

# Hospice Industry Overview

October 2013



### **Attractive Industry Dynamics**

Member FINRA/SIPC

#### The \$18.9 billion hospice industry is projected to grow 7.4% annually through 2017P.

- Hospice is the provision of holistic and individualized care to patients facing a life limiting illness and their families.
  - Congress created the Medicare hospice benefit in 1982
  - Goal of hospice is to maximize quality of life and comfort, not to cure
- Hospice is gaining wider acceptance as an alternative to curative care at the end of life.
  - Approximately 44% of Medicare decedents in 2010 received hospice care compared to 23% in 2000
- Growth in the hospice industry will be driven by shifts in patient preferences towards non-acute care, hospice's cost saving value proposition, and the aging of the U.S. population.



Source: IBIS.

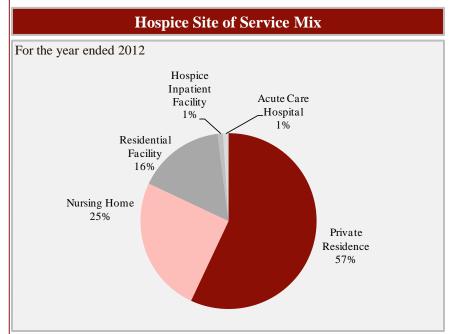


# Industry Growth Driver Shift to Non-Acute Care

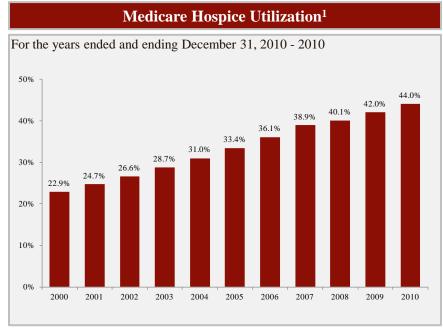
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Utilization of hospice care is increasing as patient preference shifts to receiving end-of-life care in non-acute settings.

- Overall shift towards treating patients outside of costly acute care settings benefits hospice utilization.
  - 98% of hospice patient care days are delivered in a non-acute setting
  - The percentage of elderly who died in acute care hospitals fell from 33% in 2000 to 25% in 2009
- Patients and families continue to become more educated on the many benefits of hospice, driving utilization.



Source: MedPac and National Hospice and Palliative Care Organization ("NHPCO").



Source: MedPac and NHPCO.

(1) Defined as deaths under hospice care divided by total annual deaths.

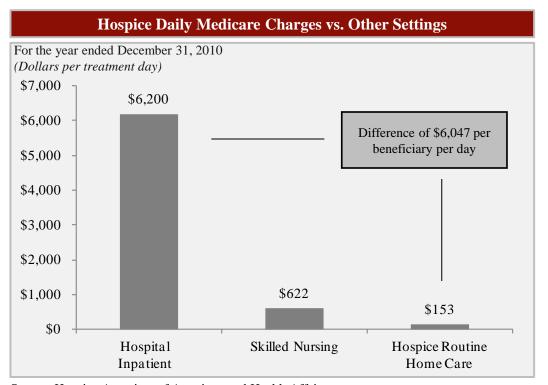


# Industry Growth Driver Cost Saving Value Proposition

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Hospice offers a compelling value proposition as the lowest cost alternative for treating terminally-ill patients.

- Seniors age 65 and older account for approximately 40% of healthcare expenditures.
- Approximately 30% of a senior's total Medicare expenditures occur in the year preceding death.
- Managing end-of-life care is a key area of focus of healthcare cost containment.
- Patients who are admitted to hospice care spend up to nine fewer days in a hospital.
- Hospice is by far the lowest cost patient setting with a average per diem cost of \$153 per day.



Source: Hospice Associate of American and Health Affairs.



