

Palliative Care

Facts and Stats

- Millions of Americans are living with serious illness, and this number is expected to increase exponentially over the next 20 years with the aging of the baby boomers.
- At least 12,000,000 adults and nearly 400,000 children in the United States are currently living with a serious illness, and could benefit from palliative care.
- Palliative care (pronounced pal-lee-uh-tiv) is specialized medical care for people living with a serious illness. This type of care is focused on providing relief from the symptoms and stress of the illness. The goal is to improve quality of life for both the patient and the family.
- Palliative care is provided by a specially-trained team, including doctors, nurses, and other specialists who work with a patient's other doctors to provide an extra layer of support.
- Based on need not prognosis, palliative care is appropriate at any age and at any stage in a serious illness.
- According to a 2010 study reported in the *New England Journal of Medicine*, lung cancer patients receiving palliative care had less depression, improved quality of life, and lived longer.
- Illnesses most commonly treated by palliative care are heart disease, cancer, stroke, diabetes, kidney disease, Parkinson's disease, and Alzheimer's disease.
- The top 5% of health care spenders accounts for 50% of total health care expenditures. People needing palliative care are among this group.
- If palliative care was fully penetrated into the nation's hospitals, total savings could amount to \$6 billion per year.
- Palliative care growth in hospitals has been exponential. As of 2019, 72% of hospitals with fifty or more beds report a palliative care team, up from 67% in 2015 and 7% in 2001.
- Ninety-four percent of all hospitals with 300 or more beds have a palliative care team today.
- Where you live matters when it comes to access to palliative care in the hospital. (See the State-By-State Report Card on Access to Palliative Care at reportcard.capc.org).
- According to a 2019 poll conducted by Public Opinion Strategies, once informed about palliative care, 95% of poll respondents agreed that it is important that patients with serious illness and their families be educated about palliative care.
- In the same poll, 90% of respondents said they would be likely to consider palliative care for a loved one if they had a serious illness. Ninety-four percent said it is important that palliative care services be made available at all hospitals for patients with serious illness, and their families.

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Frequently Asked Questions

What is palliative care?

Palliative care (pronounced pal-lee-uh-tiv) is specialized medical care for people living with a serious illness. It is focused on providing relief from the symptoms and stress of the illness. The goal is to improve quality of life for both the patient and the family.

Palliative care is provided by a team of doctors, nurses, and other specialists who work together with a patient's other doctors to provide an extra layer of support. It is appropriate at any age and at any stage in an illness, and it can be provided along with curative treatment. Palliative care is based on need, not prognosis.

Approximately how many people in the U.S. need palliative care?

Approximately 12,000,000 adults and nearly 400,000 children in the US could benefit from palliative care.

What are the benefits of palliative care?

Palliative care focuses on improving quality of life by treating the symptoms, side effects, and stress caused by the disease and its treatments. The palliative care team of doctors, nurses, and other specialists spends time with a patient and their family to help them match their treatment options to their goals. And, recent studies have shown that patients who receive palliative care may live longer.

Who should get palliative care?

Palliative care is appropriate for anyone living with a serious illness and suffering from symptoms and side effects.

What is a serious illness?

Serious illnesses include cancer, cardiac disease, respiratory disease, kidney failure, Alzheimer's, HIV/AIDS, amyotrophic lateral sclerosis (ALS), and many more.

How do you pay for palliative care?

Palliative care is billed in the same way as any other medical specialty (e.g. cardiology, oncology). Most insurance plans, including Medicare and Medicaid, cover all or part of palliative care.

Do patients have to give up their own doctor?

No. Palliative care teams work alongside the primary doctor.

How do you get palliative care?

Patients can ask their doctor for a referral to the palliative care team. Palliative care is available in most hospitals with more than 50 beds, and more and more in outpatient clinics and at home. See the Provider Directory at getpalliativecare.org.

Does palliative care have an impact on hospital and health care spending?

By delivering highly-effective, rigorously coordinated care, palliative care teams improve quality of care and quality of life. This has a direct impact on cost reduction through:

- Decreased ICU stays and pharmacy costs
- Decreased lengths of stay and unnecessary tests
- Efficiently coordinated care transitions

About CAPC

To learn more about CAPC and its vision, please visit capc.org and getpalliativecare.org

The Center to Advance Palliative Care (CAPC) is a national organization dedicated to increasing the availability of quality health care for people living with a serious illness. As the nation's leading resource in its field, CAPC provides health care professionals and organizations with the training, tools, and technical assistance necessary to effectively meet this need.

CAPC has taken early innovation in the field of palliative care to scale, and transformed it from a “radical concept” promoted by a handful of pioneers to a must-have service. Until a little over a decade ago, palliative care was only available to those enrolled in hospice. Rarely was it available to people living with a serious illness. Today, due largely to the work of CAPC, palliative care teams are found in over 72% of all U.S. hospitals with more than 50 beds.

As the nation's leader in providing palliative care training and implementation support, our approach has a proven, twenty-year track record. Major health care professionals, organizations, and leaders in the field know CAPC and turn to us for effective training, technical assistance, and access to peer organizations.

Growing evidence of palliative care's impact on both quality of care and health care system sustainability is driving interest from senior health care leaders and organizations. But improving access to palliative care for

all seriously ill people requires that every clinician have basic skills and that patients be able to find high quality palliative care wherever they happen to be—at home, in a nursing home, a cancer center, or a dialysis unit. It is CAPC's clinical and operational training, technical assistance, metrics, and dissemination of best practices that help make this possible.

CAPC is a member-based organization open to all health care organizations, including health systems, hospitals, hospices, home health agencies, long-term care facilities, medical groups, health plans, and other entities. Funding is provided through organizational membership and the generous support of foundations and private philanthropy. CAPC is part of the Icahn School of Medicine at Mount Sinai in New York City.

Brynn Bowman, MPA, leads CAPC as CEO. Founder Diane E. Meier, MD, is director emerita and strategic medical advisor. Dr. Meier is a leading pioneer in the field and was named a MacArthur Fellow in 2008.