

Provide Quality Palliative Care & Reduce Costs

March 25, 2015



THE DENVER HOSPICE

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HEALTH SERVICES

Institute of Medicine (IOM) Recommendations 2014

1. Delivery of Care

Government health insurers and care delivery programs, as well as private health insurers, should **cover the provision of comprehensive care for individuals with advanced serious illness who are nearing the end of life.**

2. Clinician–Patient Communication and Advance Care Planning

Develop standards for clinician–patient communication and advance care planning that are measurable, actionable, and evidence based.

3. Professional Education and Development

Establish appropriate training, certification, and/or licensure requirements to **strengthen the palliative care knowledge and skills of all clinicians** who care for individuals who are nearing the end of life.

4. Policies and Payment Systems

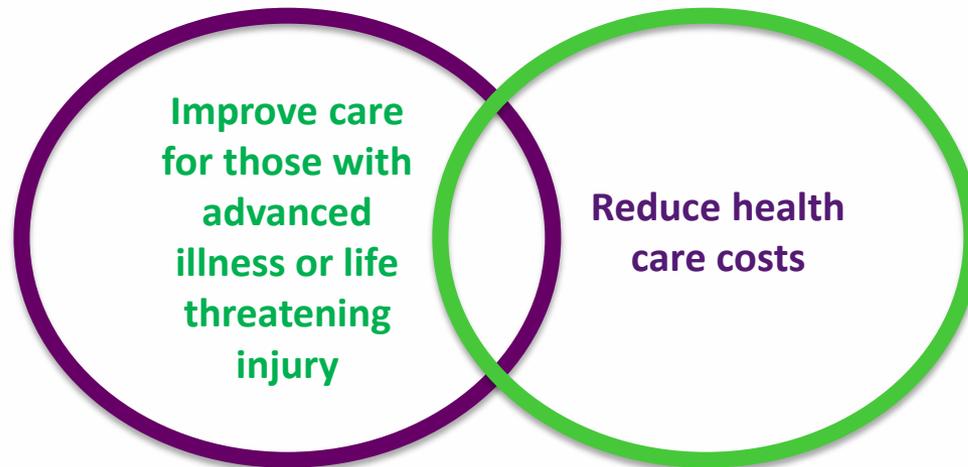
Federal, state, and private insurance and health care delivery programs should **integrate the financing of medical and social services to support the provision of quality care** consistent with the values, goals, and informed preferences of people nearing the end of life.

5. Public Education and Engagement

Civic leaders, public health and other governmental agencies, community-based organizations, faith-based organizations, consumer groups, health care delivery organizations, payers, employers, and professional societies should **engage constituents and provide fact-based information to encourage advance care planning and informed choice.**

Person Centered Care

- Active patient engagement to achieve the best possible health
- Extend palliative care to insurance members and include a wider range of advanced illness and palliative care services
- Eliminate gaps in care
- Improve concordance of care with patient wishes
- Tightly coordinate care delivery with the primary physician and other care providers

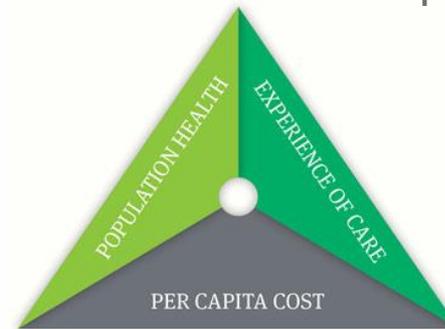


Innovative Care Partnership

Working beside partners in the community:

- Contract with health plans, health systems and capitated physician groups to better manage high risk members/patients and lower costs
- Better manage stages of serious and advanced illness or life threatening injury to reduce readmissions
- Integrate palliative care into 'usual care' to decrease related costs throughout the care trajectory
- Improve patient's/caregiver's care experience and support from the health care community
- Better partner with medical homes and treatment teams to provide palliative care

