

Rural Palliative Care: Strategies for Sustainability

Billing and Traditional Reimbursement	Grants and Philanthropy	Value-Based Contracting	Emerging Opportunities
<p>What: Direct billing for specific services through Medicare, Medicaid, or private plans.</p> <p>How:</p> <ul style="list-style-type: none"> • Provider Visits: Physician, APRN/PA, MSW (in some situations) • E&M codes • Medicare Care Coordination Codes: • Advance Care Planning (ACP) • Chronic Care Management (CCM and Complex CCM) • Transition Care Management (TCM) <p>Align with other services: Incorporate as part of covered home health services for appropriate patients Potential for earlier hospice admissions (as appropriate) and longer hospice length of stay.</p>	<p>What:</p> <ul style="list-style-type: none"> • Federal, state, local grant opportunities • Donations or local foundation funds (i.e., auxiliary) <p>How:</p> <ul style="list-style-type: none"> • One-time grants are typically used to fund development costs • Local foundations might offset operating costs • Bequests or larger gifts can support services in a variety of ways 	<p>What:</p> <ul style="list-style-type: none"> • Accountable Care Organizations (ACOs) • Bundled Payment Programs especially for Oncology or Heart Failure • Other population-based or risk-sharing arrangements <p>How: Understand how focusing on patient goals and active care planning can help:</p> <ul style="list-style-type: none"> • Reduce potentially avoidable utilization • Decrease use of high cost treatments and medications as aligned with patient goals • Generate savings, which can be used to re-invest and help cover costs of palliative care services <p>Request supplements or bonuses based on performance related quality metrics, such as rates of ED visits, readmissions, and patient satisfaction.</p>	<p>What: Medicaid programs, Medicare Advantage plans, and/or other payers develop palliative care reimbursement or benefit options (varies by state and market).</p> <p>Potential for participation in the Medicare Primary Care First Seriously Ill Population Option – will be available in 26 geographic regions (some of which are rural).</p> <p>How: Advocate for development of palliative care reimbursement options, or benefit and insurance coverage programs, ideally with implementation aligned across payers in a state/region.</p>
Underlying Value			
<ul style="list-style-type: none"> • Providing palliative care is the “right thing to do” • Improved quality of care and quality of life for patients with serious illness and/or complex needs • Increased likelihood for patients to continue to receive care in their community, close to family and friends • Increases patient and family/caregiver satisfaction • Supports clinician and staff satisfaction and resiliency • Additional palliative care team support for complex patients can reduce clinician stress and enable time to see other patients 			

Full resource available at <http://www.stratishealth.org/documents/Sustainability-Strategies-for-Rural-Community-Based-Palliative-Care.pdf>