



# Community-Based Palliative Care

## Program Overview

The Community-Based Palliative Care (CBPC) program delivers interdisciplinary, community-based services to improve quality of life, manage symptoms, and help members and caregivers navigate care, alongside ongoing curative treatments. Services are delivered in any non-inpatient setting and are organized around a standardized member journey:

- Referral/Screen
- Assessment & Authorization
- Care Planning & Maintenance
- Reassessment (at least every six months)
- Discharge

Covered services include:

- Comprehensive care planning and coordination
- Advance care planning discussions
- Symptom assessment and management
- Medication review: adjustments, titration, and prescribing/deprescribing
- Home-based or clinic-based visits by licensed IDT practitioners
- Psychosocial counseling and caregiver support
- Spiritual and emotional care
- Referral coordination to Medicaid-covered services
- Access to a 24/7 telephone line

CBPC services are delivered by an interdisciplinary team (IDT) which must include these practitioners:

- Medical Director
- Lead IDT Clinician (MD, DO, PA, or NP)
- Registered Nurse (RN)
- Licensed Mental Health Practitioner (Licensed Clinical Social Worker, Licensed Marriage and Family Therapist, or Licensed Professional Counselor)
- Chaplain
- Child Life Specialist (required only for pediatric members)

The following optional practitioners may also be part of the IDT:

- Nurse Practitioner (non-rendering)
- Physician Assistant (non-rendering)
- Pharmacist
- Licensed Practical Nurse

- Home Health Aide
- Certified Nursing Aide
- Community Health Worker

Members qualify based on serious illness and evidence of reduced quality of life. Examples of qualifying serious illnesses and quality-of-life changes are included below. Health plans may also approve CBPC based on an individual determination of medical necessity.

1. Diagnosis with serious illness:

Eligible conditions include (but are not limited to):

**Adult:**

- Cancer (Stage III or IV)
- Congestive Heart Failure
- COPD
- ESRD or chronic kidney disease
- Cirrhosis or liver disease
- Degenerative neural condition (i.e., Parkinson's, severe neurodegenerative disorders)
- Alzheimer's and dementias
- Diabetes
- Stroke
- AIDS

**Pediatric:**

- Cardiac Disease
- Pulmonary Disease
- Neurological Disorder
- Cancer
- Renal Disease
- End-stage Liver Disease
- Genetic Disorders
- Metabolic/Inclusion Disease
- Gastrointestinal Disease or Conditions
- Orthopedic Disorders
- Neonatal
- Infectious Disease

2. Quality of life impairment, as indicated by one of the following:

- a. Documented functional decline (KPS  $\leq$  70, ECOG grade 3 or higher, PPS  $\leq$  70, MELD  $>$  19, FAST= $>$  5, MLTSS enrollment)
- b. Acute care utilization of either two or more emergency department visits in the past six months or at least one acute hospitalization in the past 12 months
- c. Other functional decline or indication of disease severity not captured above as determined by clinical judgement of MCOs and practitioners

For detailed information on the CBPC program, please see the NJ FamilyCare Provider Guidance: [nj.gov/humanservices/dmahs/info/NJ\\_CBPC\\_Program\\_Guidance.pdf](http://nj.gov/humanservices/dmahs/info/NJ_CBPC_Program_Guidance.pdf)

### **Service Coordination**

When a member joins CBPC, Aetna Better Health of New Jersey will assign a Care Manager (if they don't already have one). The Care Manager works with their palliative care team to coordinate Medicaid-covered services that support their palliative care plan. Each month, the palliative care team will have at least one interaction with the member to review needs and update the care plan as needed. It will also have at least one internal meeting that includes the Aetna Better Health of New Jersey Care Manager each month.

### **Prior Authorization**

Prior authorization is required for PMPM. Please review Chapter 14 for more information on prior authorizations. You can request prior authorization in one of the following ways:

- Portal: <http://www.availity.com/providers>
- Phone: 1-855-232-3596
- Fax: 1-844-797-7601

### **Credentialing**

- Providers who are interested in joining ABH NJ Network for Community Based Palliative Care should reach out the ABH NJ Network Team at [NJMedicaidNetworkContracting@AETNA.com](mailto:NJMedicaidNetworkContracting@AETNA.com)
- In your email, please include a letter of intent with the information outlined below.
  - Group Name
  - Group NPI
  - Group TIN
  - Service address (including county)
  - Provider Name(s)
  - Individual NPI
  - Specialty
- The Contract Manager that handles the County in which you are located will contact you with the documents required to initiate the contracting/credentialing process.

Below are the forms and background requirements for CBPC Providers

- Already contracted with Aetna Better Health New Jersey
  - CBPC Credentialing add-on
  - Criminal Background Check Attestation
  - Disclosure Ownership Form
  - Form W-9
  - Special Needs Survey
- New provider/group
  - CBPC Credentialing add-on

- Criminal Background Check Attestation
- Disclosure Ownership Form
- Form W-9
- Special Needs Survey
- NJ Provider Application

You can access this information by visiting our website:

[aetnabetterhealth.com/newjersey/providers/materials-forms.html](https://aetnabetterhealth.com/newjersey/providers/materials-forms.html) > Materials > Community Based Palliative Care

### **Provider Portal**

To access the provider portal, please visit the [Availity website](#).

### **Submit/dispute a claim**

Please review Chapter 20 of the manual for information on how to submit and dispute a claim.

## **Relevant Contact Information / Phone Numbers**

*Provider can seek help on commonly asked questions, like below, by calling Provider Services at **1-855-232-3596**:*

- *General questions*
- *Credentialing and contracting*
- *Service authorization*
- *Billing/claims submissions, status, and disputes*
- *Grievances or appeals*
- *CBPC Program/Network Lead and CBPC Care Management contacts*
- *Provider Relations Department or equivalent*
- *Web link to Provider Quick Reference Guide*
- *Any other contact information as deemed relevant and necessary*

# Community-Based Palliative Care benefits grid

Service/Benefit	Members in DDD, MLTSS, or FIDE SNP	NJ FamilyCare Plan A/ABP	NJ FamilyCare Plan B	NJ FamilyCare Plan C	NJ FamilyCare Plan D
Community-Based Palliative Care	<p><b>Covered by ABHNJ (All Plans)</b>  Covers services included as part of the Community-Based Palliative Care benefit</p>				