Preparing for SB 1004:
Introduction to Technical Assistance

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Objectives

- Review SB 1004 components and current implementation plan

- Describe the key steps in planning for and implementing (or expanding) community-based palliative care

- Outline the technical assistance services and materials provided by CHCF over the next 15 months

SB 1004: Updates

SB 1004 (Hernandez, Chapter 574, Statutes of 2014) requires the Department of Health Care Services (DHCS) to "establish standards and provide technical assistance for Medi-Cal managed care plans to ensure delivery of palliative care services"

- Policy documents, contact information for DHCS available at SB1004 web site:

http://www.dhcs.ca.gov/provgovpart/Pages/Palliative-Care-and-SB-1004.aspx

- Revised implementation date: January 1, 2018

SB 1004 population: general criteria

- Likely to or has started to use the hospital or emergency department as a means to manage his/her late stage disease

- Late stage of illness, appropriate documentation of continued decline in health status, not eligible for or declines hospice enrollment

- Death within a year would not be unexpected based on clinical status

SB 1004 population: general criteria

- Has received appropriate patient-desired medical therapy, or patient-desired medical therapy is no longer effective; not in reversible acute decompensation

- Beneficiary and (if applicable) family/patient-designated support person agrees to:

  – Attempt in-home, residential-based or outpatient disease management instead of first going to the emergency department; and

  – Participate in Advance Care Planning discussions

Disease specific-criteria

- Congestive Heart Failure (CHF):
  - Hospitalized for CHF with no further invasive interventions planned OR meets criteria for NYHA heart failure classification III or higher, AND
  - Ejection Fraction <30% for systolic failure OR significant comorbidities

- Chronic Obstructive Pulmonary Disease (COPD):
  - FEV 1 <35% predicted AND 24-hour oxygen requirement <3 liters per minute OR
  - 24-hour oxygen requirement ≥3L per minute

Disease specific-criteria (continued)

- Advanced Cancer:
  - Stage III or IV solid organ cancer, lymphoma, or leukemia, <u>AND</u>
  - Karnofsky Performance Scale score ≤70 OR failure of 2 lines of standard chemotherapy

- Liver Disease:
  - Evidence of irreversible liver damage, serum albumin <3.0, and INR >1.3, <u>AND</u>
  - Ascites, subacute bacterial peritonitis, hepatic encephalopathy, hepatorenal syndrome, or recurrent esophageal varices <u>OR</u>
  - Evidence of irreversible liver damage and MELD score >19

Required services

- Advance Care Planning
- PC Assessment & Consultation
- Plan of Care
- PC Team
- Care Coordination
- Pain and symptom management
- Mental Health and Medical Social Services
- Chaplain Services
- (24/7 telephonic support)

Plan deliverables

The MCPs P&Ps for palliative care must describe:

1. The process the MCP will utilize to inform and educate providers regarding the availability of palliative care. *(Will address)*

2. The eligibility criteria for providers to identify beneficiaries eligible for palliative care and include a provider referral process. *(Will address)*

3. The process the MCP will utilize to address disputes related to the provision of palliative care consistent with current grievance and appeals requirements. *(Will <u>not</u> address)*

4. The method the MCP will utilize to monitor and collect palliative care enrollment and utilization data. The MCP must report palliative care data to DHCS on a quarterly basis and upon request. *(Will address)*

Why offer technical assistance now?

