



Finding Your Sales Strategy For Palliative Care Services

PlayMakerHEALTH
The Post-Acute Growth Platform



The challenging health care landscape of 2020 is leading home health providers to view their businesses and avenues of care with new eyes. In a value-based landscape with patients growing frailer while living longer and managing a range of comorbidities, home health agencies want to expand service lines, develop new revenue sources and craft a deeper referral base.

Palliative care can be the solution for all three goals. The practice aims to improve the quality of life for patients facing life-threatening illnesses, doing so through methods designed to prevent and relieve suffering. To deliver palliative care, home health providers must re-examine their sales strategies to build this new capability.

Conditions are right for this renaissance. Community-based palliative care is found to significantly reduce total health care costs and hospital admissions, including a potential nationwide health care savings of more than \$100 billion over the next two decades, according to one government watchdog in 2019.

“Palliative care is very important for patients who aren’t ready for hospice care, but are definitely in need,” says Chip Carroll, director of strategy and business development for post-acute technology firm PlayMaker Health. “It gives you some insight into the future of health care. Palliative care is definitely going to be very important for home health and hospice to address.”

This white paper will reveal the deeper benefits of palliative care for home health agencies, showing how palliative care can address COVID-19-related health needs in 2021, how to build your palliative care network, and how to craft your sales and marketing plan.

Palliative Care and COVID-19

Why new payment models and new patient needs make palliative care a must in 2021

With its focus on in-home care designed to prevent patient suffering, palliative services were already deeply valuable before 2020. The industry's continued move toward value-based care made them more so.

Then came COVID-19.

"In the entire serious illness space, from home-based primary care to palliative care and hospice care, there's essentially a growing demand for all those services, particularly in light of the COVID-19 pandemic," says Alyson Cutshall, chief growth officer for Telios Collaborative Network. "Patients and families want to get the best care possible and preferably in their home environment."

The trends pushing palliative care are undeniable. First, there are the massive numbers of the aging population itself. An estimated 10,000 people in the United States become Medicare-eligible each day, a trend that, according to data from the Medicare Payment Advisory Commission (MedPAC), will continue until 2030. According to the National Council on Aging, about 80% of older adults have at least one chronic disease. Nearly 70% have at least two.

With health care providers, lawmakers and payers furrowing their collective brows on how to meet rising health care needs for seniors and control the associated costs, community-based palliative care offers a promising solution. According to a 2019 report from the government watchdog Florida TaxWatch, palliative care can potentially reduce societal health care costs by an estimated \$103 billion in the next two decades.

“Furthermore, palliative care has been shown to mitigate hospital costs by reducing the frequency of 9-1-1 calls, emergency department visits, and unnecessary urgent hospitalizations,” the report’s authors note.

Emerging payment models from the U.S. Centers for Medicare & Medicaid Services (CMS) could boost access to those services and allow providers to achieve a strong margin. CMS has allowed Medicare Advantage plans to offer palliative care as a supplemental benefit. The agency’s Primary Care First initiative, set to begin in 2021, includes a Serious Illness Population payment model that could increase access to palliative care.



Health Plans Expanding Palliative Care

According to an analysis by ATI Advisory, 61 health plans nationwide are offering in-home palliative care as a benefit this year. This is up from 29 in 2019. More than 455,000 beneficiaries are enrolled in these plans.

Efforts are also underway at the state government level. Laws designed to promote palliative care exist in 27 states as of December 2018, according to the National Academy of State Health Policy, all aiming to bring palliative care to more patients with serious, chronic or life-limiting conditions.

“It’s been a problem in palliative care for the last number of decades that there have been very few payers for the services,” says Michael Ferris, managing partner at Healthcare Strategica. “There’s a gap in coverage between home health and hospice, and payers were unwilling to pay for it. Now there is a known methodology to pay for the services. With the

Primary Care First models and in the Medicare Advantage model, those payers are willing to pay for palliative care because they understand that it’s going to ultimately save them money managing that population of patients.”

Building Your Palliative Care Network

How data can help put home-based care in position to succeed

Providers can leverage data to help foster those palliative care ties. The right data provider can track patient data over time, thus empowering home-based care providers to understand where to allocate these services. PlayMaker, for instance, works with vendors to pull in claims data and then deliver it to agencies to let them take a deeper dive.



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Alyson Cutshall
Chief Growth Officer
Telios Collaborative Network

“We can take a six-month look at the trajectory of where the patient was, what type of treatment they received, and when they were discharged,” Carroll says. “I think having a strategy around measuring and seeing outcomes and algorithms using the data is going to allow the entire post-acute care industry to really thrive.”

Referral partners across the health care continuum are concerned about rising costs and key performance metrics that can impact their bottom lines, such as hospital readmissions and intensive care unit and emergency department utilization.

Through the effective use of data, palliative care providers can effectively demonstrate their value proposition to hospitals and

physician practices to reduce costs and contribute to higher quality.

“Among physician practices, the benefit that we can provide is our ability to be their eyes and ears of the home to add value to what they're doing in their clinics and their practices,” Cutshall says. “That enables that physician to better meet the needs of his or her patients.”

The Emergence of Tele-Palliative Care

Telehealth has been driving change in health care for a number of years but has come into new prominence as the nation contends with the fallout of COVID-19.

During this national emergency, CMS has issued waivers relaxing conditions of participation (CoPs) for hospices and other health care providers, including expanded use of telehealth.

Expanding telehealth has enabled providers to build new efficiencies into their workflows and reduce costs. A number of hospice and palliative care industry organizations and lawmakers have called on CMS to make these flexibilities permanent; the agency has said it is reviewing those provisions to see which can be implemented on a long-term basis.

“Telehealth is truly something I don’t think that we’re going to move away from at any point in time,” Cutshall says. “We’ve seen what a gift telehealth can be to providers and patients alike through the COVID outbreak. I do anticipate that the use of telehealth will continue not only in the palliative care space but in all of health care.”

Developing a Sales and Marketing Plan

Laying the right foundation for your palliative care program can form the bedrock of your sales plan. Palliative care providers can educate their referral partners about the benefits of the interdisciplinary approach, symptom management, and goal-concordant care and build on that platform with data that demonstrates high performance on quality metrics, cost savings, and patient outcomes.

“You need to be able to show that you can extrapolate and benchmark claims data and use that technology and that data to identify trajectories of expectations based on the different types of diagnoses and pain thresholds that patients are dealing with,” Carroll says.

A sales and marketing staff that engages with members of the community, including other health care organizations, can boost admissions and market share, Ferris says. The goal is to build a network of preferred referral partners, including internal medicine and family physician practices, hospitals, skilled nursing facilities, accountable care organizations, and specialists.

If your organization does not offer hospice care itself, establishing a relationship with a hospice is important to maintain continuity of care when the patient becomes eligible and chooses to receive end-of-life care in their home.



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Michael Ferris
Managing Partner
Healthcare Strategica

Measuring Success

Palliative care providers can measure the success of their sales and marketing activities in part by tracking some basic metrics, such as the number of new patients who are admitted to the program, length of stay and average daily census.

And as the imperative grows for home health providers to diversify their services to remain competitive, leveraging the inherent benefits of the palliative care model, along with the related clinical and performance data, becomes a need too great to ignore.

“Palliative care is going to be the fastest-growing segment of our industry in home care services. There’s always been such a tremendous need, but we didn’t have visibility of a ready and willing payer. That’s all changing really quickly,” Ferris says. “It’s going to be essential for hospices going forward to have a viable palliative care program.”

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