

Advanced Care Planning: Are we getting it right?

Reforming States Group

November 11, 2015

- Anna-Gene O’Neal, RN, MSN, MBA
 - President and CEO Alive Hospice
- Robert Berkompas, MD
 - Chief Medical Officer, Alive Hospice
- Alive Hospice
 - Celebrating 40 years this week
 - Community Based Not for Profit
 - Serving over 430 patients daily in a 12 county area in Middle Tennessee

Discussion Tonight

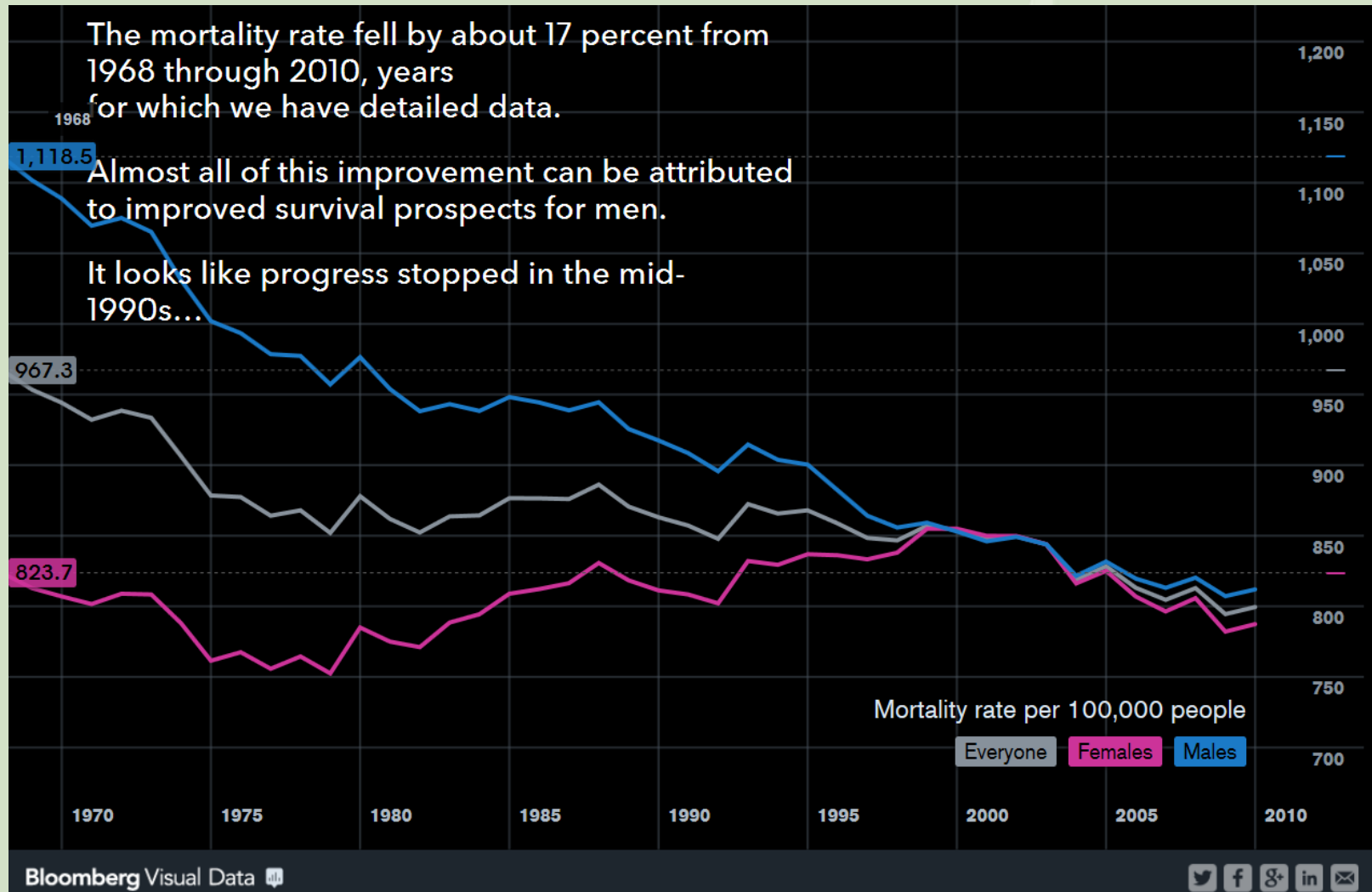
- At any age, a medical crisis could leave someone too ill to make his or her own healthcare decisions.
- For the elderly, however, these crises can be particularly acute.
- More than one out of four older Americans face questions about medical treatment near the end of life, but are not capable of making those decisions.
- Under recently published final rule, the Centers for Medicare and Medicaid Services (CMS) established Medicare coverage for advance care planning (ACP) services.
- What is its likely utilization over the next 12 months and into the future?
- What will be the impact on ACP services?
- What should state policy makers look for in the coming years?

