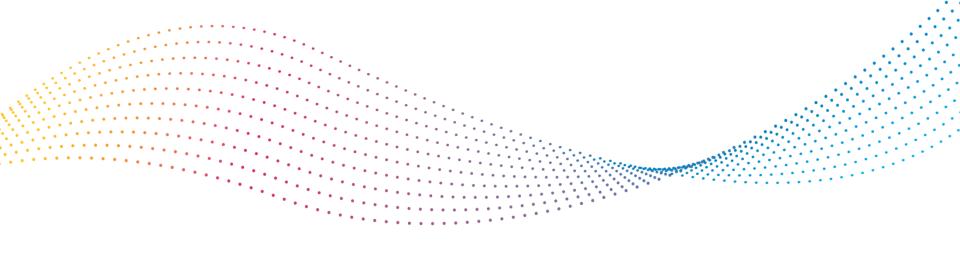


# **Compassionate Connections®**

Centene's Palliative Care Program





## Agenda

- 1. Background
- 2. Program Design
- 3. Results
- 4. Next Steps

## **Centene Overview**



#### WHO WE ARE



#### WHAT WE DO



## 28 states

with government sponsored healthcare programs & implementations

## 31,500 employees

**Medicaid** (23 states) **Exchanges** (13 States)

Correctional (12 States) (8 States)

#66 on the Fortune 500 list



on the Fortune Global list



expected revenue for 2017



2 international markets

Medicare

## 12.2 million members

**Product / Market** Solutions

Centene's Purpose



# Transforming the health of the community one person at a time

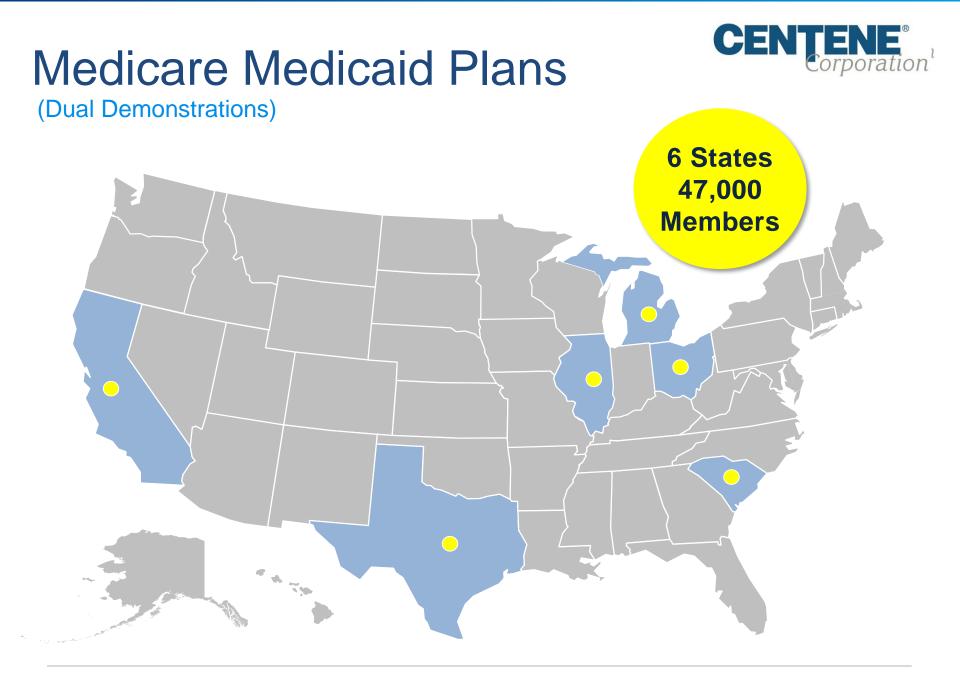
#### **OUR MISSION**

Better health	outcomes a	at lower costs
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OUR BRAND PILLARS

Focus on individuals	+	Active Local Involvement		+	Whole Health
		OUR BELIEFS			
. Ma baliava in tracting the whole		Ma haliaya wa haya a		No bolio	

- We believe in treating the whole person, not just the physical body.
- We believe treating people with kindness, respect and dignity empowers healthy decisions.
- We believe we have a responsibility to remove barriers and make it simple to get well, stay well and be well.
- We believe local partnerships enables meaningful, accessible healthcare.
- We believe healthier individuals create more vibrant families and communities.





