased 16 percent in 2005.
- The number of FTE RNs working in Wisconsin hospices in 2005 increased 20 percent from the previous year, FTE LPNs increased 59 percent, and FTE hospice aides increased 7 percent.
- Statewide, 56 percent of all hospice volunteer hours were spent on patients (compared to 67 percent in 2004), and the rest were for office support, administrative services, and other activities.
- The number of hospice beds in hospices operating an inpatient facility increased 16 percent in 2005; the number of hospice patient days in these facilities grew 26 percent.
- In 2005, 48 percent of Wisconsin hospice patients had a principal diagnosis of cancer, the same proportion as in 2004 (60 percent in 2001). Seventeen percent had a principal diagnosis of end-stage cardiovascular disease, compared to 16 percent in 2004.
- Thirty-two percent of hospice patients were referred to the hospice by a physician, and 31 percent were referred by a hospital. In 1999, 41 percent of hospice patients were referred by a physician and 24 percent were referred by a hospital.
- In 2005, total discharges from Wisconsin hospices increased 7 percent (from 16,151 in 2004 to 17,329 in 2005), after a 19 percent increase in 2004.
- Eighty-six percent (14,900) of all Wisconsin hospice discharges in 2005 were deaths.
- In 2005, the hospice utilization rate among people aged 65 and older was 23 patients per 1,000 population in this age group, an 8 percent increase from 2004 (21.3 per 1,000).
- The hospice utilization rate among people aged 85 and older was 62.4 per 1,000 population in 2005, a 10 percent increase from 2004 (56.6 per 1,000).
- The total number of hospice patient days increased 15 percent in 2005, after a 19 percent increase in 2004 and a 16 percent increase in 2003.
- A length of stay of fewer than 60 days was reported for 76 percent of the hospice patients who died or were discharged in 2005 (down from 78 percent in 2004).
- Thirty-three percent of hospice patients died or were discharged within 7 days of admission to a hospice program in 2005, down from 34 percent in 2004.
- The number of hospice admissions increased 8 percent, from 16,502 in 2004 to 17,753 in 2005.

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- Seventy-nine percent of hospice patients admitted in 2005 had Medicare as their primary pay source (vs. 77 percent in 2004 and 76 percent in 2003). Eight percent of admissions had private insurance.
  - A total of 8 percent of hospice patients admitted had Medicaid as primary pay source, either Medicaid alone (3 percent), or Medicaid and Medicare (5 percent).
  - On December 31, 2005, 82 percent of hospice patients had Medicare as their primary pay source (compared with 80 percent in 2004 and 77 percent in 2003), 5 percent had private insurance, 2 percent had Medicaid only, and 8 percent had both Medicare and Medicaid.
  - Total hospice patient deaths increased 6 percent between 2004 and 2005, while total hospice patients served increased 8 percent.

## Hospice Characteristics

**Table 1. Hospice Services and Patients by Hospice Ownership Type, Wisconsin 2005**

	Total	Ownership of Hospice					
		Governmental		Nonprofit		Proprietary	
		Number	Percent	Number	Percent	Number	Percent
Number of Hospices	62	3	5%	51	82%	8	13%
Number of Unduplicated Hospice Patients	19,679	108	1	15,486	79	4,085	21
Number of Hospice Patients on December 31, 2005	3,104	21	1	2,196	71	887	29
Average Daily Census for Calendar Year 2005	2,929	16	1%	2,088	71%	825	28%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: See Technical Notes for an explanation of the unduplicated patient count.

- There were 62 hospices licensed to operate in Wisconsin in 2005, compared to 61 in 2004. One proprietary hospice opened in 2005.
- Nonprofit organizations made up 82 percent of hospices and served 79 percent of all hospice patients.
- The eight proprietary hospices (13 percent) served 21 percent of all hospice patients.
- There were 3,104 hospice patients on December 31, 2005, a 16 percent increase from December 31, 2004. There were only 1,381 patients on December 31, 1999.
- Total hospice patients served increased 8 percent, from 18,213 patients in 2004 to 19,679 patients in 2005.

**Table 2. Hospice Certification and Accreditation, Wisconsin 2000-2005**

Year	Number of Hospices			
	Total Number of Hospices	Medicare Certified	Medicaid Certified	JCAHO or CHAP Accredited
2000	61	59	57	35
2001	61	60	58	35
2002	59	58	56	34
2003	60	59	58	34
2004	61	59	58	34
2005	62	61	61	34

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Of the 62 Wisconsin-licensed hospices, 61 reported they were Medicare-certified providers and 61 reported they were Medicaid-certified providers.
- Fifty-five percent (34) of the 62 hospices reported that they were accredited by an organization such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), or the Community Health Accreditation Program (CHAP).

## Hospice Characteristics

**Table 3. Full-time Equivalent (FTE) Employees of Hospices by Ownership Type, Wisconsin, December 2005**

Employee Category	Total		Ownership of Hospice		
	Number	Percent	Governmental	Nonprofit	Proprietary
Managing Employee/ Administrators	95	6%	1	78	15
Physicians	7	0	0	5	2
Registered Nurses	548	35	4	434	111
Licensed Practical Nurses	86	5	0	54	32
Hospice Aides	303	19	1	222	80
Registered Physical Therapists	2	0	0	2	0
Registered Occupational Therapists	2	0	0	2	0
Speech/Language Pathologists	0	0	0	0	0
Bereavement Counselors	45	3	0	36	9
Social Workers	137	9	1	113	24
Dietary	11	1	0	10	0
Volunteer Coordinators	39	3	0	31	9
Chaplains	48	3	0	31	17
Clerical/Office Support	228	14	0	194	33
Other	33	2	0	23	10
<b>Total</b>	<b>1,583</b>	<b>100%</b>	<b>7</b>	<b>1,235</b>	<b>342</b>

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: The count of employees was from the week of December 4-10, 2005.

