Patterns and predictors of home health and hospice use by older adults with cancer.

OBJECTIVES: To describe patterns of home health and hospice use by older cancer patients and a comparison group of older persons without cancer. To identify predictors of home care and hospice utilization.

DESIGN: Retrospective analysis using the Surveillance, Epidemiology and End Results (SEER)-Medicare Database, a linkage of the SEER Program of the National Cancer Institute (an epidemiological surveillance system of population-based tumor registries) and Medicare Claims.

SETTING: The SEER data used in this paper cover a service area that includes approximately 14% of the U.S. population, including the states of Connecticut, Hawaii, Iowa, and New Mexico and the metropolitan areas of Detroit, San Francisco-Oakland, Atlanta, Seattle-Puget Sound, Los Angeles County, and San Jose-Monterey.

PARTICIPANTS: Five analytical samples were drawn. The first consisted of all cases with a diagnosis of cancer in 1997 to 1999 who were eligible for services in calendar year 1999 (n=120,072). The second and third were subsamples of these and consisted of cases with a new cancer diagnosis in 1999 (n=46,373) and cases who died in 1999 (n=41,483). The fourth consisted of a comparison sample without cancer (n=160,707). The fifth was a subsample of this and consisted of those who died in 1999 (n=6,639).

MEASUREMENTS: Utilization rates of home health and hospice services.
RESULTS: Twenty-nine percent of cancer patients used home health services, and 10.7% used hospice services, compared with 7.8% of noncancer patients who used home health and less than 1% who used hospice. Half (51.4%) of cancer patients who used home health did not have cancer listed as an admitting diagnosis for the use of those services. Home health utilization was lowest for unmarried men.

CONCLUSION: This is the first study to evaluate community-based home health and hospice utilization by older cancer patients. Future studies must begin to address what constitutes appropriate utilization.

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