



C-TAC Policy Recommendations for COVID-19 Public Health Emergency

Individuals and their families living with advanced illness are feeling particularly vulnerable given the COVID-19 public health emergency. No one knows who will get sick and how sick they will become. Because of this, advance care planning (ACP) has never been more important. By proactively planning for a medical crisis, individuals can feel relieved that their families and medical teams will be able to create a care plan that aligns with what matters most to them.

Now that more and more patients are becoming seriously ill with coronavirus, palliative care teams are in higher demand than ever, providing symptom management and more. Palliative care specialists' expertise in symptom management and skilled communication is essential to the care of people with COVID-19, including the majority of patients who will survive the disease. Therefore, ensuring palliative care is both an eligible primary care service and that we are prioritizing workforce in this specialty will be vital to the well-being of seriously ill patients and their families.

To increase access to ACP and palliative care services, C-TAC is advocating for the following **priorities moving forward for the next Coronavirus Pandemic Response Bill or other vehicles:**

- Enhance Coverage of Advance Care Planning Services
 - **Waive patient cost-sharing and deductibility of Medicare Advance Care Planning services (CPT codes 99497 & 99498) (PCQCA Section 5)**
 - **Include clinical social workers to the definition of eligible practitioners who can bill for Advance Care Planning (PCQCA Section 5)**
 - **Require the HHS Secretary to develop standards for including completed advance care planning documents within a patient's electronic health record.**
 - **Encourage physicians, nurse practitioners and physician assistants to create portable medical orders (e.g., POLST paradigm orders and pre-hospital DN(A)R orders) for the appropriate patient population to avoid subjecting them to unwanted and invasive medical interventions.**

- Improve Policies Related to the Use and Portability of Advance Care Planning Documentation and Portable Medical Orders
 - **Ensure that Advance care planning documents and portable treatment orders executed validly in one state are honored in other states (i.e. that there is reciprocity across states for eligible advance care planning documentation and portable treatment orders) (PCQCA Section 7)**

- Promote the Expansion of Palliative Care Workforce

- **Include palliative care medicine as an eligible primary care service through the National Health Service Corp, which offers scholarships and loan repayment to primary care providers in eligible disciplines (PCHETA)**
- Develop ACP Educational Materials for the Public
 - **Appropriate at least \$50 million and authorize the Secretary of HHS to award grants to qualified organizations to develop educational materials and resources for the general public and the healthcare provider community that address advance care planning, the range of services designed for individuals facing serious illness, and training and professional development for clinicians who care for people with advanced serious illness.**
- Support a Robust and Well-Trained Serious Illness Care Workforce
 - **Authorize Nurse Practitioners (NPs) to provide the initial certification of patients for hospice care, in addition to their current ability to recertify patients and serve as attending providers, and their newly-granted ability to certify home health services**
- Expand Access to Home-Based Primary Care
 - **Amend title XVIII of the Social Security Act to provide for an extension of the Independence at Home (IAH) demonstration program (1866E of the Medicare Act) for at least an additional three years. The IAH demonstration program is one of the most successful Center for Medicare and Medicaid Innovation (CMMI) demonstrations to date, and utilizes a home-based primary care (HBPC) model to serve complex, frail elders in their homes (*Independence at Home Demonstration Act of 2019 - H.R. 3644*)**
- Support Family Caregivers
 - **Provide working family caregivers with a tax credit up to \$3,000 to assist with out-of-pocket expenses related to caregiving (*Credit for Caring Act - H.R. 2730/S. 1443*)**