- The total number of FTE hospice employees increased 16 percent in 2005 (to 1,583 from 1,360 in 2004); the number of patients on December 31 also increased 16 percent.
- The number of FTE RNs working in Wisconsin hospices in 2005 increased 20 percent from the previous year, FTE LPNs increased 59 percent, and FTE hospice aides increased 7 percent.

**Table 4. Number of Hospice Volunteers and Hours of Volunteer Services, Wisconsin 2005**

	Total	Governmental		Nonprofit		Proprietary	
		Number	Percent	Number	Percent	Number	Percent
Number of Volunteers	4,936	53	1%	4,572	93%	311	6%
Hours of Volunteer Services:							
Total Hours	219,009	832	<1	200,838	92	17,339	8
Patient Services	122,231	579	<1	114,531	94	7,121	6
Office Support/Adminis. Services	53,074	167	<1	46,898	88	6,009	11
Other Activities	43,704	86	<1%	39,409	90%	4,209	10%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- In 2005, 93 percent of all hospice volunteers worked in nonprofit hospices (compared to 95 percent in 2004), while 6 percent worked in proprietary hospices (compared to 4 percent in 2004).
- Statewide, 56 percent of all volunteer hours were spent on patients (compared to 67 percent in 2004), and the rest were for office support, administrative services, and other activities.

## Hospice Characteristics

**Table 5. Hospice Facility Operation and Contracts with Other Facilities, Wisconsin 2005**

	Number	Percent
Total number of hospices	62	100%
Total number of hospice patient days	1,065,590	
Number of hospices operating a residential facility	13	21
Number of hospice beds in these facilities	147	
Number of hospice patient days in these facilities	27,922	
Number of hospices operating an inpatient facility	8	13
Number of hospice beds in these facilities	131	
Number of hospice patient days in these facilities	16,593	
Number of hospices providing palliative and supportive services for individuals who have not elected hospice	10	16
Number of patients	834	
Number of hospices that had a contract with hospitals/SNFs for symptom management and/or inpatient respite care	60	97
Number of contracts	451	
Number of acute care days	13,680	
Number of respite care days	3,460	
Number of hospices that had a contract with a nursing facility for inpatient respite services	5	8
Number of contracts	31	
Number of respite care days	10	
Number of hospices that had a contract with a nursing facility for hospice routine care	58	94
Number of contracts	692	
Number of hospice patients residing in nursing homes	4,200	
Number of days spent in nursing homes by hospice patients	238,581	
Number of hospices that had a contract with a community-based residential facility (CBRF)	48	77
Number of contracts	831	
Number of hospices that had a contract with an adult family home	16	26
Number of contracts	28	
Number of hospices that had a contract with a residential care apartment complex (RCAC)	33	53
Number of contracts	103	
Number of hospices that had a contract with an HMO or other managed care organization	33	53%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Hospice patients could have more than one type of stay during the year.  
See Technical Notes for definitions of "routine care," "respite care," and other hospice levels of care.

- In 2005, the number of hospices that operated a residential facility increased by one from 2004. The number of beds in these facilities increased 5 percent, and the number of patient days in these facilities increased 8 percent.
- The number of hospice beds in hospices operating an inpatient facility increased 16 percent in 2005; the number of hospice patient days in these facilities grew 26 percent.
- The number of hospice acute care days under contracts with hospitals or skilled nursing facilities (SNFs) for symptom management and/or inpatient respite care increased only 17 days (from 13,663 in 2004 to 13,680 in 2005), while the number of respite care days increased 33 percent (from 2,595 to 3,460).
- The number of contracts that hospices had with nursing facilities for hospice routine care services increased 11 percent (from 626 in 2004 to 692 in 2005). The number of hospice patients residing in nursing homes under these contracts was up 9 percent, and the number of days spent in nursing homes by these hospice patients decreased 5 percent.

## Characteristics of Hospice Patients

**Table 6. Principal Diagnosis of Hospice Patients, Wisconsin 2005**

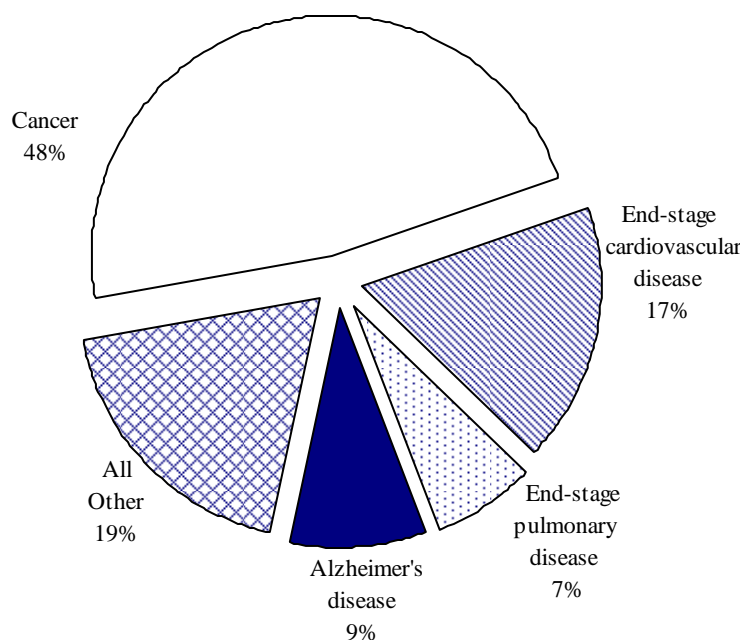
Principal Diagnosis	Number of Patients	Percent of Patients
Total	19,679	100%
Malignant neoplasm (cancer)	9,369	48
End-stage cardiovascular disease	3,414	17
Alzheimer's disease/other dementia	1,766	9
End-stage pulmonary disease	1,392	7
Renal failure/end-stage kidney disease	693	4
ALS (amyotrophic lateral sclerosis)	107	1
Diabetes	24	<1
HIV infection	19	<1
Other conditions	2,895	15%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Principal diagnosis is the diagnosis responsible for admission to the hospice. Percentages may not add to 100 percent due to rounding.

