

Palliative Care in Long-term Care Case Studies

Bundled Payment

Accountable Care Organization (ACO)

Center to
Advance
Palliative Care™

capc

Case Study: Palliative Care in Bundled Payment

Delivery Model: Consultative

- Learned that 20% of their admissions were dying within 90 days
- Identify patients by an EHR algorithm: LACE tool; poly-pharmacy; pain
- Palliative care specialist (MD, NP, or RN) conducts goals of care discussions with patient and family, and “challenges the care plan”

Impact of Palliative Care Services

- Readmissions reduced (still analyzing impact)
- Post-acute spending reduced; reductions in therapy and reductions in facility length-of-stay
- Referrals to hospice increased (from less than 15% to 40%)

Impact on Post-Acute Provider

- Savings achieved under Bundled Payments for Care Improvement (BPCI)
- Included in all area post-acute networks
- Preferred partner to two major hospitals

Case Study: Palliative Care in the Post-Acute Arm of an ACO

Delivery Model: Basic and Collaborative

- Nursing staff in SNF and home care received training in palliative care skills, with deeper skill development for the “patient navigators”
- Identify patients by an EHR algorithm: diagnosis and prior utilization
- Palliative care team on site several times/week to supplement care for the high need: intensive symptom control; facilitate family meetings

Impact of Palliative Care Services

- Improved patient and family satisfaction
- Reduced hospital readmissions
- Referrals to hospice increased

Impact on Post-Acute Providers

- Shared Savings, Year 1 – SNF: over \$300,000; Home Care: over \$100,000
- Included in new ACO contract with commercial payer