- Takes a lot longer than you'd think
  - Lessons learned from Payer-Provider initiatives
  - Anticipate that this will be an iterative <u>process</u>
- Some aspects likely need development
  - Pal care workforce
  - Relationships with other network providers
  - Patient education
  - Data collection

Building blocks for implementing community-based palliative care

Estimating member/patient need

Estimating costs for delivering services

Evaluating current capacity for palliative care

Developing a strategy to expand services

Gauging and promoting sustainability and success

Technical Assistance Roadmap

- 5 core topics
- Each topic area will have supports for developing your CBPC program:
  - Introductory webinar (recorded)
  - In-person, small-group meetings
    - Northern CA
    - Southern CA
  - Resources to address the topic area at your own pace
- Guest faculty (MCPs and providers)

Technical Assistance Content

- Informed by practices of well-established payer-provider palliative care programs

- Based on learnings from CHCF initiatives, previous SB 1004 meetings

- Developed/delivered in partnership with others who have done work in the topic area

- Will highlight additional resources for each topic, to learn more

Topic 1: Estimating number of eligible members and baseline utilization patterns

Figure 1: Cause of Death and Medi-Cal Status Among 2013 California Decedents

Cause of Death	All California Decedents	Medi-Cal	Medi-Cal Decedents	
			Dually-Eligible	Medi-Cal only
Heart Disease	**24.1%**	**23.2%**	**26.0%**	**14.4%**
Cancer	**23.2%**	**20.4%**	**18.0%**	**28.2%**
Stroke	5.5%	5.9%	6.5%	3.9%
Chronic Lower Respiratory	**5.5%**	**6.0%**	**6.9%**	**3.3%**
Alzheimer's	4.8%	4.6%	6.0%	0.4%
Accidents	4.5%	6.0%	3.1%	15.6%
Diabetes	3.2%	4.4%	4.7%	3.4%
Flu/Pneumonia	2.6%	3.3%	3.9%	1.6%
Liver Disease	**1.9%**	**2.6%**	**1.4%**	**6.4%**
All other	24.7%	23.6%	23.5%	22.8%

Figure 1 was developed by linking Medi-Cal eligibility data with the California Department of Public Health (CDPH) Health Information and Research Section (HIRS) 2013 Statistical Master File. The analysis, interpretation, and conclusions are those of DHCS, not CDPH.

Topic 1: Estimating number of eligible members and baseline utilization patterns

Objectives

- Explore strategies for estimating the number of patients/members who would qualify for SB 1004

- Review a method for appreciating baseline utilization patterns in final year of life among eligible pts/members

- Consider how other groups have approached the task of estimating number of PC-appropriate patients and baseline utilization patterns

- Identify local data sources and individuals who would do this work

Topic 1: Estimating number of eligible members and baseline utilization patterns

Who should attend?

- MCP or delegated groups
  - Individual with understanding of data system
  - Individual with clinical expertise

Topic Webinar	In-Person Sessions	Self-Guided Materials
July 18, 2017 **12-1pm**	**Nor Cal: 8/17/17** **So Cal: 8/15/17**	September 2017

Topic 2: Estimating the cost of care delivery

# Patients	Team composition	Care setting(s)
Video visits and phone support	# Visits	Service LOS
Other available supports	Geography	Administrative / indirect costs

