



FOUNDATION FOR
HOSPICE AND
HOMECARE

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Home Care Delivers Freedom: Home Care Nurses, Aides and Therapists Drive 7.88 Billion Miles in 2013 To Reach Shut-in Patients

It is estimated that the home health industry drove over **7.88 billion miles** in 2013 to provide services to millions of children, adults, persons with disabilities, and the elderly. That is the equivalent to 17,462 roundtrips to the moon and travelling the entire U.S. interstate highway system 164,383 times. Serving over 14 million patients and clients each year, the home care community is committed to supporting every person's right to receive care in the setting of their choice. Home is by far and away the preferred choice and it is a setting where high quality of care can be and is provided every day of the year.

In 2006, NAHC reported that the estimated miles driven in home care services was 4.76 billion. The increase in estimated miles over the succeeding seven years is primarily due to increases in Medicaid home care (\$53.6B in 2008 to \$74.8B in 2013), Medicare home health growth (3M users in 2006 to 3.5M in 2012), and Medicare hospice utilization (942K in 2006 to 1.28M in 2012). This overall 2013 estimate includes home health and hospice care funded by the Medicare and Medicaid programs, other government programs, private insurance, and self-paid care.

The data were calculated using the following information:

Average miles per visit: Miles per visit were collected from over 4,200 Medicare cost reports, as well as through an online survey emailed to members and non-members of the National Association for Home Care & Hospice (NAHC). From the cost reports, NAHC calculated state miles per visit by dividing mileage costs by the IRS per mile set reimbursement rate. On the online survey, NAHC collected similar cost data, and also allowed agencies to enter miles driven if the agency had that information available. Approximately 1,200 agencies answered the survey, and 600 were able to provide the information we requested. NAHC then averaged the miles per visit estimate from the cost report and the online survey to provide a conservative state by state estimate.

Medicare Home Health and Hospice Visits: Data from the 2012 Healthcare Information Set (HCIS) from the Centers for Medicare and Medicaid Services (CMS) were used to calculate the Medicare Home Health and Hospice visits made by agencies. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MedicareMedicaidStatSupp/2013.html> Tables 7.3 and 8.3. The number of visits was provided for home health, and the number of covered days was provided for hospice. NAHC consulted hospice industry experts to determine if covered days for hospice could translate to a number of visits. The experts confirmed that, based on data they have analyzed, covered days could be treated as visits on a 1:1 ratio. This ratio was confirmed in a CMS study conducted by Abt Associates in 2013 that calculated the number of visits in an episode at 72.38. The Medicare home health visits as reported were added together with the hospice visit calculated estimate for a national Medicare visit estimate.

Medicaid Home Care Visits: The number of Medicaid home care visits is derived from an analysis of Medicaid spending data for 2013 published by TRUVEN Health Analytics. National and state-specific spending on "home and community-based services" (HCBS) was utilized.