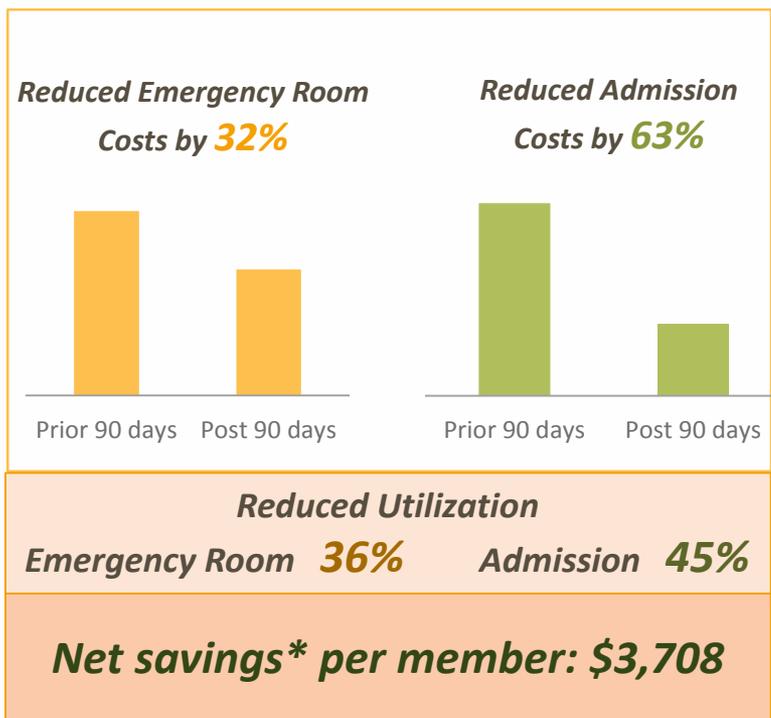
Triple AIM
Better Health, Better Care, Lower Costs



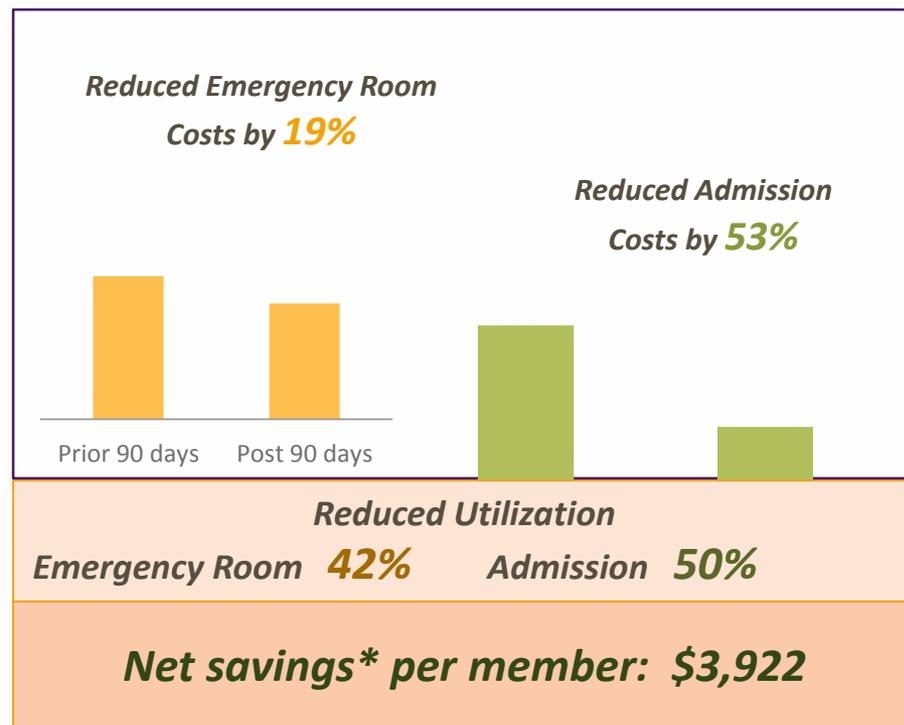
Source: IHI Triple Aim

Proven Results when Partnering in Care Delivery

Health Plan Designed for Medicare/Medicaid Coverage



Primary Care Practice/Medical Management



* Net savings after program cost

Opportunities

- **Continue to improve quality, provide better patient experience and lower costs**
 - Demonstrate financial success with innovative services
 - Align with other providers: home health companies, physicians, hospitals, facilities, payers and self-insured employers to accomplish affordable care
 - Empower consumers to participate in health care selection
 - Balance care delivery - boots on the ground and telephonic care
- **Engage in the “Accountable Care Collaborative”**
 - Educate the health care community and public about advanced illness management and palliative care
 - Treat defined populations who have high utilization, are high risk, and have complex care needs
 - Share financial risk to achieve defined objectives
- **Expand and diversify service lines to assure patients and members get the right care at the right place and time.**

The Denver Hospice and Optio Health Services

The Denver Hospice and Optio Health Services is the largest, oldest, and most trusted end of life care provider in the region.



- **Over 36 years of experience in end-of-life care** – Recognized by the American Hospital Association as a national leader in palliative & hospice care.
- **Largest geographic footprint for community-based hospice and Palliative care** – 9-county region along the Front Range
- First hospice to provide community-based palliative care and today **recognized as one of the leading palliative care programs in the nation.**
- **Partnerships with local health plans and physician groups** to augment their telephonic case management services with care management in members' homes.