Topic 2: Estimating the cost of care delivery

- Objectives
  - Review various service delivery models
  - Appreciate service model aspects that influence cost of care delivery
    - Variables related to direct patient care
    - Indirect/administrative variables
  - Review strategies to mitigate risk
  - Consider promising practices for developing positive payer-provider relationships
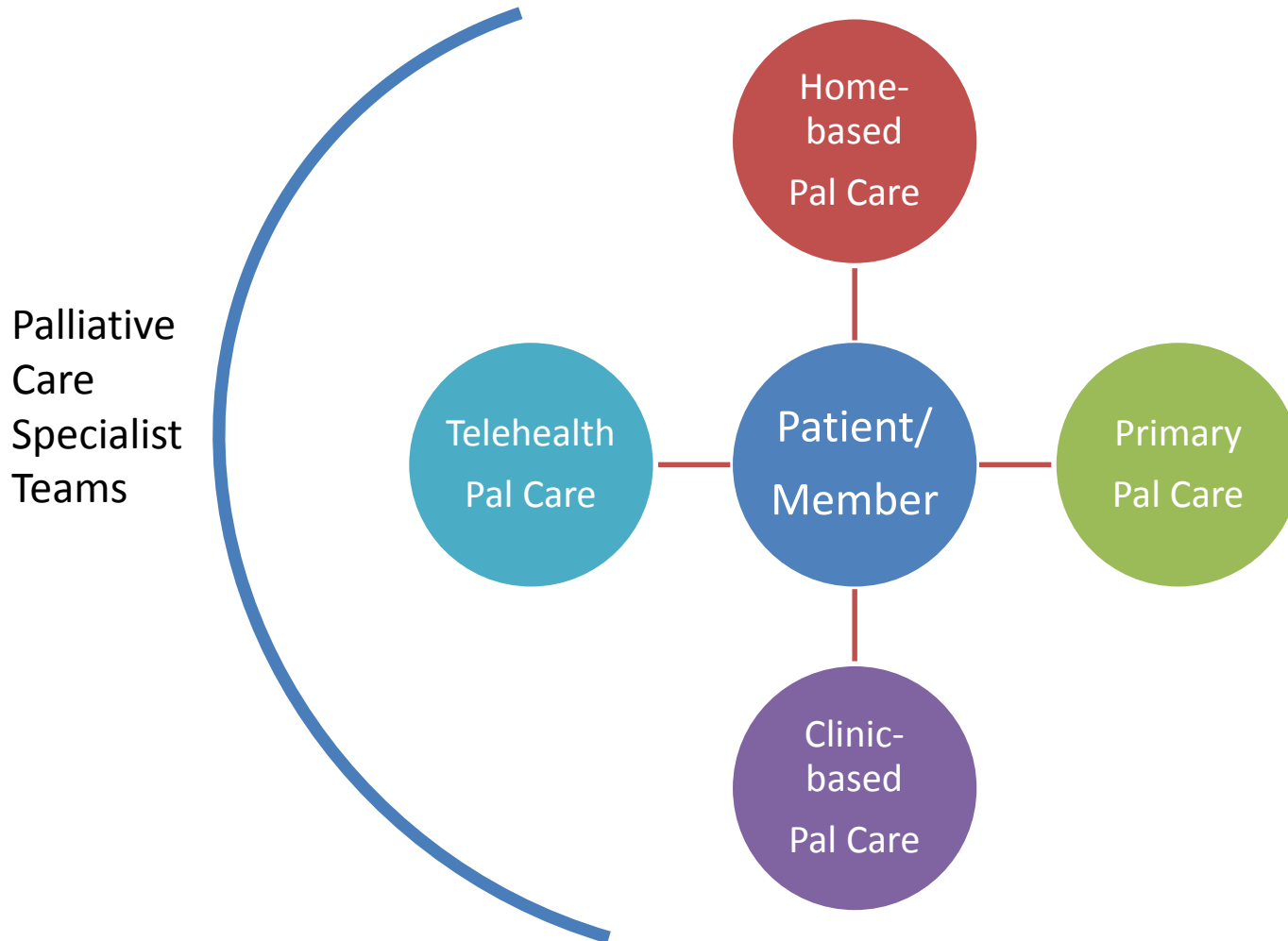
Topic 2: Estimating the cost of care delivery

Who should attend

- Specialty palliative care providers
  - Individuals with administrative/fiscal expertise
  - Individuals with understanding of population clinical needs and care delivery operations

Topic Webinar	In-Person Sessions	Self-Guided Materials
September 2017	October 2017	November 2017

Topic 3: Evaluating current network or group capacity to provide pal care

Palliative Care Specialist Teams

Home-based Pal Care

Telehealth Pal Care

Patient/ Member

Primary Pal Care

Clinic-based Pal Care

Topic 3: Evaluating current network or group capacity to provide pal care

- Objectives
  - Describe strategies to identify specialty pal care services available in a given region
  - Define "primary palliative care" and describe the role of non-specialist providers in delivering pal care
  - Describe the conditions and supports required to deliver SB1004 defined services
  - Outline approaches to assessing the capacity of local providers of primary and specialty pal care to deliver services required under SB 1004
  - Develop a summary of the local gaps between current capacity to provide SB 1004 and estimated need