- In 2005, 48 percent of Wisconsin hospice patients had a principal diagnosis of cancer, the same proportion as in 2004 (60 percent in 2001). Seventeen percent had a principal diagnosis of end-stage cardiovascular disease, compared to 16 percent in 2004.

**Figure 1. Principal Diagnosis of Hospice Patients, Wisconsin 2005**



Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

## Characteristics of Hospice Patients

**Table 7. Hospice Patients by Referral Source, Wisconsin 2005**

Referral Source	Number of Patients	Percent
Total	19,679	100%
Physician	6,266	32
Hospital	6,081	31
Self-Referral	272	1
Patient's Family	1,511	8
Home Health Agency	724	4
Nursing Home	3,212	16
Assisted Living:		
Residential care apartment complex	142	1
Adult family home	32	<1
Community-based residential facility	635	3
Other	804	4%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding.

- Thirty-two percent of hospice patients were referred to the hospice by a physician (down from 33 percent in 2004), and 31 percent were referred by a hospital (up from 29 percent in 2004). In 1999, 41 percent of hospice patients were referred by a physician and 24 percent were referred by a hospital.
- The number of hospice patients referred by home health agencies increased 25 percent (from 581 in 2004 to 724 in 2005). The number of hospice patients referred by all types of assisted living arrangements also went up 25 percent (from 647 to 809).

**Table 8. Discharges of Hospice Patients by Reason for Discharge, Wisconsin, 2005**

Reason for Discharge	Patients Discharged	
	Number	Percent
Total Discharges/Deaths	17,329	100%
Hospice Care Not Appropriate	865	5
Transferred to Another Hospice	427	2
Revocation of Hospice Benefit	884	5
Other	253	1
Deaths	14,900	86%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Percentages may not add to 100 percent due to rounding.

- In 2005, total discharges from Wisconsin hospices increased 7 percent (from 16,151 in 2004 to 17,329 in 2005), after a 19 percent increase in 2004.
- Eighty-six percent (14,900) of all Wisconsin hospice discharges in 2005 were deaths.
- Five percent of discharges from hospices were because hospice care was no longer appropriate (probably because the patient's prognosis had changed).
- Another 5 percent of discharges were due to "revocation of hospice benefit." This means the patient voluntarily withdrew from hospice care.



## Characteristics of Hospice Patients

**Table 9. Hospices and Patients by County of Hospice Location, Wisconsin 2005**

County of Hospice	Number of		Percent of Total Patients	County of Hospice	Number of		Percent of Total Patients
	Hospices	Patients			Hospices	Patients	
All	62	19,679	100%	Manitowoc	2	98	<1%
Ashland	1	227	1	Marathon	1	544	3
Barron	1	136	1	Milwaukee	10	7,154	36
Brown	3	1,681	9	Monroe	1	171	1
Calumet	1	24	0	Oneida	1	287	1
Chippewa	1	198	1	Portage	1	183	1
Crawford	1	139	1	Price	1	73	0
Dane	1	1,791	9	Rock	2	365	2
Dodge	1	124	1	St. Croix	1	82	<1
Eau Claire	1	366	2	Sauk	1	268	1
Fond Du Lac	1	520	3	Shawano	1	90	<1
Grant	1	59	<1	Sheboygan	3	629	3
Green	1	157	1	Taylor	1	79	<1
Iowa	1	131	1	Vernon	1	54	<1
Jackson	1	83	<1	Washington	1	83	<1
Jefferson	1	322	2	Waukesha	1	659	3
Kenosha	1	588	3	Winnebago	2	1,009	5
La Crosse	2	480	2	Wood	1	343	2
Lafayette	1	25	<1	Out-of-State	8	376	2%
Langlade	1	81	<1%				

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Patient counts are by location of the hospice (not patient residence).  
Counties shown have at least one hospice located in the county.  
Percentages may not add to 100 percent due to rounding.

- In 2005, 36 percent of Wisconsin hospice patients were served by hospices located in Milwaukee County (compared to 38 percent in 2004).
- Only one hospice was located in Dane County but that hospice served 9 percent of Wisconsin hospice patients in 2005. The number of hospice patients served by this Dane County hospice increased 4 percent in 2005, after increasing 19 percent in 2004 and 14 percent in 2003.
- From 2004 to 2005, the number of hospice patients increased 12 percent or more in 16 counties but declined at least 13 percent in three counties and in the eight out-of-state hospices as well. Washington County had only 10 hospice patients in 2004, but increased to 83 patients in 2005.
- The number of hospice patients served by hospices in Milwaukee County increased 3 percent in 2005, after an increase of 21 percent in 2004. Between 1999 and 2005, the number of hospice patients in Milwaukee County increased 195 percent (from 2,425 to 7,154).
- Sixteen hospices in four counties (Milwaukee, Dane, Brown, and Winnebago) served 59 percent of all Wisconsin hospice patients in 2005.
- Thirty-five counties in Wisconsin had no hospice service.

