CRAFT THE ARGUMENT

POLICY IMPERATIVES AND TRENDS

In some cases, health plans are required to offer palliative care to their members. Nationally, Medicare Advantage Organizations (MAOs) participating in the <u>Value-based Insurance Design (VBID) Hospice Benefit component</u> are mandated to ensure access to palliative care for eligible enrollees, regardless of whether those enrollees choose hospice services.

In California, Medi-Cal managed care plans and Dual Eligible Special Needs Plans (D-SNPs) are mandated to offer palliative care. Since 2018, Medi-Cal managed care plans in California have been required to ensure access to palliative care for seriously ill adult members who meet specific eligibility criteria. In 2019, this requirement was extended to include pediatric members. As of January 2024, D-SNPs in California are required to ensure access to palliative care for their seriously ill members. Several other states are currently pursuing or exploring similar requirements.⁴

Even if not mandated to provide palliative care, health plans can seek a competitive advantage by adopting palliative care now, and by developing a strong palliative care provider network and sound referral and care management practices, before it becomes universal practice.

4 States Make Progress on Palliative Care - NASHP



THANK YOU

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This toolkit was developed with the generous support of the California Health Care Foundation

