

LeadingAge and Hospice Members: Partners in Providing Quality Care to Older Adults

January 2019



LeadingAge[®]

Hospice is an essential element of a high-quality health and long-term services and supports (LTSS) system.

That's why hospice providers are a valuable part of LeadingAge.

And that's why LeadingAge wants to be sure that members who are hospice providers are aware of all the services and resources we have to offer.

The following guide offers a quick overview of the benefits that hospice providers enjoy as LeadingAge members.

These benefits include access to:

- Top-notch advocacy in the nation's capital on issues that matter most to hospice providers, consumers, and their families;
- A wide variety of services and resources designed to help you continue offering the highest quality hospice services within a rapidly changing health and long-term care system;
- Myriad opportunities to share your concerns and best practices with LeadingAge hospice experts and other hospice providers;
- Access to a variety of educational opportunities to help you address new challenges and take advantage of new opportunities in the hospice field; and
- Cutting-edge research focusing on palliative care and end-of-life issues.

Like all LeadingAge members, hospice providers also benefit from an ever-expanding collection of LeadingAge services, resources, and tools to help you:

- Enhance the leadership and management skills of executives at all levels of your organization;
- Bring evidence-based best practices and programs to your hospice settings;
- Gain support for your efforts to develop a high-quality workforce; and
- Thrive in Medicare and Medicaid managed care environments.

Finally, LeadingAge membership offers providers in all segments of the LTSS field an unprecedented opportunity to participate in a community of professionals with a well-earned reputation for working together to solve problems and create new opportunities to better serve an aging America.

What Do Hospice Members Gain from LeadingAge Membership?

As LeadingAge members, hospice providers enjoy the following unique benefits:

1. Advocacy to Support and Strengthen Hospice Programs Nationwide

Hospice providers are not immune from the policy-related and operational challenges associated with profound changes in the way health care is structured, delivered, and financed in the United States. LeadingAge maintains a consistent focus on how these changes impact hospice policy and practice. We track legislative and regulatory developments affecting hospice providers, monitor changes in practice, work with hospice providers to chart our advocacy agenda, and advocate for meaningful quality measurement in hospice settings.

All of our conversations with members of Congress and congressional staff are grounded in the message that hospice providers are the originators of the interdisciplinary team approach and are an essential and unique part of the health care system.

Our legislative work during the 115th Session of Congress (2017-2018) touched on several issues that are important to hospice providers. We will continue to work on similar legislative proposals during the 116th Congressional Session (2019-2020), which includes:

- **Regulatory Relief.** In response to a 2017 request from the House Ways and Means Committee, we requested regulatory relief for hospice providers in the areas of hospice emergency preparedness, the hospice face-to-face requirement, and the hospice notice of election.
- **Physician Assistants.** We worked to ensure inclusion of a provision in the Bipartisan Budget Act of 2018 (P.L. 115-123) allowing physician assistants to serve as attending physicians for hospice patients receiving services on or after Jan. 1, 2019.
- **Patient Choice and Quality Care.** We have visited with more than 40 members of Congress and worked closely with our partners in the field to encourage passage of the Patient Choice and Quality of Care Act (PCQCA) of 2017 (S. 1334, H.R. 2792). The goals of this bipartisan proposal include promoting the portability of advance directives and establishing a group to advise the Secretary of Health and Human Services (HHS) on issues associated with advanced and terminal illness.
- **Hospice Access in Rural Areas.** We have monitored progress on the Rural Access to Hospice Act of 2017, which would authorize Medicare to pay directly for hospice care delivered in federally qualified health centers and rural health clinics.
- **Hospice Education and Training.** We support the Palliative Care and Hospice Education and Training Act, which requires HHS to provide support for Palliative Care and Hospice Education Centers; directs the Agency for Healthcare Research and Quality to institute a national education and awareness campaign to promote the benefits of palliative care; and requires the National Institutes of Health to expand national research programs in palliative care.
- **Early Discharge to Hospice.** We are tracking the Bipartisan Budget Act requirement that MedPAC conduct an evaluation of the hospital early-discharge-to-hospice provisions. We are concerned about how these provisions will impact hospice providers that already experience short lengths of stay.
- **Medicare Advantage.** We continue to monitor efforts to carve-in hospice to Medicare Advantage (MA) plans. As a demonstration with an evaluation, we believe there is an opportunity for good partnerships between MA plans and hospice providers.
- **Medicare Care Choices.** We support establishing a Medicare Care Choices Model care planning benefit under Medicare that offers people with serious disabilities access to interdisciplinary team planning, more information about potential treatment options, and assurance that the course of treatment they choose is consistent with their personal goals, values, and preferences. These services may be offered before hospice for individuals who may not be ready for hospice care.