## Characteristics of Hospice Patients

**Table 10. Number, Percent and Utilization Rate of Hospice Patients by Age and Sex, Wisconsin 2005**

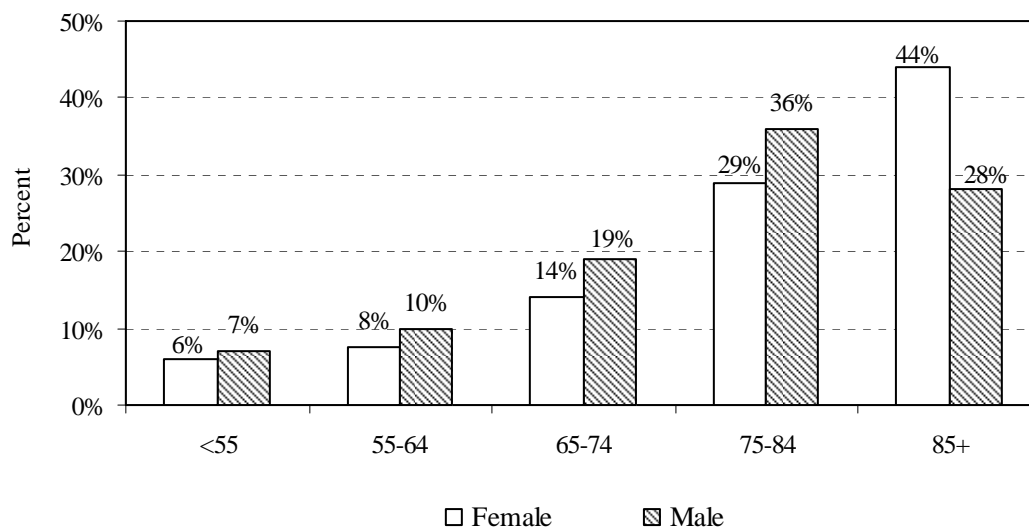
Age	Total			Female			Male		
	Number	Percent	Rate	Number	Percent	Rate	Number	Percent	Rate
<b>All Patients</b>	19,679	100%	3.5	11,232	100%	4.0	8,447	100%	3.1
Under 55	1,243	6	0.3	653	6	0.3	590	7	0.3
55-64	1,713	9	3.0	852	8	2.9	861	10	3.0
65-74	3,192	16	9.1	1,569	14	8.3	1,623	19	9.9
75-84	6,274	32	24.2	3,265	29	21.5	3,009	36	28.0
85 or older	7,257	37	62.4	4,893	44	60.1	2,364	28	68.0
65 or older	16,723	85%	23.0	9,727	87%	23.1	6,996	83%	22.8

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: The rate is the number of hospice patients per 1,000 statewide population in the age group. Percentages may not add to 100 percent due to rounding.

- In 2005, the hospice utilization rate among people aged 65 and older was 23 patients per 1,000 population in this age group, an 8 percent increase from 2004 (21.3 per 1,000).
- The hospice utilization rate among people aged 85 and older was 62.4 per 1,000 population in 2005, a 10 percent increase from 2004 (56.6 per 1,000).
- Males aged 85 and over had a 13 percent higher hospice utilization rate than females in this age group (68 per 1,000 vs. 60 per 1,000).

**Figure 2. Percent of Hospice Patients by Age and Sex, Wisconsin 2005**



Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

## Characteristics of Hospice Patients

**Table 11. Hospice Patient Days by Level of Care, Wisconsin 2005**

Level of Care	Patient Days	Percent
Total patient days	1,065,590	100%
Routine home care	1,032,625	97
Continuous home care	3,703	<1
Inpatient care: acute/symptom management	25,259	2
Inpatient respite care	4,003	<1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding. See Technical Notes for level of care definitions.

- The total number of hospice patient days increased 15 percent in 2005 (from 924,207 days in 2004 to 1,065,590 days), after a 19 percent increase in 2004 and a 16 percent increase in 2003.
- Most hospice patient days were for routine home care (97 percent).
- Inpatient days for acute care and/or symptom management increased 13 percent in 2005.
- Inpatient respite care days increased 27 percent, from 3,155 days in 2004 to 4,003 days in 2005.

**Table 12. Length of Stay of Hospice Patients Who Died or Were Discharged, Wisconsin 2005**

Length of Stay	Number of Patients	Percent
Total Discharges/Deaths	17,329	100%
1 to 7 days	5,786	33
8 to 14 days	2,620	15
15 to 29 days	2,611	15
30 to 59 days	2,209	13
60 to 89 days	1,111	6
90 to 179 days	1,548	9
180 days to 1 year	956	6
More than 1 year	408	2%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

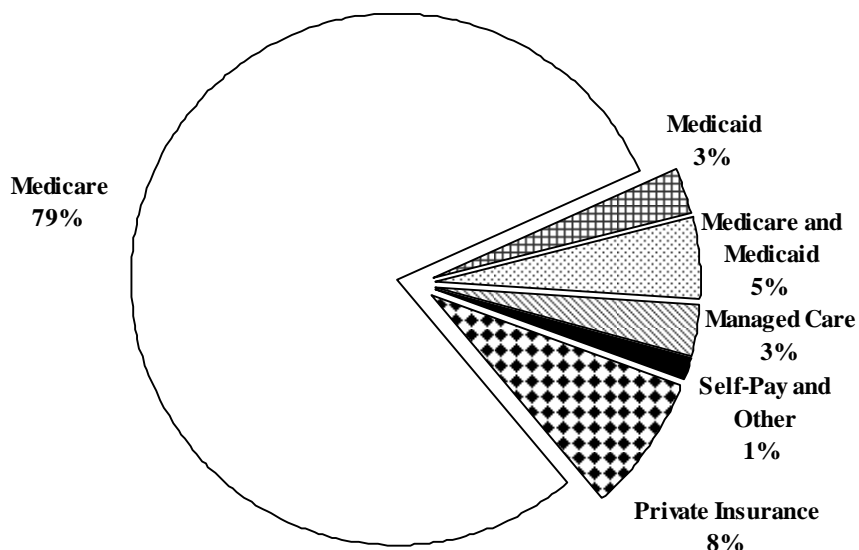
Notes: "Length of stay" means time from when the patient was admitted to the hospice program until the patient died or was discharged from the program.