State	Average Miles per Visit	Medicare Home Health and Hospice Visits	Medicaid Home Care Visits	Non-Medicare and Non-Medicaid Home Care Visits	Total Visits	Total Miles
US	10.97	217,907,630	337,750,097	162,807,714	718,465,441	7,881,565,888
AK	5.72	105,982	1,691,220	526,580	2,323,782	13,292,034
AL	14.37	4,520,222	3,138,227	2,243,926	9,902,375	142,297,122
AR	12.76	2,293,525	4,040,392	1,855,838	8,189,755	104,501,270
AZ	10.95	3,469,521	4,858,040	2,439,975	10,767,536	117,904,523
CA	9.71	16,014,106	42,315,460	17,090,563	75,420,129	732,329,451
CO	8.13	2,423,539	4,455,405	2,015,531	8,894,475	72,312,078
CT	4.76	2,987,634	6,414,147	2,754,722	12,156,503	57,864,953
DC	9.17	280,263	2,146,972	711,180	3,138,415	28,779,264
DE	6.03	666,616	682,832	395,388	1,744,836	10,521,363
FL	11.2	22,779,957	8,301,048	9,106,734	40,187,739	450,102,682
GA	12.8	5,802,987	5,431,286	3,291,642	14,525,915	185,931,712
HI	10.62	375,316	857,245	361,140	1,593,701	16,925,109
IA	7.34	1,946,266	4,297,738	1,829,493	8,073,497	59,259,469
ID	9.24	885,926	1,301,905	641,034	2,828,865	26,138,717
IL	8.97	9,810,689	9,266,303	5,589,559	24,666,551	221,258,959
IN	9.68	8,239,247	4,286,072	3,669,918	16,195,237	156,769,899
KS	11.7	1,707,925	2,771,496	1,312,470	5,791,891	67,765,129
KY	9.69	3,215,770	2,915,106	1,796,347	7,927,223	76,814,788
LA	12.6	5,319,335	4,292,319	2,816,215	12,427,869	156,591,145
MA	5.9	5,293,642	12,073,656	5,088,618	22,455,916	132,489,906
MD	9.89	2,720,660	6,680,931	2,754,666	12,156,257	120,225,383
ME	35.2	915,491	2,166,273	902,957	3,984,721	140,262,174
MI	14.02	7,785,876	4,782,693	3,682,591	16,251,160	227,841,259
MN	9.73	2,251,964	13,014,770	4,473,153	19,739,887	192,069,101
MO	12.67	3,868,275	7,210,412	3,246,055	14,324,742	181,494,485
MS	15.5	3,472,289	1,268,579	1,389,074	6,129,942	95,014,106
MT	8.74	448,162	1,083,096	448,659	1,979,917	17,304,471
NC	14.81	5,561,380	8,636,093	4,159,860	18,357,333	271,872,096
ND	11.45	219,444	899,801	327,939	1,447,184	16,570,254
NE	9.6	975,611	1,678,416	777,630	3,431,657	32,943,906
NH	7.63	928,316	1,740,828	782,059	3,451,203	26,332,680
NJ	5.92	4,642,340	6,792,674	3,350,459	14,785,473	87,530,001
NM	8.89	1,234,884	1,517,930	806,575	3,559,389	31,642,964
NV	5.32	1,572,972	1,082,947	778,184	3,434,103	18,269,429
NY	8.62	11,005,937	57,471,700	20,063,948	88,541,585	763,228,460
OH	10.12	8,525,941	13,029,903	6,315,862	27,871,706	282,061,668
OK	14.68	5,118,363	2,609,129	2,264,155	9,991,647	146,677,380
OR	11.99	1,235,719	5,981,840	2,114,745	9,332,304	111,894,322
PA	13.48	8,561,437	15,755,359	7,124,821	31,441,617	423,833,000
RI	5.53	756,027	2,163,982	855,563	3,775,572	20,878,911
SC	15.92	3,260,692	2,494,000	1,686,125	7,440,817	118,457,803
SD	9.76	310,573	639,372	278,334	1,228,279	11,988,002
TN	10.83	5,398,611	5,455,174	3,180,159	14,033,944	151,987,614
TX	13.39	25,294,738	19,559,490	13,142,289	57,996,517	776,573,360
UT	6.87	1,681,300	1,091,987	812,573	3,585,860	24,634,859
VA	16.71	4,624,726	6,453,082	3,245,798	14,323,606	239,347,452
VT	10.65	419,063	1,149,450	459,574	2,028,087	21,599,130
WA	15.59	2,653,302	7,263,870	2,905,731	12,822,903	199,909,064
WI	14.22	2,778,562	8,965,610	3,441,042	15,185,214	215,933,749
WV	12.24	1,334,564	2,971,886	1,261,790	5,568,240	68,155,256
WY	8.04	211,943	601,951	238,471	1,052,365	8,461,014

Note: The national calculations may differ from the state-specific calculations due to rounding.

Overall HCBS expenditures were reduced by excluding several categories that may not have included home visits: Care Management; Rehabilitative Services; PACE; Health Homes; and MFP Demonstrations. In addition, 50% of the remaining expenditures were disregarded on the assumption that that level of spending may involve personal care services provided by family, friends, and others who would not travel to the individual, services in congregate group settings, and live-in care settings.

The visit calculation was then based on the assumption that the average visit payment is \$100. That assumption stems from NAHC's analysis of state Medicaid payment rates and member inputs indicating and average four (4) hour personal care services visit representing the vast majority of the HCBS expenditures.

The national visit estimate equation is:

$$\frac{\text{Total Medicaid HCBS Expenditures} - \text{Excluded HCBS Expenditures} \times 50\%}{\$100} = \text{Total Medicaid Home Care Visits}$$

The state-specific visits were estimated using state-specific HCBS spending less the estimated excluded HCBS expenditure similar to the national Medicaid HCBS expenditure calculation. Since the Truven data did not include the individual categories of HCBS spending on a state-specific basis, an estimate of such spending was based on the percentage of national HCBS spending excluded applied equally in each state calculation. As with the national analysis, 50% of the spending was disregarded under the same assumptions outlined regarding national spending.

