

Palliative Care and Quality of Life Interdisciplinary Advisory Council

Elizabeth Keene, Co-Chair

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convened by:



LD 782: An Act to Improve the Quality of Life of Persons with Serious Illness (2015)

- Established the Palliative Care and Quality of Life Interdisciplinary Advisory Council to assess status of palliative care and make recommendations to improve quality and delivery of patient-centered and family-focused care to patients with serious illness
- 13 appointed members, convened by the Maine Hospice Council with Executive Director serving as nonvoting member
- Palliative Care: Medical specialty to improve the quality of life of those with serious medical illness; cornerstones are excellent pain and symptom management, skilled communication regarding goals of care, and psychosocial and spiritual supports to manage all aspects of suffering related to serious and life-limiting illness, all life-limiting illnesses, at any stage, all ages, all sites
- Palliative Care is not Hospice! But hospice is palliative care when time is short

5 years in....

- Information gathering:
 - Needs and deficiencies identified in elderly, rural, pediatric, mental health and homeless, cancer and dementia populations, native American, immigrant, LGBTQ
 - inadequate payer engagement in both understanding and appropriate reimbursement
- Data Collection:
 - MeHAF funded survey of palliative care programs in all hospitals, home care agencies and hospice programs
 - 27% hospitals with formal palliative care programs, mostly larger urbanized settings
 - Few home-based programs identified
 - Non-standardized, reimbursed only under Part B, physician billing
- Strategic planning: identified four priorities
 - Education for health care professionals and the public
 - Rural access for palliative care services
 - Pediatric palliative care
 - Provider-payer pilot

5 years in....

- Educational Initiatives
 - Project ECHO®: Extension for Community Healthcare Outcomes through University of New Mexico
 - Technology-based Platform (Zoom) to educate providers in skills and knowledge of palliative care, and development of a “learning community”
 - Collaboration between Advisory Council and MaineHealth
 - Monthly didactic and case discussions, attendance 30-40, broad interdisciplinary participation
 - Initial plans for a statewide palliative care conference (on hold due to COVID-19)
- MeHAF Systems Improvement and Innovation Responsive Grant: LOI accepted in 2020: Creating Access for Rural Maine Communities
- Advocacy
 - State and federal legislation

LD1950: An Act to Advance Palliative Care Utilization in the State (2020)

- Health and Human Services Committee voted Ought Not to Pass but requested that the Palliative Care and Quality of Life Advisory Council make recommendations on payment models
- Report was submitted in December 2020 and offered these recommendations:
 - Endorse and adopt a definition of palliative care that recognizes the valuable contributions of the interdisciplinary team
 - Endorse and adopt broad educational initiatives for consumers and patients
 - Endorse and adopt educational initiatives to expand the workforce
 - Explore options in funding high-quality, patient-centered palliative care to all MaineCare patients
 - Integrate palliative care into other value-based initiatives and care structures
 - Consider organizing a 3 year pilot for community-based palliative care
 - Fund and support the work of the Palliative Care and Quality of Life Advisory Council