- **Fraud Reduction.** We support increasing funding for Medicare integrity activities to reduce fraud perpetrated by individual providers.

LeadingAge serves as the eyes and ears of its members in Washington by tracking policy issues in the Administration, particularly at (HHS). Currently our work focuses on several areas:

- **Hospice Payment Update Rule.** Each year, we track the notice of proposed rulemaking for the Medicare hospice prospective payment system, along with associated policy and regulatory changes. We summarize the proposed rule for members, engage with the LeadingAge Hospice Advisory Group to help shape the comments we submit, and update members when the final rule is released.
- **Opioid Crisis.** We will monitor HHS's implementation of the Opioid Crisis Response Act, which will enable hospices to "safely and properly dispose of controlled substances" after patients die.
- **Advanced Illness Payment Model.** In June 2018, HHS Secretary Alex Azar responded favorably to recommendations for an advanced illness service delivery and advanced illness payment model, as included in PCQCA. This action allows the Center for Medicare and Medicaid Innovation (CMMI) within the Centers for Medicare & Medicaid Services (CMS) to create and test this new model in clinical care. We will track and provide input as appropriate. Beginning in 2021, hospice can be carved-in to Medicare Advantage plans through the Value-Based Insurance Design demonstration. We will track the issue and share information as further guidance is released.
- **Medicare Advantage Carve-In.** Beginning in 2021, hospice can be carved-in to Medicare Advantage plans through the Value-Based Insurance Design demonstration. We will track the issue and share information as further guidance is released.

2. Services, Resources, and Tools for Hospice Members

LeadingAge provides myriad opportunities for hospice providers to learn about new trends in the field and participate in forums to share their own experiences. These opportunities include:

- **Highlighting Nonprofit Hospice Services.** We are working with LeadingAge Ohio and the National Partnership for Hospice Innovation to develop a white paper describing the benefits of the traditional, robust hospice model; differences across the spectrum of hospice providers; comparative growth in the nonprofit and for-profit sectors; and recent policy changes and current proposals we all support.
- **Offering Access to Listservs, Networks, and Advisory Groups.** Hospice members participate in LeadingAge's Hospice Listserv and Hospice Advisory Group, as well as conference networking events designed to connect them with peers across a variety of professional disciplines.
- **Conducting End-of-Life Research.** The LeadingAge LTSS Center @UMass Boston, a research partnership between LeadingAge and the Gerontology Institute at the University of Massachusetts Boston, maintains a research focus on palliative and end-of-life care, among other topics. LTSS Center fellows have published studies on end-of-life issues in such peer-reviewed publications as the *Journal of the American Geriatrics Society*, *Journal of Social Work in End-of-Life and Palliative Care*, *Journal of Palliative Medicine*, *Home Healthcare Now*, *Journal of Pain and Symptom Management*, *Geriatric Nursing*, and *OMEGA – Journal of Death and Dying*. Find links to these articles through the LTSS Center's [Resource Library](#).
- **Offering Managed Care Solutions.** In November 2018, LeadingAge launched the [Center for Managed Care Solutions and Innovations](#), which aims to help members thrive in Medicare and Medicaid managed care environments. The center offers tools, presentations, webinars, research findings, and other resources that are meaningful and useful to all LeadingAge members, including hospice members.
- **Promoting Workforce Solutions.** Recruiting and retaining staff at all levels is the single largest challenge aging services providers face. The [LeadingAge Center for Workforce Solutions](#) provides tools, presentation materials, promising practices, and other resources for all LeadingAge members, including hospice providers.

