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## HOUSE CONCURRENT RESOLUTION

REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A HOSPICE WORKING GROUP TO EXAMINE TRENDS AND REGULATIONS IN THE HOSPICE INDUSTRY.

1           WHEREAS, hospice is a form of health care for individuals  
2 with a terminal illness, typically with a prognosis of six  
3 months or less to live, focusing on comfort, pain relief, and  
4 quality of life; and

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6           WHEREAS, in 1983, the Medicare Hospice Benefit was  
7 established by the Centers for Medicare and Medicaid Services;  
8 and

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10          WHEREAS, the Medicare Hospice Benefit is robust, offering a  
11 flat rate between \$154 and \$1,432 a day that covers all aspects  
12 of the patient's care, including all services delivered by the  
13 interdisciplinary team, drugs, medical equipment, and supplies;  
14 and

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16          WHEREAS, a study in 2013 conducted by Mount Sinai's Icahn  
17 School of Medicine found that the hospice benefit saves money  
18 for Medicare and that the incremental effect in cost between  
19 hospice and non-hospice groups was between \$2,561 and \$6,430;  
20 and

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22          WHEREAS, this study also found that hospice enrollment is  
23 associated with fewer thirty-day hospital readmissions, in-  
24 hospital deaths, and significantly fewer overall hospital and  
25 intensive care unit days; and

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27          WHEREAS, following the creation of the Medicare Hospice  
28 Benefit, the number of hospices grew from two hundred thirty-  
29 five in 1980 to approximately seventeen hundred in 1985, over  
30 ninety percent of which were non-profit entities; and



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WHEREAS, by 2022, the total number of hospices had grown to close to six thousand; and

WHEREAS, the rapid growth of hospice providers has resulted in a proliferation of bad actors and prompted an article in the Los Angeles Times entitled "*End-of-life care has boomed in California. So has fraud targeting older Americans*", which found that the rapid growth from 2010 to 2020 has created a "cottage industry of illegal practices, including kickbacks to crooked doctors and recruiters who zero in on prospective patients at retirement homes and other venues"; and

WHEREAS, the article additionally found that health outcomes worsened and "[s]atisfaction surveys reported by hospices nationwide show that more than 80% of respondents rate[d] their hospice as a 9 or 10 out of 10, but in L.A. County that figure drop[ped] to 74%", a difference in margin of thousands of patients; and

WHEREAS, a study published by the Department of Business, Economic Development, and Tourism in conjunction with the University of Hawaii Economic Research Organization found that by 2035, one in four people in Hawaii will be sixty years of age or older; and

WHEREAS, the study found that there is a need to build a stronger health care system to prepare for the surge in the number of older residents; and

WHEREAS, Hawaii has a limited number of hospices, with the Office of Health Care Assurance showing thirteen hospices in the State; and

WHEREAS, examining the national trends of the hospice industry and the hospice industry in Hawaii will enable the State to better prepare for the needs of its aging population; now, therefore,

BE IT RESOLVED by the House of Representatives of the Thirty-third Legislature of the State of Hawaii, Regular Session of 2026, the Senate concurring, that the Department of Health is



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1 requested to convene a Hospice Working Group to examine trends  
2 and regulations in the hospice industry; and

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4 BE IT FURTHER RESOLVED that the working group is requested  
5 to consist of the following members:

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7 (1) The Director of Health, or the Director's designee;  
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9 (2) The Administrator of the State Health Planning and  
10 Development Agency, or the Administrator's designee;  
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12 (3) The Administrator for the Med-QUEST Division of the  
13 Department of Human Services, or the Administrator's  
14 designee;  
15  
16 (4) The Director of the Executive Office on Aging, or the  
17 Director's designee; and  
18  
19 (5) Five members of hospices in operation in Hawaii since  
20 before the year 2000, to be selected and invited to  
21 participate by the Director of Health, as follows:  
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23 (A) Two organizations serving the City and County of  
24 Honolulu;  
25  
26 (B) One organization serving the County of Kauai;  
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28 (C) One organization serving the County of Maui; and  
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30 (D) One organization serving the County of Hawaii;  
31 and  
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33 BE IT FURTHER RESOLVED that the Hospice Working Group is  
34 requested to, at a minimum:

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36 (1) Study trends among the hospice industry nationally and  
37 in Hawaii;  
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39 (2) Examine the existing statutory and administrative  
40 rules and regulations for Hawaii's hospice industry;  
41 and  
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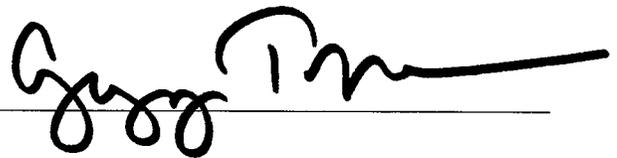
1           (3) Provide recommendations on regulatory changes to  
2           ensure a continued high quality of care while meeting  
3           demand as demographics change, including in rural and  
4           underserved communities; and  
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6           BE IT FURTHER RESOLVED that the Hospice Working Group is  
7           requested to submit a report of its findings and  
8           recommendations, including any proposed legislation, to the  
9           Legislature no later than twenty days prior to the convening of  
10          the Regular Session of 2027; and  
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12          BE IT FURTHER RESOLVED that the working group is requested  
13          to dissolve on June 30, 2027; and  
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15          BE IT FURTHER RESOLVED that certified copies of this  
16          Concurrent Resolution be transmitted to the Director of Health,  
17          Administrator of the State Health Planning and Development  
18          Agency, Administrator of the Med-QUEST Division of the  
19          Department of Human Services, and Director of the Executive  
20          Office on Aging.  
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OFFERED BY:



FEB 26 2026