The total includes 80 patients whose length of stay was not reported.

Percentages may not add to 100 percent due to rounding.

- A length of stay of fewer than 60 days was reported for 76 percent of the hospice patients who died or were discharged in 2005 (down from 78 percent in 2004).
- Thirty-three percent of hospice patients died or were discharged within 7 days of admission to a hospice program in 2005, down from 34 percent in 2004.
- The number of hospice patients who died or were discharged 180 days or more after admission was up from 7 percent in 2004 to 8 percent in 2005.

**Figure 3. Primary Pay Source at Admission to a Hospice Program for Patients Admitted in 2005, Wisconsin**



Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

**Table 13. Primary Pay Source at Admission to a Hospice Program for Patients Admitted in 2005, Wisconsin**

Primary Pay Source	Number of Patients	Percent
Total Admissions	17,753	100%
Medicare	14,107	79
Medicaid	504	3
Medicare and Medicaid (“dual entitlees”)	882	5
Managed Care (HMO)	525	3
PACE/Partnership (Program of All-Inclusive Care for the Elderly)	6	<1
Private Insurance	1,503	8
Self Pay	117	1
Other	109	1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding.

Primary pay source is the payment source that the hospice expects will pay the largest amount for the patient’s hospice care.

- The number of hospice admissions increased 8 percent, from 16,502 in 2004 to 17,753 in 2005.
- Seventy-nine percent of hospice patients admitted in 2005 had Medicare as their primary pay source (vs. 77 percent in 2004 and 76 percent in 2003). Eight percent of admissions had private insurance.
- A total of 8 percent of hospice patients admitted had Medicaid as primary pay source, either Medicaid alone (3 percent), or Medicaid and Medicare (5 percent).
- The number of admissions with managed care (HMO) as their primary pay source decreased from 583 patients in 2004 to 525 patients in 2005.

## Characteristics of Hospice Patients

**Table 14. Primary Pay Source for Hospice Patients, Wisconsin, December 31, 2005**

Primary Pay Source	Number of Patients	Percent
Total Patients	3,104	100%
Medicare	2,546	82
Medicaid	73	2
Medicare and Medicaid (“dual entitlees”)	248	8
Managed Care (HMO)	42	1
PACE/Partnership (Program of All-Inclusive Care for the Elderly)	1	<1
Private Insurance	144	5
Self Pay	35	1
Other	15	<1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding.  
Primary pay source is the payment source that the hospice expects will pay the largest amount for the patient’s hospice care.

- On December 31, 2005, 82 percent of hospice patients had Medicare as their primary pay source (compared with 80 percent in 2004 and 77 percent in 2003), 5 percent had private insurance, 2 percent had Medicaid only, and 8 percent had both Medicare and Medicaid.

**Table 15. Living Arrangements of Hospice Patients, Wisconsin, December 31, 2005**

Living Arrangement	Number of Patients	Percent
Total Patients	3,104	100%
Home/private residence	1,651	53
Nursing home	850	27
Hospice residential facility	88	3
Assisted living:		
Residential care apartment complex	38	1
Adult family home	10	<1
Community-based residential facility (CBRF)	428	14
Inpatient facility (acute-care hospitals, etc.)	39	1
Other site	0	0%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentage may not add to 100 percent due to rounding.  
See Technical Notes for definitions of selected living arrangements.

- The total number of hospice patients on December 31, 2005 increased 16 percent from the previous year, to 3,104 patients.
- On December 31, 2005, 53 percent of hospice patients were residing at home or in some other private residence (the same percent as in 2004).
- Twenty-seven percent of hospice patients were residing in nursing homes on December 31, 2005. Only 15 percent of hospice patients were residing in nursing homes in 1999.
- The percent of hospice patients residing in CBRFs increased to 14 percent in 2005 (13 percent in 2004 and 9 percent in 2003).

**Table 16. Deaths Among Hospice Patients by Place of Occurrence, Wisconsin 2005**

Location of Death	Number of Patients	Percent
Total Deaths	14,900	100%
Home/private residence	6,483	44
Nursing home	3,160	21
Hospice residential facility	2,040	14
Assisted living:		
Residential care apartment complex	58	<1
Adult family home	16	<1
Community-based residential facility (CBRF)	1,079	7
Inpatient facility (acute-care hospitals, etc.)	2,048	14
Other place	16	<1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Percentages may not add to 100 percent due to rounding.

- Total hospice patient deaths increased 6 percent between 2004 and 2005, while total hospice patients served increased 8 percent.
- Of hospice patient deaths in 2005, 44 percent occurred at home (compared with 49 percent in 2004), 21 percent occurred in nursing homes (23 percent in 2004), and 14 percent occurred in a hospital or other inpatient facility (the same percent as in 2004).
- The percent of hospice patient deaths that occurred in CBRFs increased by 2 percentage points, to 7 percent.
- The percent of hospice patient deaths that occurred in hospice residential facilities increased by 6 percentage points in 2005, to 14 percent.

## Technical Notes

**Unduplicated patient count.** Each person served by a hospice organization is counted only once, regardless of the number of times during the year that person was admitted and discharged.

### Hospice Level of Care

**Routine home care day** is a day on which an individual who has chosen hospice care is receiving services at the place of residence considered his or her home.

**Continuous home care day** is a day on which an individual who has chosen hospice care is not in an inpatient facility and is receiving continuous care, primarily nursing care, to achieve palliation or management of acute medical symptoms. Home health aide or homemaker services may be provided to supplement the nursing care. Continuous home care is furnished during periods of crisis to maintain the terminally ill patient at home.

**Inpatient care day (symptom management)** is a day on which an individual who has chosen hospice care receives general inpatient care in an inpatient facility for pain control or acute or chronic symptom management which cannot be managed in other settings.

