



# FOR PROVIDERS: FREQUENTLY ASKED QUESTIONS ABOUT PALLIATIVE CARE SERVICES FOR GOLD COAST HEALTH PLAN (GCHP) MEMBERS

# Q: What is the My Gold Care palliative care program?

A: My GoldCare is the new GCHP palliative care program in accordance with Senate Bill 1004. The program accesses GCHP's strong provider network of qualified, multidisciplinary teams dedicated to providing patient-and family-centered care that addresses the physical, intellectual, emotional, social, and spiritual needs of the Plan's members in the most compassionate way possible. The new program will be available for any member who qualifies. This does not result in a reduction in benefits for members.

## Q: Why are we addressing palliative care?

A: The state Department of Health Care Services mandated that palliative care is a covered benefit for eligible beneficiaries effective January 1, 2018 in accordance with Senate Bill 1004 and APL17-015.

#### Q: What is palliative care?

A: Palliative care is a way of providing care that addresses the difficulty of treatment of serious illnesses with a unique focus on patient choice to improve the quality of life as much as possible. Palliative care works with patients and families to determine what is most important to them in managing their illness. There is a palliative care team that coordinates with the member's physician to ensure that the patient's and family's goals of care align with the treatment options available to them.

#### Q: Does GCHP have a palliative care benefit?

A: Yes. The current palliative care benefit is for members who elect and meet the eligibility criteria for the My *Gold*Care program.

#### Q: How does palliative care work?

A: Palliative care providers are doctors, nurses and social workers who work with a member's regular doctors to provide additional support to cope with the challenges experienced by the member and the member's family while dealing with serious illness. It can be provided along with curative treatment.

#### Q: What are the chronic health conditions that would qualify for palliative care?

A: GCHP will provide palliative care services to all members who elect and qualify under the general eligibility and disease-specific criteria of the My *Gold*Care program. A provider memorandum that provides in-depth descriptions of the covered conditions is located in the Provider Portal and listed <a href="here">here</a>. Qualified conditions include, but are not limited to, advanced cancer, kidney failure, chronic liver disease, chronic obstructive pulmonary disease (COPD), and congestive heart failure.

#### Q: What can a member expect from palliative care?

A: The member can expect expert attention focusing on symptoms such as pain, shortness of breath, fatigue, nausea, etc. The palliative care team will address physical, intellectual, emotional, social and spiritual needs. This facilitates patient autonomy, access to information, and choice.



# Q: How does a member qualify for palliative care?

A: **Prior authorization is not required for palliative care.** A memorandum that provides in-depth descriptions of the covered conditions is located in the Provider Portal. If you believe a patient qualifies for My *Gold*Care, the referring provider can refer directly to one of the My *Gold*Care palliative care providers listed in the Provider Portal.

# Q: Is there a separate authorization form for palliative care?

A: No. Prior authorization is not required for the My *Gold*Care program.

# Q: Who provides palliative care services?

A: GCHP has a network of palliative care providers that can provide the care in various settings. A list of those providers is listed on the Provider Portal.

## Q: Where are palliative care services provided?

A: Palliative care can be provided in a variety of settings, including the hospital, outpatient clinics, doctor's offices and at home.

## Q: Does a patient have to give up their own doctors if they have palliative care services?

A: No. The palliative care providers work with the patient's current doctors.

#### Q: How is palliative care different from hospice care or supportive care?

A: Palliative care is not end-of-life care, and it is used while the patient is continuing active treatment for their medical condition. Hospice care is reserved for a terminally ill patient when treatment is no longer curative during the last six months of life. You can receive curative treatment and palliative care treatment at the same time. Supportive care are those services rendered to members who require similar services under palliative care but do not qualify for palliative care.

# Q: If a member has another primary insurance and GCHP as secondary insurance, how does a member get palliative care services?

A: The member should ask their primary insurer if palliative care is a benefit. If so, ask them how to receive the services and the providers will bill GCHP secondarily for payment. If the member's primary insurer does not provide a palliative care benefit, GCHP will require documentation of the primary insurance carrier's denial of the request for palliative care in order for GCHP to consider covering the service(s) requested.

#### Q: Will a member be able to obtain palliative care services if the member has Kaiser as their PCP?

A: Yes. Members can contact Kaiser at 1-800-464-4000 to inquire about palliative care services.