#### **Buckeye Health Plan**

- Buckeye Health Plan (Buckeye) is a state-licensed managed care organization
- Began serving Ohio Medicaid Members in January 2004
- Currently serving 300,000+ members statewide:
  - Medicaid (ODM)
  - MyCare Ohio Duals Demonstration (ODM/CMS)
  - Medicare Advantage SNP (CMS)
  - Health Insurance Marketplace/Exchange (ODI/CMS)





#### What is Palliative Care?

- Palliative care, or palliation, is specialized medical care for people living with serious illness
- Appropriate for people of any age, at any stage of a disease, and can include patients receiving curative treatment
- Goal: improve quality of life
- Focus on relief from symptoms and stress

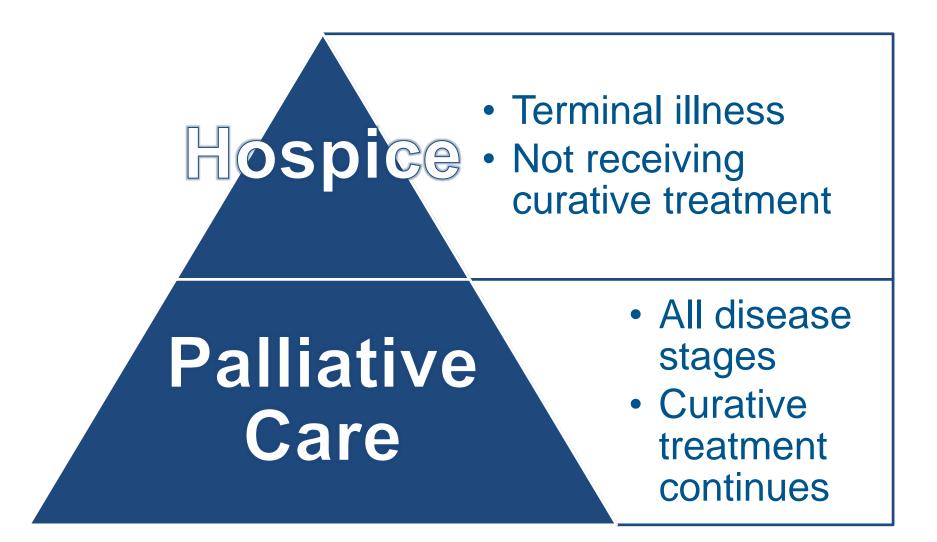


#### Symptom Relief Includes

- Side effects of current treatments
- Pain or discomfort
- Shortness of Breath
- Nausea
- Anxiety
- Depression
- Loss of Appetite
- Constipation



#### **Palliative Care and Hospice**



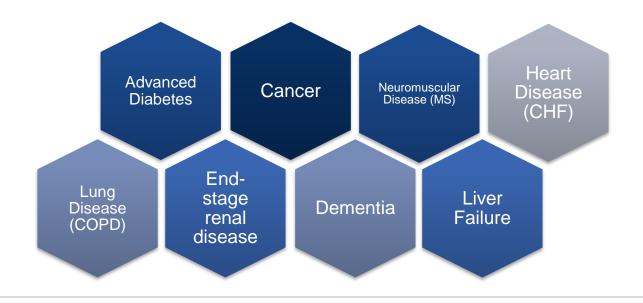


#### Who Benefits from Palliative Care

- Palliative care focuses on the member
- It also supports others providing care to the member including caregivers and personal care attendants

Members with the following conditions are typically good

candidates for participation:





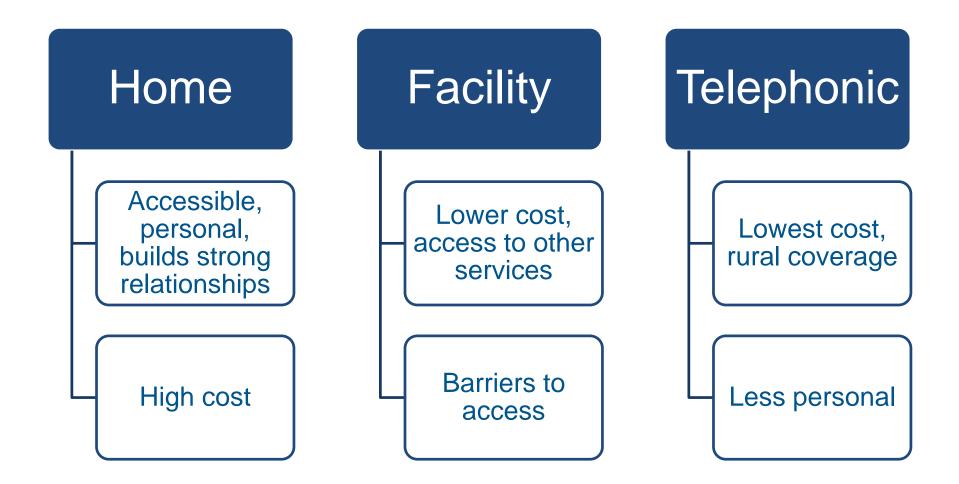
#### **MMP and ABD-Focused Initiative**

We focused on members with the greatest need for these services:

- Serious Illness: 72% of dually eligible beneficiaries have 3 or more chronic conditions (37% have 5+)
- High Utilization: dually eligible beneficiaries use more medical services than other people on Medicare:
  - 21% had 1+ ER Visit / year (vs. 13% non-dual)
  - 26% had 1+ IP Hospitalization / year (vs. 16% non-dual)

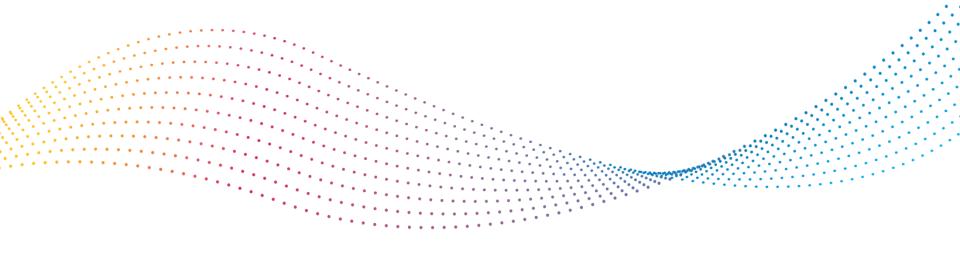


## Picking the Right Setting for Care

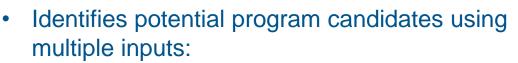




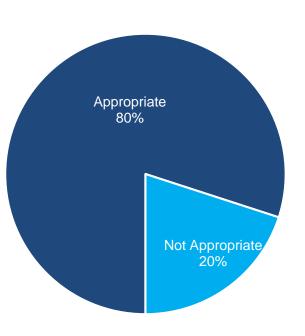
#### Program Design



## **Member Identification Algorithm**



- Claims
- Care management assessments
- Mortality predictive analytics
- Highly accurate
- Enables care managers to better identify and contact potential recipients of palliation
- Runs bi-weekly



Members Identified by

Algorithm:

CEN



#### Assessments

- Conducted during 1<sup>st</sup> and 6<sup>th</sup> visit
- Creates a baseline for the palliative care provider
- Measures program impact on a number of elements including:
  - Care goal discussions (PCP, caregiver)
  - Achieving care goals
  - Advanced care planning

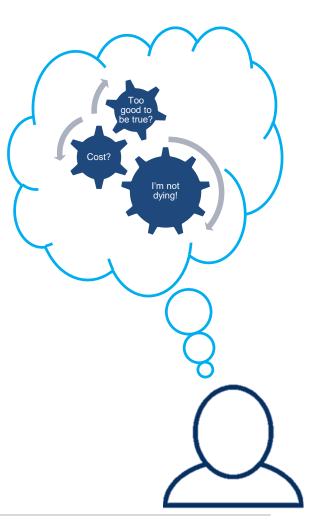


#### **Program Branding**

Our program is called *Compassionate Connections*® both internally and externally

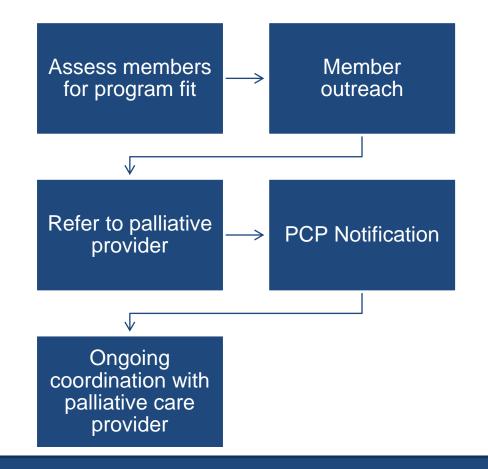
Why brand the program?

