

Essential Elements of Medi-Cal Palliative Care Services: Education and Engagement Materials for Providers

This resource is part of “Section B: Ensure readiness (and ongoing development) of PC provider organization” and “Section D: Define (or refine) strategies to identify and engage MCP members” of the California Health Care Foundation publication *Essential Elements of Medi-Cal Palliative Care Services: Tips and Tools for Medi-Cal Managed Care Plans and Palliative Care Providers*.

Medi-Cal managed care plans and their palliative care provider partners shared information from their programs for this guide, including internal policies and procedures. CHCF is grateful for this leadership and willingness to contribute for the benefit of more people whose health and lives can be improved with high-quality palliative care.

Medi-Cal managed care plans (MCPs) and palliative care providers work together to help referring providers identify patients who are eligible for and interested in palliative care services. Here are several resources used to promote community-based palliative care as an important health care service. These materials help referrers to understand palliative care, identify their eligible patients, and connect those patients to palliative care services.

TALKING POINTS FOR PALLIATIVE CARE PROGRAM PROMOTION

Source: Compilation of MCP and PC provider resources

MCP PROVIDER NETWORK EDUCATION AND PROGRAM REFERRAL MATERIALS

- Inland Empire Health Plan (additional / most recent materials available [here](#))
- L.A. Care Health Plan

Talking Points for Palliative Care Program Promotion

These talking points were adapted from descriptions used by MCPs and providers. They can be used by anyone who wishes to promote a specific MCP's palliative care program to a clinician who is in a position to refer patients.

WHAT THE PROGRAM IS AND WHO IT IS FOR

[THE PALLIATIVE CARE PROGRAM] is a home-based service provided by [MANAGED CARE PLAN] at no cost to the member.

This program is an extra layer of support for Medi-Cal managed care patients with advanced progressive disease in need of symptom control, advance care planning, or psychosocial support. These are patients who are frequently in the hospital or emergency department. There are specific diagnostic categories and other criteria that determine who is eligible.

The patient retains all their normal health plan benefits, which are coordinated between the doctors, the medical group, [MCP], and the [THE PC PROGRAM] palliative care team.

Palliative care is provided by a team of physicians, nurses, social workers, and coordinators. The palliative care providers have an after-hours call line and can provide services after hours.

Palliative care is not hospice. The patient may continue their disease-focused treatment, and there is no six-month time limitation. Palliative care is a program to help people with serious illness to live well. It is important to understand how palliative care differs from hospice, because some people may feel scared by the term "palliative care" because they confuse it with hospice or end-of-life care.

HOW TO ACCESS THE PROGRAM FOR YOUR PATIENTS

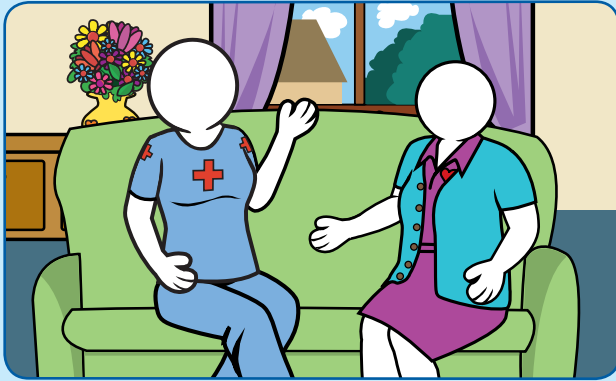
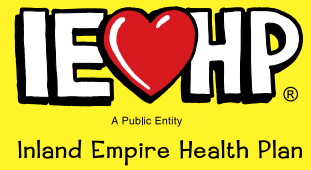
To make a referral, complete the referral form, and fax or e-mail it to [MCP]. For questions, just call the staff team for [THE MCP PC PROGRAM].

All referrals will be reviewed by our palliative medical directors.

[THE PC PROGRAM] has improved patients' quality of life and reduced their use of the hospital and emergency department. Patients and providers appreciate the extra layer of support that palliative care provides.

MyPath PROGRAM

QUESTIONS & ANSWERS (PROVIDERS)



What is My Path?

An ongoing home-based program for IEHP patients who have been diagnosed with an advanced disease like cancer, congestive heart failure or Parkinson's. My Path uses an interdisciplinary team to serve their needs, ranging from body, mind and spirit.