# Industry Growth Driver Aging Population

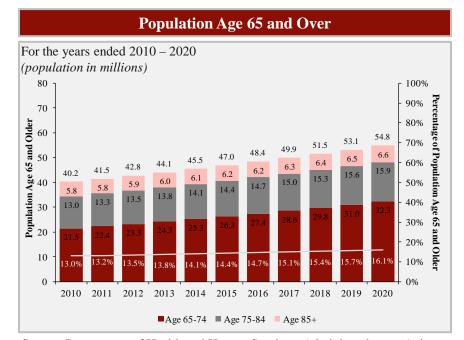
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#### The aging U.S. population will continue to drive growth in hospice utilization.

- Seniors over the age of 65 represent 83% of hospice patients.
  - Over 65 age group will grow from 40.2 million in 2010 to 54.8 million in 2020P

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Patient Age	% of Total Hospice Patients	
Less than 24 years	0.4%	
25 - 34 years	0.4%	
35 - 64 years	16.0%	
65 - 74 years	16.3%	
75 - 84 years	27.6%	83%
85 years and over	39.3%	





Source: Department of Health and Human Services, Administration on Aging.

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#### Reimbursement Overview

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#### Hospice care is covered under Medicare, Medicaid, and many private insurance plans.

- The Medicare hospice benefit is the predominant source of payment for hospice care in the U.S. and accounts for approximately 90% of reimbursement.
  - Hospice is provided free of charge to patients under the Medicare benefit
  - Medicare reimbursement rates vary based on the patient's acuity and the level of care needed
- The Medicare Cap ("Cap") is an annual limitation on reimbursement for providing hospice treatment.
  - Cap was \$25,377 per patient for 2013
  - Excessively long lengths of stay present risks of violating the Cap and incurring mandatory repayments to CMS
- In recent years, the hospice industry has received reimbursement increases from CMS.

Current Hospice Reimbursement Overview					
For the year ending October 31, 2013					
Description	Per Diem Rate	Component Subject to Wage Index	Non- Weighted Amount		
Home care provided on a typical day	\$153.45	\$105.44	\$48.01		
Home care provided during periods of patient crisis	\$895.56	\$615.34	\$280.22		
Inpatient care for a short period to provide respite for primary caregiver	\$158.72	\$85.92	\$72.80		
Inpatient care to treat symptoms that cannot be managed in another setting	\$682.59	\$436.93	\$245.66		
	Description  Home care provided on a typical day  Home care provided during periods of patient crisis  Inpatient care for a short period to provide respite for primary caregiver  Inpatient care to treat symptoms that cannot be	Description  Description  Description  Home care provided on a typical day  Home care provided during periods of patient crisis  Inpatient care for a short period to provide respite for primary caregiver  Inpatient care to treat symptoms that cannot be  Per Diem Rate  \$153.45	Description  Per Diem Rate  Description  Rate  Per Diem Subject to Wage Index  Home care provided on a typical day  Home care provided during periods of patient crisis  Inpatient care for a short period to provide respite for primary caregiver  Inpatient care to treat symptoms that cannot be  Septimary Caregiver  Septimary		

Source: CMS.

#### Historical Hospice Reimbursement Rate Changes For the years ending October 31, 2009 – 2013 3.6% 3.6% 3.0% 3% 2.6% 2.5% 2.1% 1.8% 2% 1.6% 1.4% 1% 2009 2010 2011 2012 2013 ■Gross ■Net1

Source: CMS.

(1) Net of BNAF phase-out and Wage Index change. Excludes impact from budget sequestration.

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## Competitive Landscape

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Hospice is a highly fragmented market with no individual provider comprising more than 7.4% of the market.

- 44% of the market is served by non-profit and government hospices.
- The top 4 players only account for approximately 17% market share.

# For the year ended 2012 Hospital-Based 10% For Profit 46%

Source: CMS and public filings.

Hospice Platform	Daily Census  Estimate	States of Operation	Market Share
Vitas	14,443	18	7.4%
Gentiva	12,700	29	6.5%
Amedisys	5,091	25	2.6%
LHC	1,100	19	0.6%
Other (Over 3,500 Hospices)	161,842	N/A	82.9%

Source: CMS and public filings.

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