**Inpatient respite care day** is a day on which an individual who has chosen hospice care receives care in an approved inpatient facility on a short-term basis to relieve the family or other persons caring for the individual at home.

### Living Arrangements

**A community-based residential facility (CBRF)** is a place where 5 or more unrelated adults reside in which care, treatment or services above the level of room and board but not including nursing care are provided to residents as a primary function of the facility.

**A residential care apartment complex** is a living unit for severely disabled individuals that is developed by a sponsor and that is not physically connected to a nursing home or hospital except by common service units for laundry, kitchen or utility purposes and that may include buildings and grounds for activities related to residence, including congregate meal sites, socialization, and physical rehabilitation facilities.

**An adult family home** means a place where 3 or 4 adults not related to the licensee reside in which care, treatment or services above the level of room and board but not including nursing care are provided to persons residing in the home as a primary function of the place.

## ATTACHMENT I 2005 ANNUAL SURVEY OF HOSPICES

The Statistical Summary is to be provided by agencies submitting an annual report. If you have questions about completing Attachment I, call Jane Conner (608-267-9055), Kitty Klement (608-267-9490), Lu Ann Hahn (608-266-2431), or Kim Voss (608-267-1420).

**Time Periods:**

*This summary requests information from varying time periods. Some questions refer to the entire calendar year (January 1 - December 31, 2005), others refer to a specific week (December 4 - 10, 2005), or a specific day (December 31, 2005). Be careful to answer questions for the correct time period.*

**Patient Counts:**

Patients are counted two ways:

1. Only once to determine the number of individual people the agency served by primary diagnosis, race and age.
2. Multiple times, when appropriate to identify the number of patients who received various types of services, whose payments came from various pay sources, and who were admitted and/or discharged from various places and programs.

In some instances, patient counts in one question must equal patient counts in other questions. When this is the case, a footnote is used as a reminder.

**Diagnoses Reporting:**

Diagnostic categories on Page 4, number 23, are based on the ICD-9-CM classification system.

**Follow-up for corrections/clarifications:**

All responses will be edited for completeness, accuracy and clarity. If any problems are found, the contact person listed on Page 8 will be telephoned for corrections/clarifications.

**OUT OF STATE AGENCIES SHOULD REPORT WISCONSIN DATA ONLY.**

## STATISTICAL SUMMARY

**AGENCY INFORMATION**

1. Was this hospice in operation for the entire calendar year of 2005? .....  1. Yes  2. No

If no, and operation dates began after January 1, 2005, or ended before December 31, 2005, list those dates of operation below.

**Beginning Date**  
 Month  Day '05

**Ending Date**  
 Month  Day '05

**Days of Operation**

2. Is the hospice certified for Medicare (Title 18)? .....  1. Yes  2. No
3. Is the hospice certified for Medicaid (Title 19)? .....  1. Yes  2. No
4. Is the hospice accredited by JCAHO or CHAPS? .....  1. Yes  2. No

5. Is the hospice licensed as a hospice residential facility? (e.g., "hospice house") .....  1. Yes  2. No
- a. If yes, indicate the number of beds in the facility ..... \_\_\_\_\_
- b. Total number of days spent by hospice patients in the facility in 2005 ..... \_\_\_\_\_
6. Is the hospice Medicare certified as an inpatient facility? .....  1. Yes  2. No
- a. If yes, indicate the number of beds in the facility ..... \_\_\_\_\_
- b. Total number of days spent by hospice patients in the facility in 2005 ..... \_\_\_\_\_
7. Does the hospice provide Palliative and Supportive Services for individuals who have not elected hospice? .....  1. Yes  2. No
- a. If yes, how many patients received Palliative and Supportive Services in 2005? ..... \_\_\_\_\_
8. Does the hospice have a contract with a hospital(s) or skilled nursing facility (SNF) for symptom management and/or inpatient respite care? .....  1. Yes  2. No
- a. If yes, indicate the number of contracts ..... \_\_\_\_\_
- b. Total number of acute care (symptom management) days in 2005 ..... \_\_\_\_\_
- c. Total number of inpatient respite care days in 2005 ..... \_\_\_\_\_
9. Does the hospice have a contract with an intermediate care nursing facility (NF) for inpatient respite services? .....  1. Yes  2. No
- a. If yes, indicate the number of contracts ..... \_\_\_\_\_
- b. Total number of inpatient respite care days in 2005 ..... \_\_\_\_\_
10. Does the hospice have a contract, agreement or memorandum of understanding with a skilled nursing facility (SNF) to provide routine hospice home care? .....  1. Yes  2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding ..... \_\_\_\_\_
- b. Total number of unduplicated hospice patients with SNF stays in 2005 ..... \_\_\_\_\_
- c. Total number of days spent in SNFs by hospice patients in 2005 ..... \_\_\_\_\_
11. Does the hospice have a contract, agreement or memorandum of understanding with a community-based residential facility (CBRF) to provide routine hospice home care? .....  1. Yes  2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding ..... \_\_\_\_\_
12. Does the hospice have a contract, agreement or memorandum of understanding with an adult family home to provide routine hospice home care? .....  1. Yes  2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding ..... \_\_\_\_\_
13. Does the hospice have a contract, agreement or memorandum of understanding with a residential care apartment complex (RCAC) to provide routine hospice home care? .....  1. Yes  2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding ..... \_\_\_\_\_
14. Does the hospice have a contract with an HMO or other managed-care organization(s) to provide services? .....  1. Yes  2. No