Q. Which people are on the interdisciplinary team?

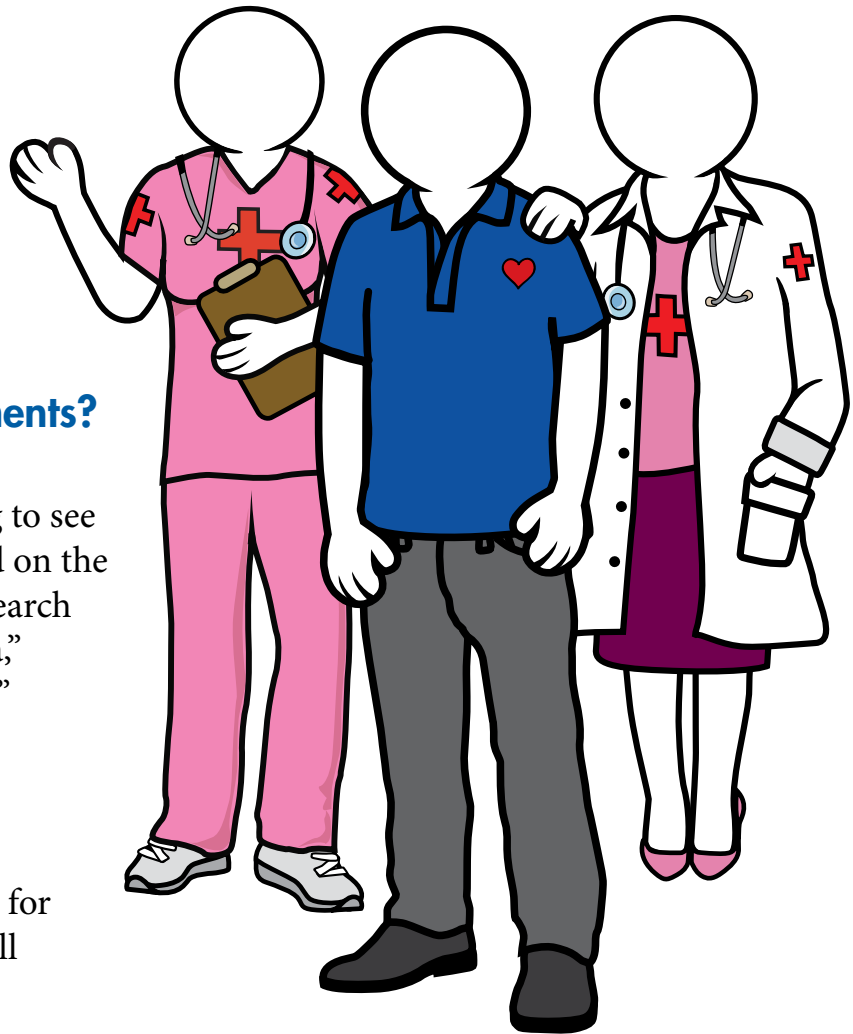
A. A Physician, Nurse Practitioner, registered nurse, social worker, and spiritual counselor. Some teams also have access to a pharmacist, dietician and home health aides.

Q. What are the eligibility requirements?

A. During a program consultation visit, a physician will assess the patient, looking to see if he or she meets program criteria listed on the IEHP website. Visit www.iehp.org and search under "Utilization Management Criteria," subtopic "Other" and click on "My Path."

Q. Is there a certification process similar to hospice?

A. Patients must meet criteria to be eligible for this ongoing in-home program. They will need to be recertified every 12 months.



Q. What general services does the program offer?

A. 24/7 access to a My Path team led by a physician to:

- + Address distressing symptoms
- + Provide IV fluids
- + Perform wound care
- + Coordinate other home health needs
- + Work with patient's current providers
- + Provide medication management

Core services of the program:

- + Advanced care planning
- + Palliative care assessment & individualized written plan of care
- + Mental health services
- + Social needs assessment
- + Connection to community resources
- + Care Coordination

