



The Hospice and Palliative Care Association of Iowa (HPCAI) is the voluntary membership organization representing palliative care and hospice programs across the state. Hospice is considered the model for quality, compassionate care for people facing a life-limiting illness or injury. Palliative care is specialized medical care for people with serious illnesses. Both models are focused on providing patients with relief from the symptoms, pain and stress of a serious illness.

Palliative care and hospice involve a team-oriented approach to medical care, pain management and emotional and spiritual support tailored to the patient's needs and wishes. This team includes doctors, nurses, home health aides, social workers, chaplains and volunteers. Hospice care is typically provided in the individual's home, wherever that may be. Palliative care may be provided in outpatient or home settings, and both hospice and palliative care can be provided in hospitals, nursing homes, assisted living and other facilities.

HPCAI strives to serve as the statewide leader in the enhancement of end-of-life care through representation of and service to palliative care programs and hospices. HPCAI maintains that all Iowans should have access to quality hospice and palliative care consistent with their individual desires and values.

State Definition of Palliative Care

The current definition in Iowa law was put in place in 1984 and is in need of updates. Palliative care is currently specified only for patients receiving hospice care and inaccurately states that palliative care is not offered along with treatment directed towards a cure of a terminal illness.

It is important that the definition of palliative care depicts hospice care as a component of palliative care rather than palliative care as a component of hospice care. Many individuals benefit from palliative care without entering hospice care. It is also important to clarify that palliative care is appropriate at any stage in a serious illness and can be provided alongside curative treatments. Using a more inclusive definition of palliative care similar to the Center to Advance Palliative Care definition below, will enable the expansion of public education and awareness of this important specialty.

Palliative care is specialized medical care for people living with a serious illness. This type of care is focused on providing relief from the symptoms and stress of the illness. The goal is to improve quality of life for both the patient and the family. Palliative care is provided by a specially-trained team of providers, nurses and other specialists who work together with a patient's other care givers to provide an extra layer of support. Palliative care is based on the needs of the patient, not on the patient's prognosis. It is appropriate at any age and at any stage in a serious illness, and it can be provided along with curative treatment.

The General Assembly should adopt an updated definition of palliative care to better reflect the scope of care and to include individuals who are not yet receiving hospice care.



Hospice Services Provided Under the Medicaid Program

Hospice providers from across the state continue to struggle with the administrative complexities resulting from the implementation of Medicaid managed care in Iowa. These complexities include continued inconsistent and frequently inaccurate payment on Medicaid claims, numerous changes to MCO reimbursement guidelines and inconsistent policies and practices for prior authorizations.

In past years, HPCAI has advocated for changes to the process of how room and board claims are paid. Currently, if a hospice patient lives in a nursing facility, the hospice agency will bill the MCO for the room and board expenses, and once the MCO pays the claim the hospice passes it through to the nursing facility. HPCAI has pushed to change the process by allowing the MCO to pay the nursing facility directly for room and board expenses rather than going through the hospice agency. HPCAI will provide additional examples of administrative complexities that burden hospice providers and continue to work on this issue administratively.

During the 2021 legislative session, the Legislature considered legislation that could strengthen Iowa's Medicaid program while also creating a more efficient system. Examples of bills that did not pass last year that would help providers and patients better navigate Medicaid issues include:

- **HF 736** would have reduced administrative complexity by limiting the amount of time for which a managed-care organization could recoup overpayments. Currently, these organizations have five years to recoup overpayments.
- **HSB 169 and SSB 1164** would create consistency in the credentialing process and reduce administrative complexity for claims payments.

The General Assembly should take action to ensure the MCOs pay on claims in a timely and consistent manner, update Medicaid rates and ease administrative burdens for providers.



Support for Telehealth Services

HPCAI was very pleased, last legislative session, that the General Assembly passed a bill that ensured telehealth reimbursement for behavioral health in the same way and at the same rate as if the service was provided in person. It is now up to the Legislature to continue this work and support payment parity across all services provided through telehealth. Payment parity laws increase access to care for patients no matter where they are located and help alleviate workforce shortages.

Since March 2020, hospice and palliative care providers have also seen how beneficial other state and federally granted telehealth flexibilities have been, particularly with palliative care services. This includes providers being able to provide services through audio-only means when an audio-visual option is not

The General Assembly should pass policies that support the use of telehealth services. This includes passing payment parity for all health care services provided through telehealth, regardless of where the patient is located, and allowing for visits to be performed through audio-only means when audio-visual is not possible.