End-of-Life Epidemiology

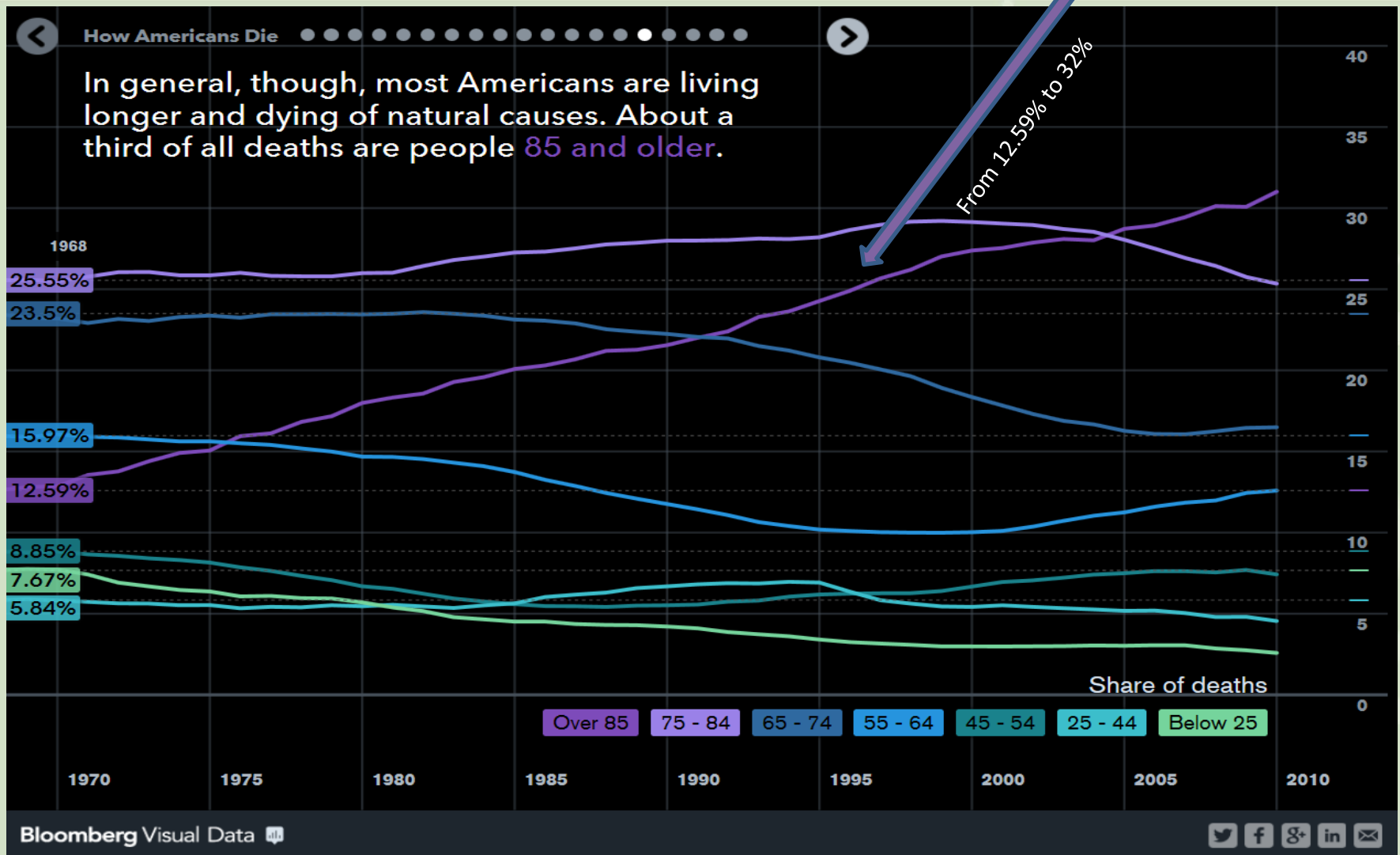


The lifetime prevalence of
death in America is still
100%

How We Die



How We Die



Current Impact

- >90M Americans live with at least 1 chronic illness
- 7/10 Americans die from chronic disease
- 9/10 Medicare deaths associated with 1 of 9 chronic illnesses: including congestive heart failure, chronic lung disease, cancer, coronary artery disease, renal failure, peripheral vascular disease, diabetes, chronic liver disease, and dementia.
- 32% of Medicare spending are from last 2 years of life