Q. How long do we expect patients to stay in the program?

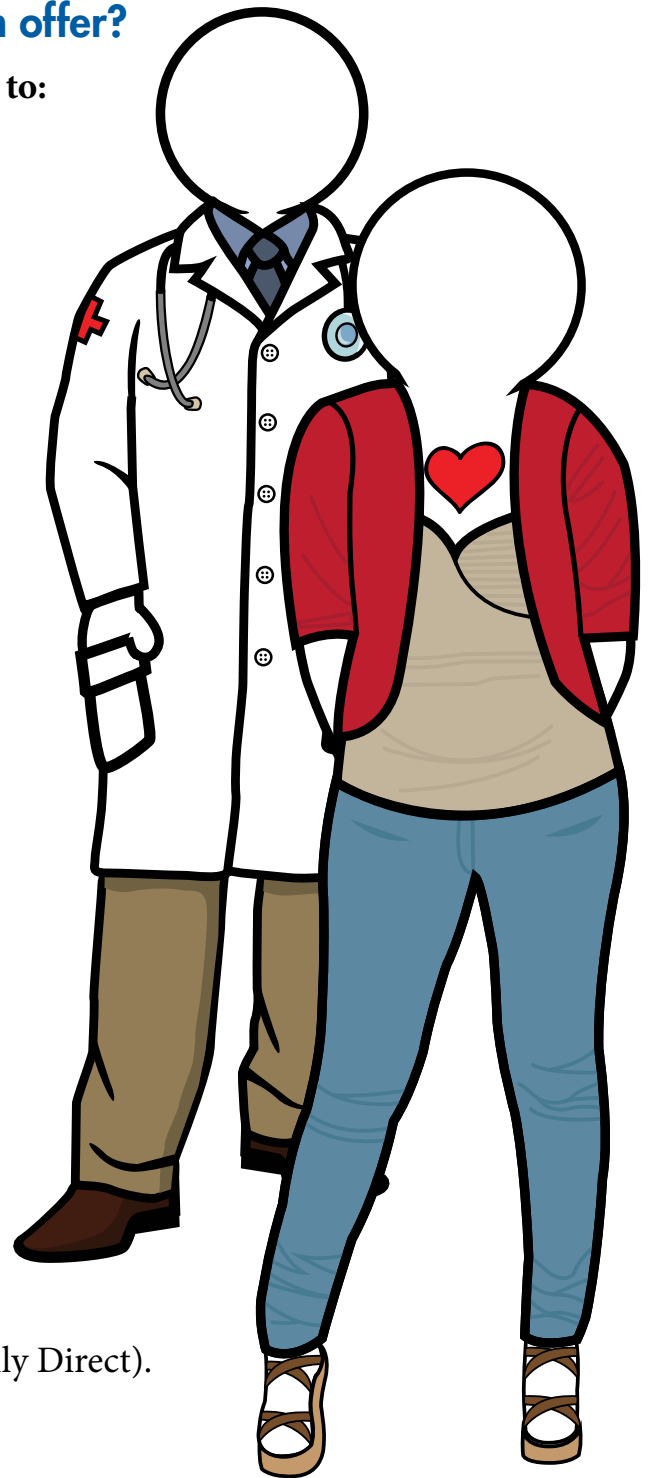
A. There is no time limit. The program targets Members with a prognosis of 2 years or fewer.

Q. What are the implications for Medicare and Medi-Cal?

A. My Path is a Medi-Cal benefit. All Medi-Cal beneficiaries are eligible. Also, IEHP provides the benefit for IEHP Direct DualChoice Members (only Direct).

Q. How do you refer your IEHP patient?

A. Submit a referral request to IEHP for a My Path Palliative Care consultation.



If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at **(909) 890-2054**.



Extra Support for People with Serious Illness: How Palliative Care Helps

People with serious illness often face significant physical, emotional, or spiritual challenges while they are undergoing treatment and managing life with their disease. Extra services called “palliative care” help people with serious illness to live as well as they can by anticipating, preventing, and treating suffering. Palliative care is provided by a multidisciplinary team (may include a doctor or nurse practitioner, RN or LVN, social worker, and chaplain), and can be provided concurrently with curative care. L.A. Care’s palliative care program contracts with home-based providers for these services. Palliative care has been shown to improve clinical and patient experience outcomes.

Types of Services:

- Palliative care assessment development
- Discussion of goals of care
- Development and maintenance of a palliative care plan
- Pain and symptom management
- Care coordination
- Advance care planning, including advance directives and POLST forms where appropriate
- Connection to other supportive services (e.g., mental health, medical social services)

Who is eligible to receive palliative care?

Palliative care is a benefit for L.A. Care enrollees with Medi-Cal coverage only.

ADULTS	PEDIATRICS
<p>General eligibility:</p> <ul style="list-style-type: none"> ✓ Using/expected to use the hospital and/or ED to manage their illness ✓ Advanced or late stage of illness and not in hospice ✓ Death within one year is not unexpected ✓ Member will try in-home or outpatient management prior to using the ED ✓ Member will participate in advance care planning 	<p>General eligibility:</p> <ul style="list-style-type: none"> ✓ The member is under age 21 ✓ The family and/or legal guardian agrees to the provision of pediatric palliative care services ✓ Member has a life-threatening illness
<p>Eligible conditions:</p> <ul style="list-style-type: none"> ○ Congestive Heart Failure ○ Chronic Obstructive Pulmonary Disease ○ Advanced Cancer (Stage III or IV) ○ End Stage Liver Disease ○ Other advanced condition that is known to be life-limiting 	<p>Disease Specific Criteria:</p> <ul style="list-style-type: none"> ○ Conditions for which curative treatment is possible, but may fail ○ Conditions requiring intensive long-term treatment aimed at maintaining quality of life ○ Progressive conditions for which treatment is exclusively palliative after diagnosis ○ Conditions involving severe, non-progressive disability, or causing extreme vulnerability to health complications

How to Make a Referral:

- 1 **Complete** the Universal Palliative Care Referral Form (*Page 1*)
- PCP/Specialist signature or attached order is preferred but not required
- 2 **Attach** pertinent history, medical records, test results for clinical review
- 3 **Submit** to MLTSS Team via Fax: **213.438.4866** or Email: **MLTSS@lacare.org**. Please contact us with any questions about the program, our clinical and administrative staff would be happy to assist you.

