



Hospice Abuses and Fraud Cause Opposition to Federal Hospice Bill

The Healthcare Advocacy and Leadership Organization (HALO) opposes funding new palliative care and hospice programs until rampant violations are remedied.

BEDFORD, TEXAS, UNITED STATES, October 13, 2019 /EINPresswire.com/ -- The Healthcare Advocacy and Leadership Organization (HALO) and a growing number of organizations and individuals are opposed to the federal Palliative Care and Hospice Education and Training Act (PCHETA)—House bill HR 647 and Senate bill S 2080.

HALO supports hospice and palliative care providers who respect the dignity and life of every patient, give honest information to patients and their families, and provide appropriate pain control and comfort measures. For this very reason, we are unable to support the PCHETA. Existing federal hospice programs are plagued by fraud, poor quality care, rampant abuse, and even intentionally caused deaths. Enacting another federal hospice program, when existing programs are out of control, makes no sense and will only cause more of the same.

The [2019 Office of Inspector General Report of "Vulnerabilities in Hospice"](#) provides proof that HALO's concerns are valid. For facts about hospice fraud see Home Healthcare News "Special Agents Sound Off on Hospice Fraud."

[The OIG reports](#), "Hospices with patient harm cases do not always face serious consequences from CMS [Centers for Medicare and Medicaid Services]. CMS should seek statutory authority to extend beneficiary protections found in other health care settings to hospices and ensure remedies are available to address poor performers."

The human toll of hospice abuse can be found in articles, letters and internet posts of hurting individuals whose loved ones were allegedly abused or killed by hospice and palliative care providers. Why pour millions more of federal dollars into an education and training program that will likely be designed by some of the very people perpetrating or ignoring this inhumanity to our most vulnerable citizens?

Furthermore, if the PCHETA becomes law, it will finance programs to educate the public about hospice and palliative care, aiming to entice more people into hospice. Such education is unlikely to inform the public about hospice fraud and abuse or to instruct them how to find reputable hospice and palliative care providers.

Bottom line: Hospice and Palliative Care Medicine (HPM) must be cleaned up before any more taxpayer funds are spent promoting it.

For more information: www.halorganization.com

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