End of Life



www.thegiftinitiative.org





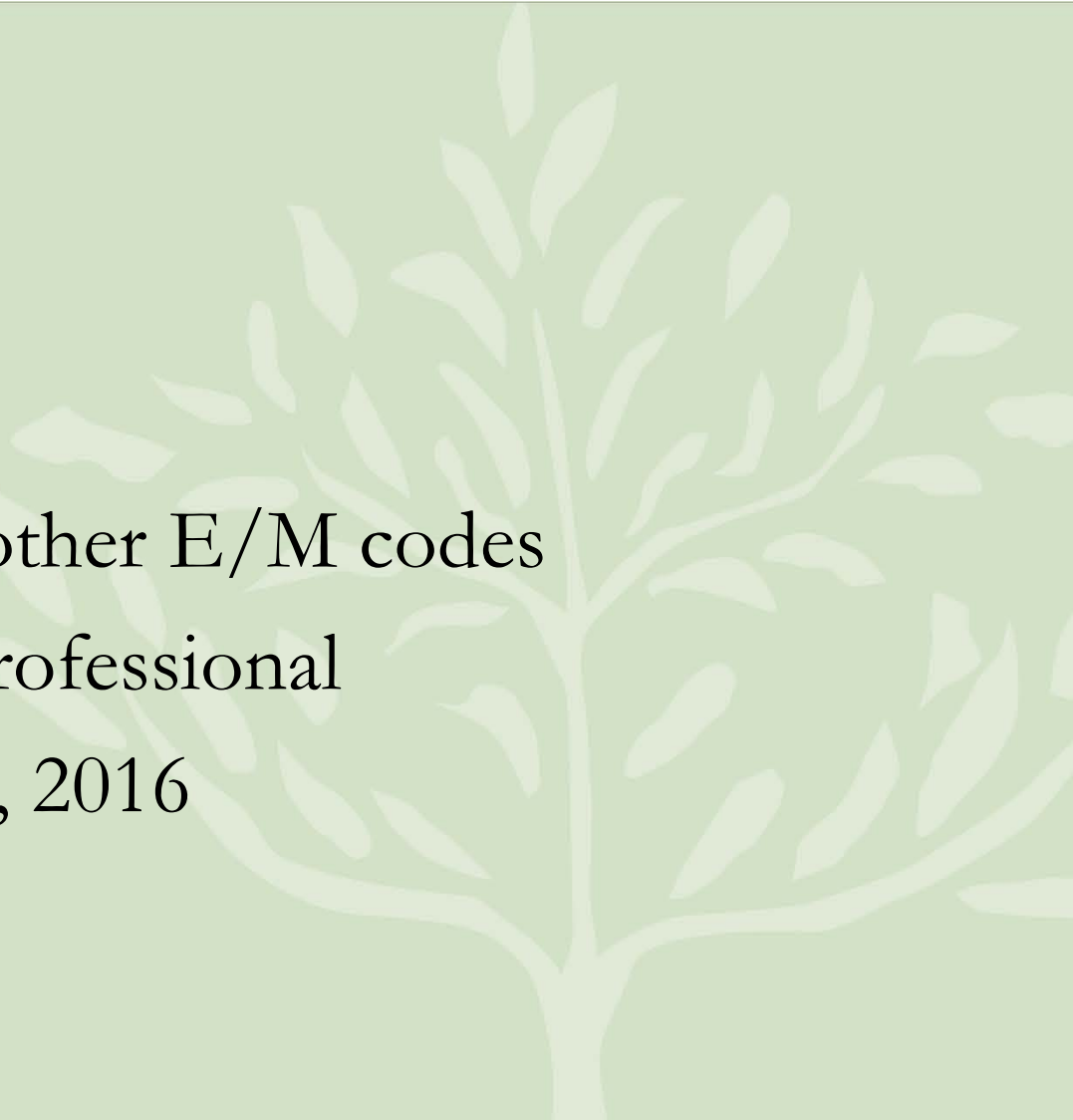
- **Friday October 30, 2015**
- **CMS Posts CY2016 Physician Fee Schedule Final Rule**



PROs

- Acknowledgement of true Patient Centered Care Approach
- Finally remove “reimbursement” barriers for conversations; no excuses
- Motivation to start conversations about the end of life...before the end of life crisis

Final Rule Summary

- 2 Codes
 - Initial Code
 - Second 30 min
 - Form Required
 - Can bill alongside other E/M codes
 - Qualified Health Professional
 - Effective January 1, 2016
- 



Concerns

- Overutilization
 - No limit on frequency of reimbursement
- Practitioner Paradigm Shift:
 - From Aggressive Treatment to ...
- Quality of the Conversation
 - No training requirements
- Quality of the Conversation
 - Content



What's Next

- Research to be funded
 - Do ACP make a difference in end of life treatment decisions?
 - % compliance with ACP
 - Financial Impact
 - Quality of Life tools
 - Comparison on Access to Health Care Resources
 - Demographic Variances and Influences