**PATIENT INFORMATION**

15. Number of **patients** on the hospice caseload on January 1, 2005 ..... \_\_\_\_\_  
**(As reported on the 2004 survey, Page 3, LINE 18. If different, explain the change/reason.)**  
(Any admissions on or after January 1st should be listed on line 16.)
- a. Of the number of patients who were on the open caseload beginning January 1, 2005 (line 15, above), how many of those patients are also listed as an admission(s) during 2005 on line 16? ..... \_\_\_\_\_
16. Total number of **admissions** during 2005 ..... \_\_\_\_\_
- a. Of the total admissions, how many were readmissions?  
(Readmissions are the number of admissions above and beyond a patient's first admission during 2005. If an individual was formally admitted more than once during the calendar year, count each admission, except the first one, as a readmission. For example, if a patient was formally admitted to the agency five times during the calendar year, that would be five admissions, of which four were readmissions.) ..... \_\_\_\_\_
17. Number of hospice **patients discharged** during 2005 for each reason listed.
- a. Discharged - hospice care not appropriate (*no longer meets hospice criteria*) ..... \_\_\_\_\_
- b. Transferred - hospice services provided by another hospice ..... \_\_\_\_\_
- c. Revocation of hospice benefit (*individual chooses to leave hospice*) ..... \_\_\_\_\_
- d. Other (*please specify* \_\_\_\_\_ ) ..... \_\_\_\_\_
- e. Deaths ..... \_\_\_\_\_
- f. **Total Discharged** ..... \_\_\_\_\_
18. Total number of patients on the hospice caseload on December 31, 2005 ..... \_\_\_\_\_  
*(Line 15, plus line 16, minus line 17.f.)*
19. Report the **Total Number of Individual Patients** for 2005, using the following formula to calculate the total.
- a. Patients on January 1, 2005 caseload (line 15) ..... \_\_\_\_\_  
Minus line 15.a (1/1/05 patients also counted as an admission during 2005) ..... \_\_\_\_\_  
**Subtotal**
- b. Admissions (line 16) ..... \_\_\_\_\_  
Minus readmissions (line 16.a) ..... \_\_\_\_\_  
Equals the number of patients admitted ..... \_\_\_\_\_  
**Subtotal**
- c. **Total** individual patient count (unduplicated) for 2005. (Add **subtotals** in question 19) ..... \_\_\_\_\_  
*(The number reported here **MUST** equal the "TOTALS" on Page 4, no. 21, 22 & 23.)*
20. Average Daily Census for calendar year 2005, (total days of care, Page 5, number 24, divided by the days of operation, 365 days, or as reported on page 1, item 1.) ..... \_\_\_\_\_  
*(Round to the nearest whole number.)*

21. Total number of **unduplicated patients** served during 2005 by age, gender, and race/ethnicity.

RACE	AGE							Total
	19 & under	20-54	55-64	65-74	75-84	85-94	95+	
White								
Black or African American								
American Indian								
Southeast Asian								
Asian or Pacific Islander								
Other								
<b>TOTAL*</b>								(a)
<b>GENDER</b>								
Male								(b)
Female								(c)
MAKE SURE that the total males, (line b), plus total females, (line c), equal the total number of patients, (line a).								
<b>Hispanic/Latino**</b>								

\* TOTAL **MUST** equal the total unduplicated patients on page 3, line 19.c.

\*\* Include Hispanic/Latino patients in the appropriate racial categories listed above, as Hispanic/Latino is not considered a race.

22. Total number of **unduplicated patients** served during 2005 by referral source.

**DO NOT WRITE IN SHADED AREA**

REFERRAL SOURCE	NUMBER OF PATIENTS
a. Physician	
b. Self-referral	
c. Patient's family	
d. Hospital	
e. Home health agency	
f. Nursing home	
g. Assisted living	
1. Residential care apartment complex	
2. Adult family home	
3. Community-based residential facility (CBRF)	
h. Other (specify _____ )	
<b>TOTAL*</b>	

\* TOTAL **MUST** equal the total unduplicated patients on page 3, line 19.c.

23. Total number of **unduplicated patients** served during 2005 by principal diagnosis (i.e., the diagnosis responsible for admission to the hospice).

PRINCIPAL DIAGNOSIS	NUMBER OF PATIENTS
a. Malignant neoplasm (cancer) (140 - 239)	
b. Cardiovascular disease (390 - 459)	
c. Pulmonary disease (415-417, 492, 496)	
d. Renal failure/kidney disease (584.9 - 593.9)	
e. Diabetes (250.0)	
f. Alzheimer's disease/other dementia (331.0, 290.1, 294.1)	
g. AIDS (042)	
h. ALS (Lou Gehrig's disease) (335.20)	
i. Other (specify _____ )	
<b>TOTAL*</b>	

\* TOTAL **MUST** equal the total unduplicated patients on page 3, line 19.c.

24. Total number of **patient days** in 2005 for each level of care.

LEVEL OF CARE	PATIENT DAYS
a. Routine home care	
b. Continuous care	
c. Inpatient care – acute/symptom management	*
d. Inpatient respite care	**
<b>TOTAL</b>	

\* If patient days are provided, provide the corresponding data on Page 2, line(s) 6.b and/or 8.b.

\*\* If patient days are provided, provide the corresponding data on Page 2, line(s) 6.b, 8.c and/or 9.b.

25. For each patient discharged in 2005, (including deaths, and regardless of admission date), provide the **length of stay**.

- a. 1 to 7 days ..... \_\_\_\_\_
- b. 8 to 14 days ..... \_\_\_\_\_
- c. 15 to 29 days ..... \_\_\_\_\_
- d. 30 to 59 days ..... \_\_\_\_\_
- e. 60 to 89 days ..... \_\_\_\_\_
- f. 90 to 179 days ..... \_\_\_\_\_
- g. 180 days to 1 year ..... \_\_\_\_\_
- h. More than 1 year ..... \_\_\_\_\_
- i. **TOTAL (a+b+c+d+e+f+g+h)** ..... \_\_\_\_\_ \*

\* TOTAL **MUST** equal the total discharges on page 3, line 17.f.

