C-TAC works to ensure that all Americans living with advanced illness receive comprehensive, high-quality, person- and family-centered care that is consistent with their goals and values and honors their dignity. A key component of this work is developing and advocating for federal legislation to improve the lives of those with advanced illness and their families.

In June 2017, C-TAC launched a national Campaign to accelerate the movement to deliver high-quality, person-centered care to all Americans living with advanced illness and their families. A central function of the Campaign is to pursue a comprehensive public policy agenda focused on delivery system reform, preference driven care, caregiver and consumer support, and professional engagement.

**Policy Priorities**

C-TAC’s agenda addresses the barriers to better advanced illness care, such as:

- Promoting person-centered care coordination in advanced illness
- Supporting payment structures for innovative models
- Establishing best practice based care
- Identifying comprehensive quality measures
- Ensuring impact and accessibility of advance directives
- Increasing availability of resources for family caregivers
- Expanding the advanced care workforce

**C-TAC Supported Federal Legislation**

The Patient Choice and Quality Care Act of 2017 (S.1334/H.R.2797) was developed in consultation with C-TAC’s policy team and includes several provisions that will make important improvements to advanced illness care for all Americans:

- Establishes a new Medicare model for Advanced Illness Care and Management.
- Allows eligible individuals to voluntarily engage in team-based advance care planning (ACP) to align their goals, values, and preferences with their care.
- Facilitates increased coordination and alignment between public and private sector quality measures
- Ensures patients and providers have needed support tools and that advance directives follow patient across clinical settings and states.
- Improves Medicare’s existing coverage for advance care planning services by allowing appropriately trained or experienced clinical social workers to provide ACP services, ensuring copay costs do not create barriers for patients.
- Requires healthcare facilities to ensure that individual’s care plans are appropriately documented and shared with other providers and facilities upon discharge.
- Funds $50 million in grants to increase public awareness of ACP and advanced illness care.

In the current Congress, C-TAC is working to recruit more co-sponsors to the Patient Choice and Quality Care Act, move the bill through both houses, and ultimately have it signed by the President for implementation.
The Compassionate Care Act of 2017 establishes a national public education campaign on advance care planning and the rights of individuals to actively participate in care decisions. This campaign would develop a range of resources for individuals with advanced illness and their families, as well as healthcare providers.

The bill also instructs the Department of Health and Human Services (HHS) to create a pilot grant program for end of life training in certain medical and health education schools. Additionally, the Health Resources and Services Administration must develop new curricula on advance care planning and end of life care for continuing education that states may adopt for qualified health care providers.

In the current Congress, C-TAC is working with bipartisan authors in order to revise and re-introduce the legislation.

The Removing Barriers to Person-Centered Care Act of 2017 amends title XI (General Provisions) of the Social Security Act to establish an alternative payment model for patient centered care with respect to Medicare beneficiaries with advanced illnesses.

Through the voluntary pilot program, CMS will enter into demonstration project agreements with “advance care collaboratives” to provide Medicare services in a manner that promotes accountability, coordinates services, and encourages investment in infrastructure and redesigned care processes. An “advance care collaborative” is an affiliated group of providers, physicians, or practitioners.

In the current Congress, C-TAC is working with bipartisan authors in order to revise and re-introduce the legislation.

Additional Legislative Priorities

- Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act (S.870)
- Independence at Home Act of 2017 (S. 464)
- Medicare Choices Empowerment and Protection Act of 2017 (H.R. 3181)
- Medicare Patient Access to Hospice Act of 2017 (H.R. 1284)
- Palliative Care and Hospice Education and Training (PCHETA) Act (H.R. 1676)
- Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act (H.R. 3759)
- Rural Access to Hospice Act (S. 980)

Legislative Taskforce

C-TAC’s policy team works closely with members of Congress to develop recommendations on legislation to improve care for those with advanced illness. For more information on C-TAC’s policy and advocacy activities, or to join C-TAC’s Legislative Taskforce, please contact Andrew MacPherson at AMacPherson@theCTAC.org.