Topic 3: Evaluating current network or group capacity to provide pal care

- Who should attend?
  - Specialist Palliative Care providers
    - Individuals who have access to program outcomes data
    - Individuals responsible for program planning
  - MCP or delegated group
    - Individuals familiar with clinical activities of affiliated medical groups and community programs

Topic Webinar	In-Person Sessions	Self-Guided Materials
December 2017	January 2018	February 2018

Topic 4: Developing a strategy to expand services

Topic 4: Developing a strategy to expand services

- Objectives
  - Describe 3 different mechanisms to expand capacity to provide palliative care
  - Provide examples of referral processes for Medi-Cal MCPs with existing PC programs
  - Describe 3 different strategies for identifying members eligible for SB 1004 PC
  - Describe outreach and educational initiatives to assist frontline providers in identifying eligible patients
  - Outline process for piloting and refining referral process
  - Summarize referral practices and translate them into policy documents for DHCS

Topic 4: Developing a strategy to expand services

- Who should attend?
  - Specialist Palliative Care providers
    - Individuals responsible for program planning
  - MCP or delegated group
    - Individuals responsible for developing strategy to cover new benefits
    - Individuals with understanding of care delivery operations

Topic Webinar	In-Person Sessions	Self-Guided Materials
March 2018	April 2018	May 2018

Topic 5: Gauging and promoting sustainability and success

- Why is this important?
  - Critical to know
    - What is the impact on organization/system costs?
    - Is the program impacting quality measures?
      - What is the impact on patients/families?
      - What is the impact on national standards?
    - What changes are necessary?

Topic 5: Gauging and promoting sustainability and success

- Objectives
  - Review information from DHCS regarding initial program evaluation and reporting
  - Describe the current resources available to measure palliative care quality
  - Outline process steps to select quality metrics based on local needs and challenges
  - Create processes for routine program review and quality assessment
  - Outline the key factors which promote program sustainability and enable scaling of services
  - Appreciate how PC is integrated with other system / plan / regional services, to optimize delivery of coordinated, efficient care

Topic 5: Gauging and promoting sustainability and success

- Who should attend?
  - Specialist Palliative Care providers
    - Analysts, program leaders
  - MCP or delegated group
    - Quality assurance, Finance

Topic Webinar	In-Person Sessions	Self-Guided Materials
June 2018	July 2018	August 2018