26. Indicate the primary pay source **AT THE TIME OF ADMISSION** for all patients who were admitted during 2005.

PRIMARY PAY SOURCE	NUMBER OF PATIENTS
a. Medicare	
b. Medicaid	
c. Medicare & Medicaid	
d. Managed Care (HMO)	
e. PACE/Partnership	
f. Private Insurance	
g. Self Pay	
h. Other (specify _____ )	
<b>TOTAL*</b>	

\* TOTAL **MUST** equal the total admissions on page 3, line 16.

27. Indicate the primary pay source for all patients on the hospice caseload on December 31, 2005.

PRIMARY PAY SOURCE	NUMBER OF PATIENTS
a. Medicare	
b. Medicaid	
c. Medicare & Medicaid	
d. Managed Care (HMO)	
e. PACE/Partnership	
f. Private Insurance	
g. Self Pay	
h. Other (specify _____ )	
<b>TOTAL*</b>	

\* TOTAL **MUST** equal the total patients on the hospice caseload on page 3, line 18.

28. Of the patients on the hospice caseload on December 31, 2005, how many resided in each of the following locations?

**DO NOT WRITE IN SHADED AREA**

LOCATIONS	NUMBER OF PATIENTS
a. Home/private residence	
b. Nursing home	
c. Hospice residential facility	
d. Assisted living	
1. Residential care apartment complex	
2. Adult family home	
3. Community-based residential facility (CBRF)	
e. Inpatient facility (e.g., acute care hospital, other)	
f. Other site (specify _____ )	
<b>TOTAL*</b>	

\* TOTAL **MUST** equal the total patients on the hospice caseload on page 3, line 18.

29. Of those patients who died in 2005, how many deaths occurred at each of the following locations?

**DO NOT WRITE IN SHADED AREA**

LOCATIONS	NUMBER OF DEATHS
a. Home/private residence	
b. Nursing home	
c. Hospice residential facility	
d. Assisted living	
1. Residential care apartment complex	
2. Adult family home	
3. Community-based residential facility (CBRF)	
e. Inpatient facility (e.g., acute care hospital, other)	
f. Other site (specify _____ )	
<b>TOTAL*</b>	

\* TOTAL **MUST** equal the total deaths on page 3, line 17.e.

**PERSONNEL**

30. **Personnel:** Complete the following table based on the week of **December 4 - 10, 2005**. Include staff on vacation or other paid leave. Out-of-state agencies should report only staff time serving Wisconsin patients.

**Full-Time Persons:** Report the number of persons employed full-time.

**Part-Time Persons:** Report the number of persons employed part-time.

**Part-Time Hours:** For each employed person working less than *Full-time* hours per week, report the number of hours worked in that position. If a person serves in more than one job position, place an asterisk (\*) next to the job title, record the hours worked in the part-time hours column for each position, but only record the person once in the part-time person column for the job position worked the most hours. (e.g., A person may work as a Hospice Aide for 25 hours and could possibly also work in a Dietary position for 15 hours. Record "25" in the part-time hours column for Hospice Aides, and record "15" in the part-time hours column for Dietary. Record a "1" in the part-time persons column for Hospice Aides, since the majority of the hours were worked in that capacity).

**Contracted Staff Persons:** Report the number of persons providing services through a formal contractual arrangement.

**Volunteers:** Uncompensated staff person.

**ROUND HOUR FIGURES TO THE NEAREST WHOLE HOUR. NO DECIMALS. NO FTE'S**

**DO NOT WRITE IN SHADED AREA**

JOB TITLE	Full-time Persons	Part-time Persons		Contracted Staff (No. of Persons)	Volunteers (No. of Persons)
		Personnel	Hours		
a. Managing Employee/Administrator					
b. <b>Physicians *</b>					
c. <b>Registered Nurses *</b>					
d. Licensed Practical Nurses					
e. Hospice Aides					
f. Registered Physical Therapists					
g. Registered Occupational Therapists					
h. Speech/Language Pathologists					
i. <b>Bereavement Counselor *</b>					
j. <b>Social Workers *</b>					
k. Dietary					
l. Chaplain					
m. Clerical/Office Support					
n. Volunteer Coordinator					
o. Other Volunteers					
p. Other (specify _____)					
<b>TOTAL</b>					

\* "Core Team" members **MUST** be accounted for on this table.

31. Number of hours in workweek? (Enter as a 3-digit number, e.g., 40.0, 37.5, 35.0, etc.) .....

32. During 2005, how many total volunteers did the hospice agency have? .....

33. Indicate the total hours of service provided by volunteers during 2005.

**ROUND TO THE NEAREST WHOLE HOUR. DO NOT USE DECIMALS.**

SERVICE PROVIDED TO	NUMBER OF HOURS
a. Patients/Family	
b. Office Support/Administrative Services	
c. Other (specify _____)	

Person responsible for completing this form ..... \_\_\_\_\_  
*(This is who will be contacted if further information is required.)*

Contact person's area code/telephone number ..... EXT: \_\_\_\_\_

Area Code/Fax Number ..... \_\_\_\_\_

Email Address ..... \_\_\_\_\_

Area Code/Telephone Number ..... \_\_\_\_\_  
*(This number will be published in the Hospice directory.)*

34. Does the agency have Internet access? .....  1. Yes  2. No

I certify that I have reviewed the information reported in this document for accuracy and the information is true and correct.

Name of Administrator (*type or print*) ..... \_\_\_\_\_

**SIGNATURE** - Administrator ..... \_\_\_\_\_

Date signed ..... \_\_\_\_\_

FOR OFFICE USE ONLY
BQADISTR <input type="checkbox"/>