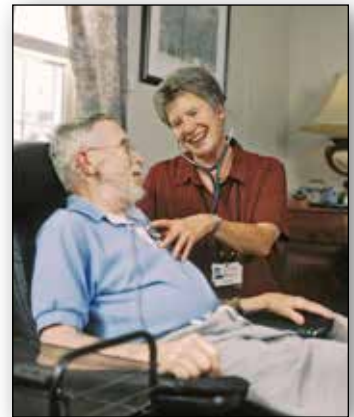
The state-specific visit estimate equation is:

$$\frac{\text{Total Medicaid State HCBS Expenditures} - \text{Excluded State HCBS Expenditures (total} \times .904) \times 50\%}{\$100} = \text{Total State Medicaid Visits}$$

Non-Medicare and Non-Medicaid Home Care Visits: These visits include home care services purchased with private funds, commercial insurance, and non-Medicare/Medicaid government programs such as the VA. The calculation is based on expenditure data for these services from the National Health Expenditures database for 2013. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NationalHealthAccountsHistorical.html>. The National Health Expenditures (NHE) data reports spending in the particular health sector. To extrapolate the spending data into visits, we used the same approach used with the Medicaid spending data: \$100 in spending equals 1 visit. In addition, the NHE data is not state specific at a granular level of specific home care sector spending such as the non-Medicare/Medicaid sectors applied here. Accordingly, a state-specific estimate was derived from the national spending data by applying a ratio of state specific Medicare and Medicaid spending on home care to the NHE national spending.

Total Visits: Total visits were then calculated by adding the total Medicare Home Health and Hospice visits, the estimate Medicaid home care visits, and the estimated Non-Medicare/Medicaid visits for each state.

Total Miles: Total visits were then multiplied by the state estimates for miles per visit. These were added together for a national estimate.



7.88 Billion Miles Equals:

- 316,453 trips around the earth (24,901 miles)
- 17,462 round-trips to the moon (477,800 miles)
- 42 round-trips to the sun (185.9 million miles)
- 2.7 million trips across the contiguous U.S. at its widest point (2,892 miles)
- 164,383 times travelling the total distance of the U.S. interstate highway system (46,876 miles)
- 5 times further than the total distance driven by the US Postal Service in 2013 (1.25 billion miles)
- 8.6 times further than the total distance driven by FedEx per year (912 million miles)
- The number of miles travel is greater than the total population of the world (7.4 billion people).
- It would take 81.3 trillion dollar bills lined up to reach 7.88 billion miles.
- Pluto is 4.67 billion miles away and it took 9 years to travel there, while home care traveled that far in just 7 months.

The Foundation was created in 1982, the same year as its sister organization, the National Association for Home Care & Hospice (NAHC). It was established to advance the practice of high quality home and hospice care, as well as expand availability and increase public awareness of these vital services, through:

- Education;
- The development of certification and accreditation standards;
- The development of home care and hospice quality standards;
- Strengthening and encouraging the conduct of ethical standards in delivering home care and hospice services;
- Research; and
- Public Relations

FOUNDATION RESEARCH INITIATIVES

FHHC/NAHC's research team provides information to members, health care providers, government officials, journalists, scholars, and industry analysts regarding the latest data available for home care and hospice. The research team also tracks trends and developments affecting the health care environment to determine the research questions that need to be assessed to improve the delivery of quality care, understand the political environment, and ensure the future of the home care and hospice industry.

CERTIFICATION AND ACCREDITATIONS PROGRAM

Certification for Home Care and Hospice Executives (CHCE) is a comprehensive, national certification program for credentialing home care and hospice executives, designated by the initials CHCE. It is the only certification designed especially for individuals in leadership in home care and hospice.

COMMUNITY OUTREACH/ PATIENT SUPPORT

The Foundation's provides support and financial assistance to terminally ill/home bound patients and their families, who are not medicare eligible. Funds are used for patients and/or family members who often do not have the financial resources for such basic as food and utilities. In addition, we can help pay for medications or supplies for patients of any age not covered by medicare, medicaid, or other insurance.



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