Value-Based Insurance Design (VBID) Model

Hospice Learning Workgroup Session IV: Addressing Health Disparities in End of Life Care

Thursday, June 24, 2021

Center for Medicare & Medicaid Innovation
with a Presentation by the Center to Advance Palliative Care (CAPC)

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How to Engage in the Conversation

• We encourage you to have your camera on and to share your thoughts and questions by unmuting your microphone.

• Questions for the group and additional thoughts can also be shared through the Zoom chat box.
  • Select “Chat” followed by “Everyone.”

• If inquiries require additional research or if we are unable to get to a question submitted via the chat, the VBID Model Team will investigate as needed and reply via email.
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- Per member per month (PMPM) amounts
- Shared savings
- Incentive payment amounts
- Market share
- Profits
- Margins
- Costs
- Reimbursement levels or methodologies
- Terms of coverage
Agenda

• Welcome
• Presentation by CAPC
• Discussion
• Next Steps
Addressing Health Disparities in End of Life Care
Speakers

Brittany Chambers
Associate Director, Education

Allison Silvers
VP, Payment & Policy
Racial Disparities in Health Care

Health care disparities are widely documented for African Americans and Hispanics compared to Whites across a range of conditions (e.g. cancer, heart disease, etc.).
Symptom Management Disparities in Serious Illness Care

Compared with Whites, Seriously Ill African Americans are:

→ less likely to have their pain adequately assessed and treated

→ less likely to receive care consistent with preferences
Communication Disparities in Serious Illness Care

Compared with Whites, Seriously Ill African Americans are:

→ less likely to participate in advance care planning

→ less likely to discuss prognosis with providers

→ more likely to have unmet needs for provider communication
Service Utilization Disparities in Serious Illness Care

Compared with Whites, Seriously Ill African Americans are:

→ less likely to use hospice and palliative care
Payer Strategies to Address Serious Illness Disparities

→ Proactive Identification

→ Care Manager Responsibilities
  • Assessment for distress
  • Communication with treating clinicians
  • Skilled linkage to palliative care

→ Targeted Quality Monitoring/Incentives
Proactive Identification

* Racial bias in algorithms (Obermeyer 2019) – can compensate with lower cut-points for people of color
The Role of the Care Manager

Symptom Burden
- Revised Edmonton Symptom Assessment System (ESAS)

Functional Impact
- Palliative Performance Scale (PPS)
- Karnofsky Performance Status

Anticholinergic Burden (if patient over age 65)
- Anticholinergic Burden Calculator

Caregiver Burden
- Zarit Burden Interview

“No one ever asked me about this before!”
Linkage to Palliative Care Specialists When Warranted

Add expertise in symptom management and clarifying goal-aligned care
Incentivize Through Quality Measures?

→ Availability of palliative care in network hospitals


→ Patient-reported measures

• How much do you feel heard and understood?
• How much do you feel you got the help you wanted for pain?
Discussion
Next Steps
Next Steps

• Action Items

• Please fill out a short, anonymous survey

• Our next Hospice Learning Workgroup will be Thursday, July 22 at 3pm ET/ 12pm PT
  • Topic: Transitional Concurrent Care

• Keep the dialogue open

• Please feel free to reach out to us at VBID@cms.hhs.gov