Building blocks for implementing community-based palliative care

Estimating member/patient need

Estimating costs for delivering services
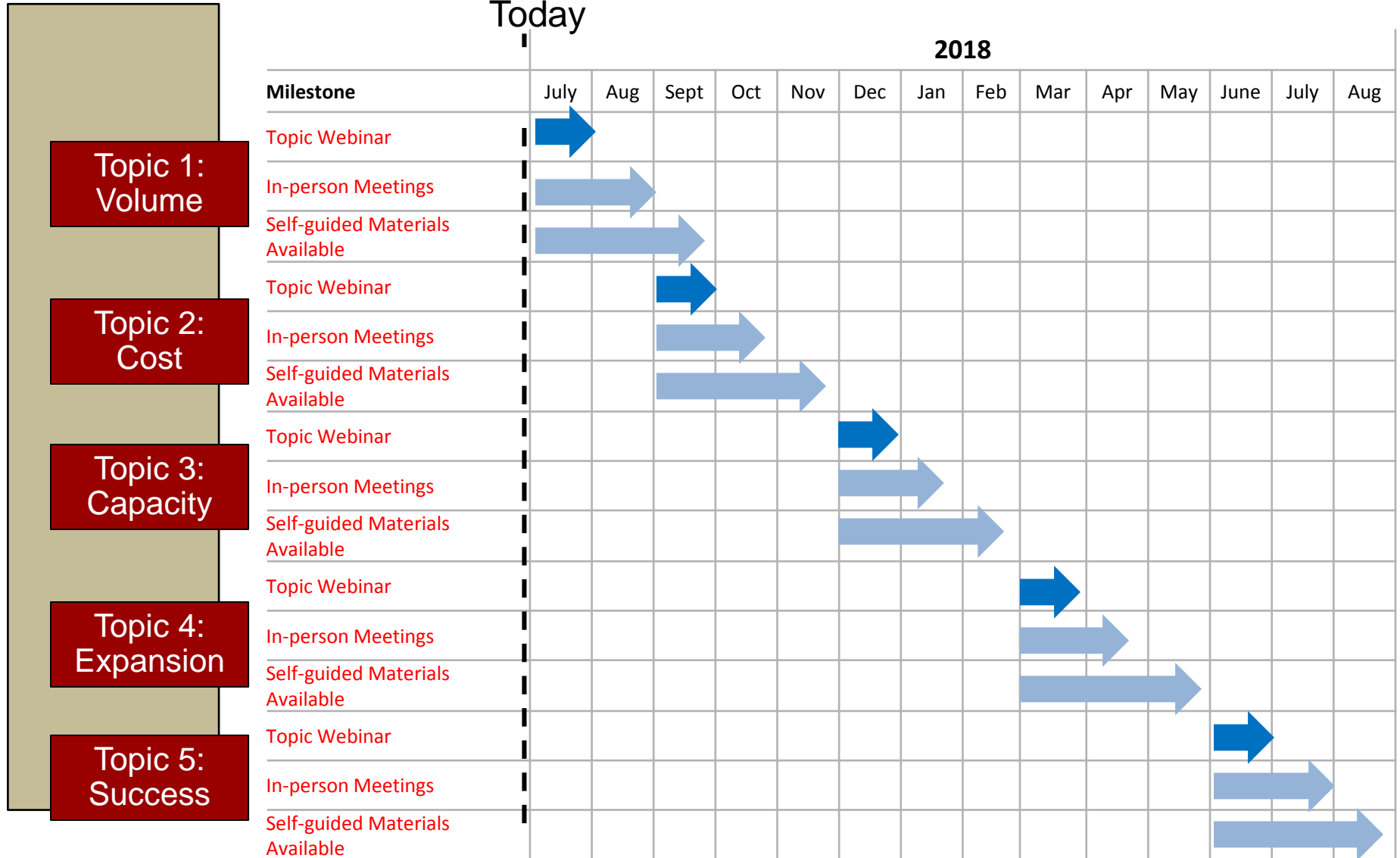
Evaluating current capacity for palliative care

Developing a strategy to expand services

Gauging and promoting sustainability and success

Technical Assistance Roadmap

- 5 core topics
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  - Worksheets and materials to address the topic area at your own pace
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Timeline

	Milestone	Today	July	Aug	Sept	Oct	Nov	Dec	2018 Jan	Feb	Mar	Apr	May	June	July	Aug
Topic 1: Volume	Topic Webinar															
	In-person Meetings															
	Self-guided Materials Available															
Topic 2: Cost	Topic Webinar															
	In-person Meetings															
	Self-guided Materials Available															
Topic 3: Capacity	Topic Webinar															
	In-person Meetings															
	Self-guided Materials Available															
Topic 4: Expansion	Topic Webinar															
	In-person Meetings															
	Self-guided Materials Available															
Topic 5: Success	Topic Webinar															
	In-person Meetings															
	Self-guided Materials Available															

How to sign up or learn more

- Please share with others in your area/partners
- Review list of topics with your partners, identify which ones are of most interest – anticipate that may not be all 5
- Follow up
  - Survey to gauge interest
  - Email invitations for webinars, in-person meetings
  - Dedicated location on CHCF web site for series materials
- Questions?
  - Technical Assistance Series: Glenda Pacha gpacha@chcf.org
  - SB 1004 Policy: SB1004@dhcs.ca.gov

Questions?

Care Model for SB 1004 Medi-Cal Palliative Care