



# Community Based Palliative Care Program

## Overview of Services

The Community-Based Palliative Care (CBPC) program supports members with serious health conditions. It focuses on easing symptoms, coordinating care, and helping you and your family navigate the health system, while you keep getting your regular treatments.

Care is provided at home or in other community places (not in a hospital) by an interdisciplinary care team who creates a care plan based on your needs and goals.

Depending on your individual needs, services may include:

- Help managing symptoms
- Home visits from nurses, social workers, or other licensed providers
- Help with planning for future care needs
- Coordinating and connecting you to other services
- Emotional, social, and spiritual support for you and your caregivers
- Reviewing and adjusting medications
- Guidance and support for caregivers
- Access to a 24/7 telephone line for urgent questions or concerns

**Please note:** Palliative care and hospice care are different, and you **do not** need to have a terminal diagnosis to get palliative care. Palliative care can help anyone with a serious illness who is having a hard time with daily activities or managing their health. You can still get other medical treatments and keep seeing your regular doctor while receiving palliative care.

## Member eligibility criteria

To be considered eligible for CBPC, you must have a serious illness that has impacted your daily life. Examples of qualifying serious illnesses and changes in daily life are listed below. Your health plan may also approve CBPC if it decides the service is medically necessary for you.

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 decline in ability to do daily activities
  - b. Recent acute care use: two or more emergency room visits in the last six months, or at least one hospital stay in the last 12 months
  - c. Other signs of functional decline or serious disease not listed above

To learn more about the program and whether you qualify, please reach out to Member Services at: **1-855-232-3596** (TTY: **711**), 24 hours a day, 7 days a week

## Accessing Services

There are several ways to get CBPC services:

- 1) You (or someone helping you, like your provider, family member, or a community group) can use the Program Eligibility Screening Tool (you can access the screening tool by visiting [aet.na/3OL25SE](http://aet.na/3OL25SE)), then contact Member Services at: **1-855-232-3596** (TTY: **711**) for next steps; if the screen shows you may qualify, Aetna Better Health of New Jersey can help you find an in-network provider for an assessment
- 2) Your healthcare provider or your health plan can also refer you directly for an assessment

In either case, eligibility is confirmed with a Comprehensive Medical Assessment using the state's standard tool. This is done in-person by a qualified, Medicaid-enrolled clinician. Prior authorization is not needed for the assessment. If you are eligible, Aetna Better Health of New Jersey will approve services and start care planning with your palliative care team.

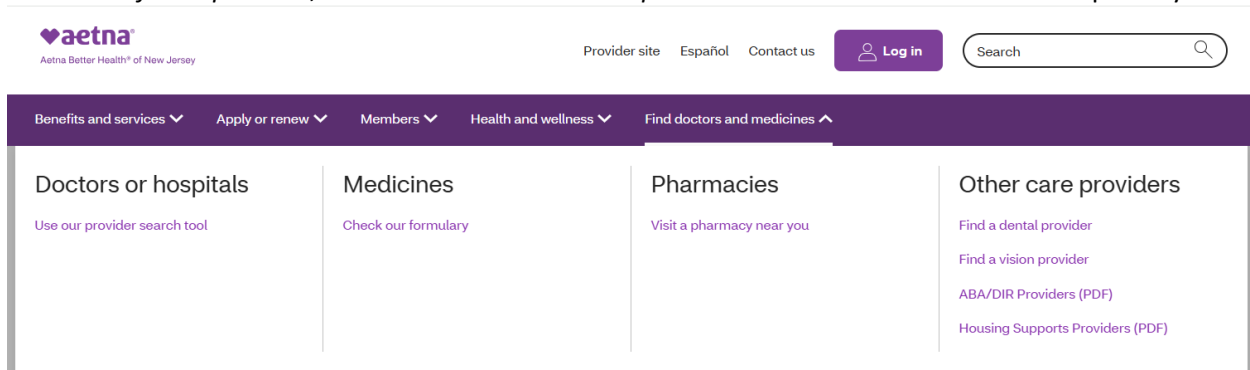
To stay in the CBPC program, you will be reassessed every six months, or sooner if your health changes a lot. If you still qualify, your approval will be extended for another six months.

## Service Coordination

If you join CBPC, Aetna Better Health of New Jersey will assign a Care Manager (if you don't already have one). The Care Manager works with your palliative care team to coordinate Medicaid-covered services that support your palliative care plan – for example, Personal Care Assistance, home health, or needed equipment. Your palliative care team will meet at least once a month to review your needs and update the care plan, and at least one of these monthly meetings will include your Aetna Better Health of New Jersey Care Manager.

## Finding a Provider

- Members may search for in-network Palliative Care providers here: [aetnabetterhealth.com/newjersey/find-provider](https://aetnabetterhealth.com/newjersey/find-provider)
- To find a provider, members can enter their zip code and select the **Palliative Care** specialty



The screenshot shows the Aetna Better Health of New Jersey website. At the top, there is a navigation bar with the Aetna logo, the text 'Aetna Better Health® of New Jersey', and links for 'Provider site', 'Español', 'Contact us', and a 'Log in' button. A search bar is also present. Below the navigation bar, there is a purple header with the text 'Benefits and services', 'Apply or renew', 'Members', 'Health and wellness', and 'Find doctors and medicines'. The 'Find doctors and medicines' section is expanded, showing four categories: 'Doctors or hospitals' (with a link 'Use our provider search tool'), 'Medicines' (with a link 'Check our formulary'), 'Pharmacies' (with a link 'Visit a pharmacy near you'), and 'Other care providers' (with links for 'Find a dental provider', 'Find a vision provider', 'ABA/DIR Providers (PDF)', and 'Housing Supports Providers (PDF)').

- After Aetna Better Health of New Jersey approves you to start this benefit, you will get a list of three (3) in-network CBPC providers if you don't already have an in-network provider in mind. You can take some time to look at the provided list and choose the provider you want. If you do not choose a provider within 5 business days, your care manager will help pick one for you. They will choose the provider that is the best fit, so you can start your care without delay.
- Members can also call Member Services 24 hours a day, 7 days a week at **1-855-232-3596 (TTY: 711)** to find in-network providers or to submit a request to add an out-of-network provider.

## Relevant Contact Information / Phone Numbers

Members can seek help on commonly asked questions below by calling Member Services at **1-855-232-3596 (TTY: 711)**.

### General questions

- Find a provider and/or check if a provider is in-network
- Service authorization, including tool submission methods (e.g., portal link, phone number, fax)
- Claims submissions, status, and disputes
- Grievances or appeals
- CBPC Program/Network Lead and CBPC Care Management contacts
- Any other contact information as deemed relevant and necessary

# Community-Based Palliative Care benefits grid

| Service/Benefit                 | Members in DDD, MLTSS   | 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><br/> Covers services included as part of the Community-Based Palliative Care benefit</p> |                          |                      |                      |                      |