

California Advanced Illness Collaborative

The California Advanced Illness Collaborative brings together healthcare payers and providers to address the need for increased access to community- and facility-based palliative care in California. Building on the work of the National Business Group on Health, the Center to Advance Palliative Care (CAPC), and the California HealthCare Foundation (CHCF), the Collaborative will develop consensus standards in the coming year for payers and providers that promote and support access to palliative care in California. These standards will complement the work on this issue currently underway throughout the United States.

There are many barriers to increasing access to palliative care, including reimbursement from healthcare payers. This project presents an opportunity for payers and providers to work together to find new ways to deliver and finance palliative care across the continuum of care. It's clear that a sustainable payment model is necessary before the potential of palliative care can be realized.

Since April 2015, the Coalition for Compassionate Care of California (CCCC) has been working with Blue Shield of California to create the Collaborative. CCCC and Blue Shield have complementary areas of expertise. CCCC has deep connections with palliative care leaders throughout the state as well as valuable experience convening multi-stakeholder collaboratives. Blue Shield, on the other hand, has strong relations with payers and the expertise and connections to help bring the right players to the table.

CCCC will convene payers and providers for a series of meetings. Payer participants will include clinician and contracting representatives from managed care health plans and other risk-bearing organizations. Provider participants will include representatives from a range of organizations such as well-established not-for-profit hospice/palliative care organizations.

The Collaborative's activities will focus on developing standards for advanced illness care in California that address palliative care benefits, bundles of clinical services (e.g., palliative care consult, respite care), payment models for each service bundle (e.g., fee for service, care rate, per diem), and provider performance measures (including patient reported outcome measures). Our goal in the next 12 months is to reach consensus on standards for advanced illness care. In the second phase of the project, we will implement the standards as a multi-payer, multi-provider pilot in at least one major region of California. Our ultimate goal is to spread models based on the consensus recommendations so that more than 80% of California's high-need patients receive care consistent with these standards by 2020.