



**Medicare Care Choices Model
5 year demonstration project
2016 - 2020**

Iowa City Hospice Project Staff

Project Director: Kara Thoma, LMSW ACHP-SW
Development and Marketing Manager

Care Coordinators: Deanne Schwarting, RN
Shannon Napier, SW

Purpose

The purpose of this Model is to test whether Medicare beneficiaries who qualify for coverage under the Medicare Hospice Benefit would elect to receive the supportive care services typically provided by hospice if they could continue to seek curative services.

Patient Eligibility Criteria

- *Meets hospice eligibility and admission criteria.* The Medicare Care Choices Model participants are followed by their primary clinician, who is responsible for certifying that the patient meets the six month prognosis
- Has a diagnosis of either terminal cancer, COPD, CHF, or HIV/AIDS
- Lives in a traditional home (not a nursing home, assisted living facility, hospice inpatient facility, or other institutional setting) continuously for 30-days prior to electing this model
- Has had at least one hospital encounter (i.e. ED visit, Observation stay, or Admission) in the last 12 months for any reason
- Has had at least three office visits with any primary care or specialist provider within the last 12 months for any reason
- Is enrolled in Medicare Parts A and B; with Part A being Primary for the last 12 months

- Is not enrolled in a Medicare managed care plan
- Has not elected the Medicare Hospice Benefit or Medicaid Hospice Benefit within the last 30 days prior to their participation in the MCCM
- If, during the course of participation in the model, a beneficiary chooses to seek only hospice care, a hospice Notice of Election would be signed and the beneficiary would not be eligible to continue participating in the Model. A beneficiary who leaves the model would not be eligible to return to the Model at a later date.

Ongoing Care Coordination and Case Management

Once the participant has enrolled in the Care Choices program, a comprehensive assessment will be completed within 3 days of enrollment by the Care Coordinator, RN & Care Coordinator, SW.

A set of patient-centered goals are reviewed frequently with the participant and family and shared with the participant's care team. Communication with the primary provider is central.

The participant will complete an Advance Directive and an IPOST if s/he wishes.

A core set of services will be provided by Iowa City Hospice.

At a minimum, biweekly telephone calls will be made to assess the participant's current status and needs. Visits will be made and ongoing services provided based on participant needs and goals.

Care Choices participants do not need to be recertified on an ongoing basis.

Care Choices participants that require DME and/or prescription medications (related and/or not related to their qualifying diagnosis) will receive these through their current insurance coverage as usual. The hospice is not responsible for coverage of these items, but will assist participants in acquiring them.

Bereavement

Medicare Care Choices Model participants will be eligible to receive pre-bereavement services from ICH bereavement staff in the event a need is identified while they are a participant in the model. If the patient dies while a participant in the model, the identified family members are also eligible to receive the same bereavement services as those family members of hospice patients.