- De-emphasizes palliative care, which many members associate with hospice
- Lends credibility to program (many members feel it is too good to be true)
- Streamlines the handoff between the care managers and palliative care provider





## **Care Manager Training and Responsibilities**



-- Continue to Serve as Member's Care Manager --



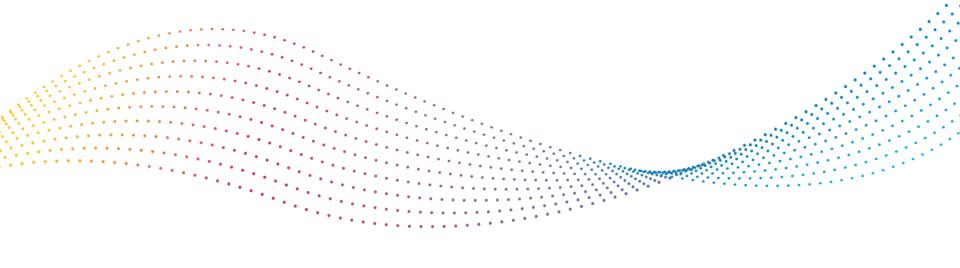
#### **Palliative Care Provider**

- Assist with care manager training
- Work within Centene care management system:
  - Process referrals
  - Review care plan
  - Submit assessments
  - Document visit notes
- Frequent coordination with care managers
- Participate on ICT





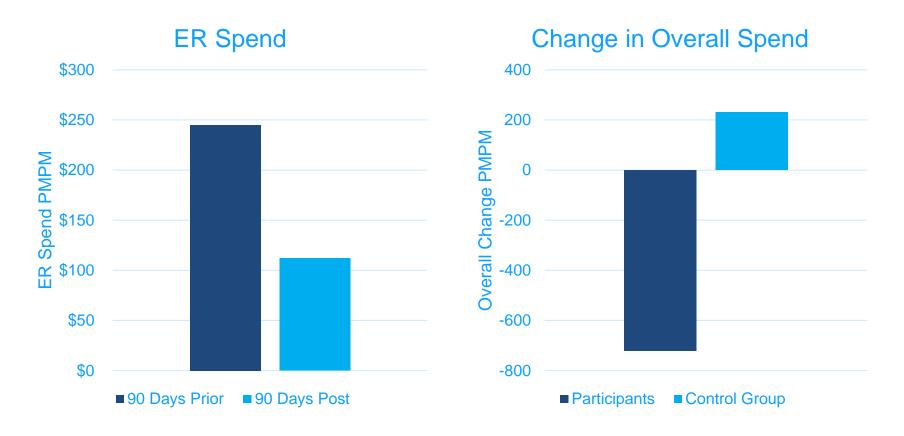
#### Program Results





#### Impact on Utilization

We are observing meaningful results when comparing the three months prior to palliation with the three months after palliation begins:





#### Member Experience

	Initial Visit	After 6 Visits
Have you completed advanced directives?	30%	70%
Have you discussed care goals with your physician and/or caregiver?	40%	100%
Did the program help you identify and work towards your care goals?	-	89%
Would you recommend Compassionate Connections to others?	-	90%

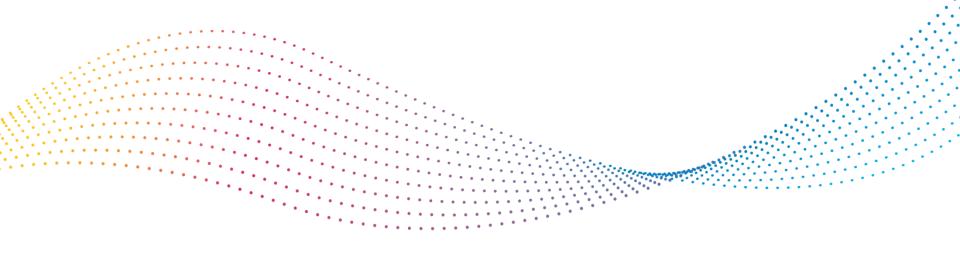




#### 2017 Pinnacle Award Recipient



#### Continuing Improvement – Next Steps





### **Continuing Improvement**

- Streamline member identification
- Increase appropriate referrals into program
- Build on early success of phone-based interactions



#### **Next Steps**

- Continue to monitor and grow the program
  - In OH
  - Evaluating new markets
- Use program findings to build a shared savings model with providers



# Questions?