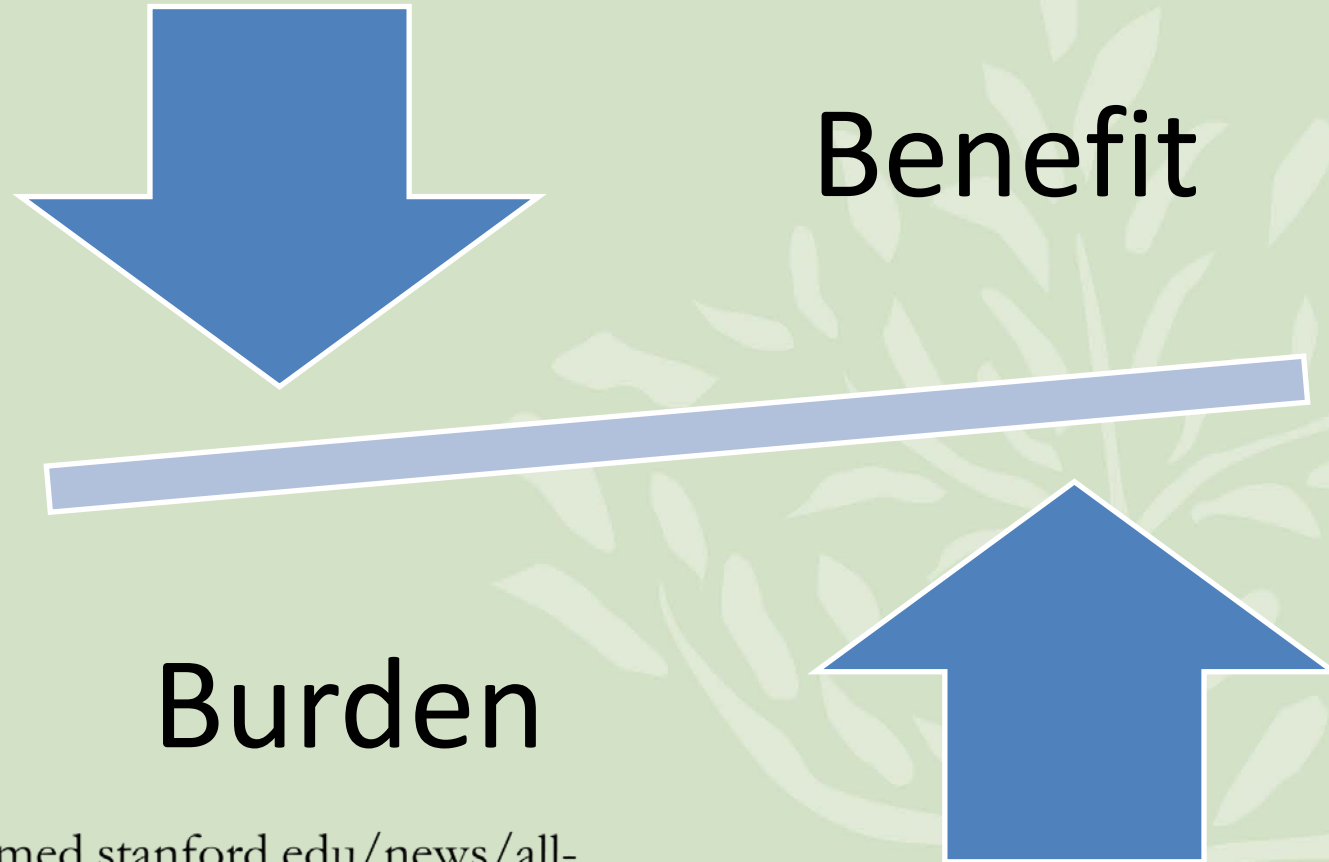
Measure Title	Measure Number			Measure Description	Measure Group(s)
	CMS	NQF	PQRS		
Care Plan	N/A	0326	047	Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.	Chronic Kidney Disease Heart Failure HIV/AIDS Parkinson's Disease Chronic Obstructive Pulmonary Disorder Dementia



What's Next (cont)

- New ACPs that more closely approximate EOL states
 - Generic
 - Disease Specific
 - Acknowledging medical futility of current options
- Required versus Optional
 - If required, at what age?

Physicians Die Differently



- <http://med.stanford.edu/news/all-news/2014/05/most-physicians-would-forgo-aggressive-treatment-for-themselves-.html>

Health Care Impact

- If more people choose different end of life preferences
 - Change in cost is not just a reduction in services rather a change in services
- Health Care Impact
 - Workforce
 - Funding for Palliative Care and Hospice Care
 - Continued Research

“We thought we could cure everything, but it turns out we can cure only a small amount of human suffering. The rest of it needs to be healed.”

—*Rachel Remen, MD*

Core Tenant

- Empowering true Patient Centered Care
- Balancing treatment options and medical futility



Open Discussion

