Our team will use the Utah Population Database (UPDB) to conduct an analysis comparing end-of-life hospice and healthcare services of dementia and cancer patients.

Hospice eligibility is currently benchmarked to cancer trajectories and may not fit the realities of dementia, where prognostication and the disease trajectory is less clear. As a result, dementia patients may experience delayed admission to hospice, defined as not enrolling until death is imminent, and/or live discharge from hospice, defined as outliving eligibility due to greater than expected patient life. Both of these events can be profoundly distressing to patients and families, and both minimize the benefit that comes from hospice use at the end-of-life.

The study will include two students from the “Health Society and Policy” interdisciplinary undergraduate program.

This project will inform national Center for Medicare and Medicaid Services (CMS) policy and improve access and hospice service delivery to patients and their families at end of life.