

Leveraging Payment Reforms to Transform and Expand Home-Based Care for People with Complex Health Needs

February 17th, 2022

This project is supported by the following organizations:



The
John A. Hartford
Foundation



The
COMMONWEALTH
FUND

Agenda

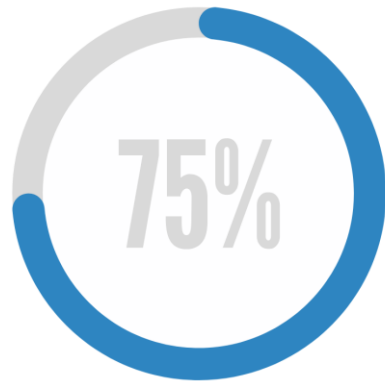
1. Why is home-based care important?
2. What are the challenges facing the current payment model?
3. What are the short-term, practical policy opportunities to scale and expand access to home-based care?

Landscape of Home-Based Care, Associated Payment Models, and Implementation Challenges

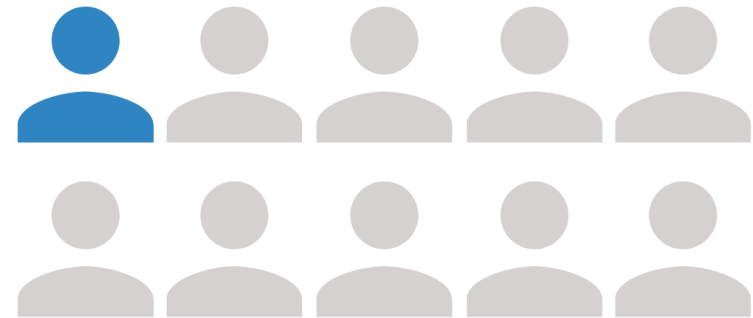
What is Home-Based Care, and Why is it Important?

- There remains an unmet need for home-based care, particularly for medically complex and homebound populations
- Home-based care includes care that addresses medical and social needs
- Mostly delivered by small independent practices reimbursed under fee-for-service (FFS) model

The homebound population accounts for 75% of home-based care



Only 1 in 10 homebound patients receives home-based medical care



Diversity of Home-Based Care Models

Home-Based
Primary Care

Home-Based
Palliative Care

Home-Based
Acute Care

Home Health

Home- and
Community-
Based Services

Barriers to Scaling and Sustaining Home-Based Care

Current fee-for-service payment model perpetuates fragmentation in care and does not encourage care coordination

- Fee schedule reimbursements are not adequate
- Interdisciplinary teams cannot bill under FFS model
- Travel time is not compensated and the majority of homebound individuals live more than 30 miles from full-time home-based medical providers

Lacking infrastructure needed to support home-based care

- Direct care workforce shortage exacerbated by the COVID-19 pandemic
- Insufficient home-based care data collection, data sharing, and relevant quality measures

How can Payment Models Better Support Home-Based Care?

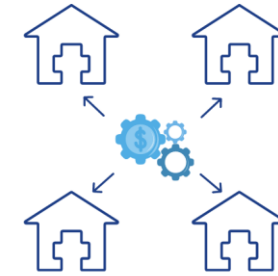
- Value-based payments (VBP) are one approach to **better align payment with practice** by paying for improved quality of services and not simply the volume of services
- New payment models can provide **financial flexibility** that allows providers to more easily address the medical and social needs of patients
- Allow providers to deliver clinically appropriate care and reward important services like care coordination, preventive care, and patient education

Policy Opportunities to Integrate Home-Based Care into Whole-Person Care

Adapt Existing Models to Achieve Whole-Person Care



Support Small, Independent Home-Based Care Providers



Pathways to Integrate Home-Based Care into Whole-Person Care

Adjust Specific Technical Considerations for Home-Based Care

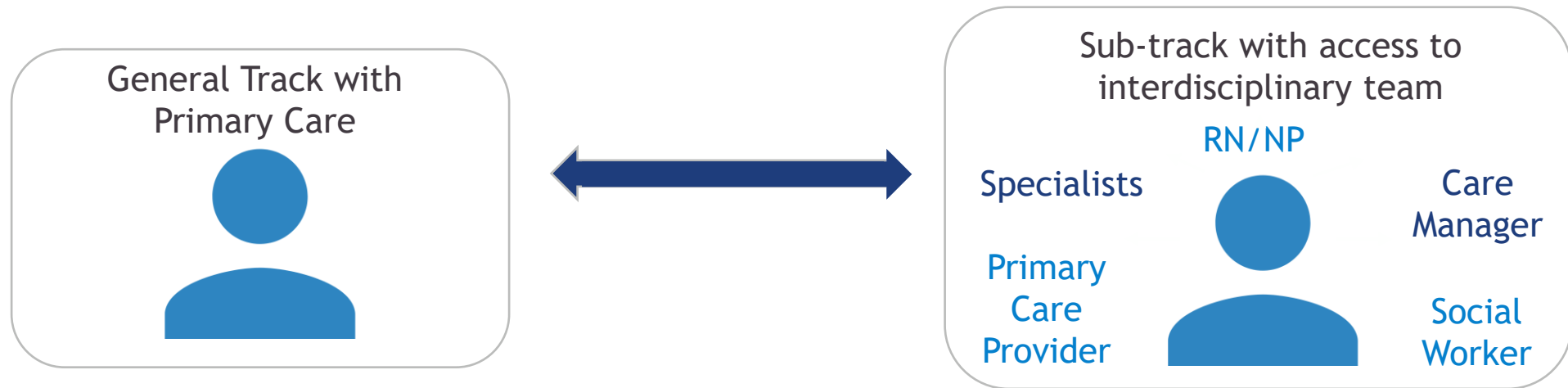


Creating the Foundation to Strengthen Home-Based Care



Adapting Existing Payment Models for Whole-Person Care: Implementation

- A payment model “home” can provide **whole-person accountability** for both the longitudinal and episodic needs of individuals receiving home-based care
- Adapt or develop a sub-track within existing population-based VBP models to allow beneficiaries to **seamlessly transition** between the sub-track and the larger population-based model as their medical and functional needs change



Key Takeaways



There is momentum to expand home-based care



Value-based arrangements are well situated to support the expansion and integration of home-based into whole-person care



Expanding home-based care through VBP is crucial for addressing the unmet needs of people with complex health and social needs

Thank You!

Contact Us



healthpolicy.duke.edu



Subscribe to our monthly newsletter at dukemargolis@duke.edu



1201 Pennsylvania Avenue, NW, Suite 500
Washington, DC 20004



DC office: 202-621-2800
Durham office: 919-419-2504

Follow Us



[DukeMargolis](https://www.facebook.com/DukeMargolis)



[@DukeMargolis](https://twitter.com/DukeMargolis)



[@DukeMargolis](https://www.instagram.com/DukeMargolis)



[Duke Margolis](https://www.youtube.com/DukeMargolis)