- **Holding Town Hall Conversations.** Working in partnership with LeadingAge state affiliates across the country, we held 34 Town Hall Conversations between March and October 2018 to identify the key issues and concerns that keep LeadingAge members up at night. The information we collected helps support our advocacy efforts and will be incorporated into LeadingAge's 2019 policy priorities. We plan to continue asking members, including hospice members, to share their challenges and ideas with us.
- **Connecting Hospice Providers with CMS.** We worked with CMS to host a small-group, facilitated session on hospice during the 2018 LeadingAge Annual Meeting as part of CMS's Patients Over Paperwork Initiative.
- **Developing Resources on Medical Marijuana.** We developed a guidance on medical marijuana and aging services and presented a webinar on the topic through the new LeadingAge Learning Hub. The webinar, which is still available for download, included a focus on legal considerations associated with the legalization of medical marijuana around the country.

3. Learning Opportunities For Hospice Providers

Annual Meeting: The LeadingAge Annual Meeting & EXPO features more than 200 concurrent sessions on a range of topics relevant to aging services providers across the continuum of care and services. Each year's conference program features a home health and/or hospice Deep Dive Workshop. In addition, our education offerings focus on a range of topics—including dementia, wellness, technology, workforce, leadership, and marketing—that appeal to a wide variety of providers, including hospice providers. Recent hospice-related conference sessions explored:

- **Advanced Principles of Hospice Management**
- **Expanding into Home Health and Hospice**
- **Launching Palliative Care on Your Campus**
- **Adopting a Dementia-Capable Palliative Program**
- **Spiritual Wellbeing: Exploring a Meaningful Life**
- **Hospice Audit Activity and How to Avoid It**

Leadership Summit: The LeadingAge Leadership Summit is designed for c-level positions and features an advocacy-focused Lobby Day with scheduled visits to congressional offices on Capitol Hill. The conference program features shared learning and visioning sessions filled with high-level discussions that hospice providers can apply to their work.

Learning Hub: Our centralized online source for education programs is designed to address the diverse professional development and education needs of individuals working across the entire spectrum of aging services, including hospice. One popular resource, entitled "Hospice: Policy, Practice and Partnership," offers hospice providers guidance on what to expect from recent legislative and regulatory activity, how to adjust to the changes, and ways to respond if a program gets audited. Learning Hub content also focuses on a range of topics, including leadership, dementia, and managed care, which hospice providers are sure to find relevant.

Leadership Programs: Our year-long Leadership Academy is designed to enhance the leadership skills and core competencies of nonprofit leaders within the LeadingAge membership. In addition, our Leadership Educator Program helps to build a pool of experienced LeadingAge members who can lead leadership programs. There's no better way for hospice providers to learn new leadership skills and expand the expertise of emerging leaders in the hospice field.



4. Access To Experts In The Hospice Field

A key benefit for all LeadingAge members is the access they enjoy to a highly respected national team that brings unparalleled expertise to the issues facing providers of aging services. Several members of that team have expertise and experience addressing issues that matter most to hospice providers. We invite you to call on them at any time to ask questions, seek advice, and offer your opinions about issues affecting the work you do.

Our team includes:



Ruth Katz: Our senior vice president for policy came to LeadingAge from the Office of the Secretary for Planning and Evaluation at HHS where she helped produce a series of reports on hospice-related and end-of-life care. Ruth and her HHS team also worked on hospice and palliative care issues with the National Institutes on Aging, Administration for Community Living, and CMS.



Janine Finck-Boyle: Our vice president for regulatory policy is a licensed nursing home administrator who has worked in both the nonprofit and for-profit sectors and directed an inpatient hospice program in a nursing home. As a former chief executive officer of a long-term care hospital, Janine has a deep understanding of the practice and policy aspects of advanced illness and coordination of palliative care.



Aaron Tripp: Our vice president of reimbursement and financing policy provides analysis, technical support, and information about Medicare prospective payment systems, including hospice. A social worker and policy analyst who specializes in financing and payment policy, Aaron serves as LeadingAge's liaison to MedPAC and MACPAC.



Andrea Price-Carter: Our manager of congressional affairs is working hard to increase the visibility of hospice programs and advanced illness services among key members of Congress, including members of the newly created bipartisan Congressional Palliative Care Task Force. Before joining LeadingAge, Andrea developed her lobbying skills as director of government relations for the National Association for the Support of Long-Term Care, and with AARP's Federal Affairs Health Team.