LeadingAge Ohio

HB 945 PROTECTING OHIO HOSPICE CARE

Ohio's hospice data shows three clear concerns: transparency is needed in hospice utilization, growth is outpacing need and rural Ohio is being bypassed. Hospice depends on trust: people nearing the end of life and their families should know that quality hospice care is available and that regulators can act when data points to risk.

! Rapid growth is outpacing need.

Over the past five years, Ohio's ***hospice provider count grew*** **13.3%**

While the number of Medicare hospice ***patients served grew*** **7.5%**

Over the past five years, Ohio's hospice provider count grew nearly twice as fast as the number of Medicare hospice patients served. During that same period, 28% of Ohio hospices — more than 1 in 4 — opened. That means new providers are increasingly dividing the same modestly growing patient population, rather than expanding access where it is most needed.

! Rural Ohio is being bypassed.

92% *of Ohio's hospices that opened within the last five years,* ***opened in metro counties.***

21% *of Ohio hospices* ***are in Cuyahoga County****, double that of the state's next largest metro area.*

New hospice growth is concentrated in metropolitan markets while many rural communities have seen little or no increase in availability. Cuyahoga County has 39 hospices — more than double Franklin County's 19 — showing that new providers are clustering in already-served metro areas rather than expanding access where gaps remain.

! Transparency is needed in hospice utilization.

35% of Ohio hospices **exceed the live-discharge threshold**.

95% is the **highest live-discharge rate** among Ohio hospices.

Hospice is intended for people nearing the end of life. High live-discharge rates can indicate that patients were admitted before hospice was clinically appropriate or that care did not continue through end of life. Transparent, consistent use of hospice data helps regulators identify patterns, review concerns and protect patients.

Revised July 2026

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HB 945 is positioned as a targeted, prevention-focused measure that protects patients, taxpayers and the integrity of the hospice benefit while preserving access to quality care.

HB 945 Improves Quality by:

- ✓ **Closing the loophole** that allows some hospices to avoid reporting quality data.
- ✓ **Monitoring hospice quality measures** using available federal data.
- ✓ **Tracking key measures,** including live discharge rates, length of stay, family satisfaction, service delivery and care transitions.
- ✓ **Establishing state-set thresholds** to identify patterns that warrant review.
- ✓ **Requiring a timely survey** when a hospice crosses a threshold.
- ✓ **Providing ongoing quarterly monitoring** and allowing the Ohio Department of Health to work with a data management company.

HB 945 Improves Transparency by:

- ✓ **Requiring disclosure of owners with 30% or more ownership,** the chief administrator, medical director and other names used by the program.
- ✓ **Requiring disclosure of professional discipline, prior license suspension or revocation, and health care fraud or abuse history.**
- ✓ Requires **criminal records checks** for key owners and leaders.
- ✓ **Barring licensure for applicants or key leaders** excluded from Medicare or Medicaid or convicted of health care fraud or abuse.
- ✓ **Requiring criminal records checks** for key owners and leaders.
- ✓ **Allowing review of out-of-state inspection, survey and negative performance history.**
- ✓ **Requiring a $100,000 surety bond and added review** after major ownership changes.

HB 945 Protects Hospice Care by:

- ✓ **Creating a six-month pause on new hospice licenses** and most change-of-ownership applications.
- ✓ **Allowing exemptions for new licenses during the pause** when the Ohio Department of Health finds demonstrated need in the geographic area.
- ✓ **Directing future hospice growth** toward communities with access gaps.
- ✓ **Slowing unchecked expansion in already-served markets** while preserving access where Ohioans need care.

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