



TOOLS &
SUPPORT



The Dow Chemical Company: Expanding Access to Hospice Care Benefits

Recognizing that employees underutilized hospice care, The Dow Chemical Company worked with Aetna to implement their Compassionate Care Program, allowing seriously ill employees to take advantage of hospice care without having to abandon curative treatment.

Case Study

Expanding access to hospice care benefits

Introduction

In the early 2000s, The Dow Chemical Company identified a gap between the kind of care seriously ill patients wanted and what the company's health benefits offered. Aiming to improve the quality of life for active employees and pre-Medicare retirees impacted by serious illness, Dow worked with Aetna to implement the Compassionate Care Program. The program's goal is to provide comprehensive case management and expanded access to hospice benefits for people with serious illnesses, while also allowing them to pursue curative treatment.

For this case study, CPR interviewed Steve Morgenstern, North America Health and Welfare Plans Leader at The Dow Chemical Company; Donna Traverso, Senior Account Executive at Aetna; Alena Baquet-Simpson, Senior Director, Medical Health Services at Aetna; Linda Mako, Registered Nurse and Clinical Consultant at Aetna; Yolanda Williams, Registered Nurse and Clinical Consultant at Aetna; and Christie Kanitz, Operations Director at MidMichigan Home Care.

The Problem & Background

An impossible choice

The Dow Chemical Company (Dow) offered a hospice benefit to employees and dependents prior to its Compassionate Care Program; however, the benefit followed the guidelines of traditional hospice benefits under the Medicare program. To be eligible for hospice under Medicare, a patient must be certified by a physician as being terminally ill, have a life expectancy of six months or less, and choose to forgo curative treatment. Dow observed that following these guidelines resulted in low utilization and delayed enrollment in hospice by its population. Those that did enroll in hospice tended to live less than a week after enrolling, having missed opportunities for improved quality of life under this benefit. For example, Dow's key hospice provider, MidMichigan Home Care, found that nearly one in three seriously ill patients who entered hospice died within seven days of admission.

Dow realized that underutilization of hospice stemmed from a dire choice that employees were forced to make under its benefits structure: give up all hope of a cure to take advantage of hospice care, or continue

potentially curative treatment without the benefit of hospice services that can ameliorate patient symptoms and enhance their quality of life. The company did not want its employees to face this choice and set about finding a way to give employees the best of both worlds - the advantages of hospice care without forgoing the hope and potential success of curative treatment.

While Dow began looking for a solution to its benefit issue, Aetna was witnessing a similar problem among its member population. In 2003, Aetna took notice of a number of studies reviewing cases of vulnerable, elderly patients. The studies showed a considerable gap in the types of care that Americans with serious illness wanted and the care they actually received. Looking to close that gap, Aetna created the Compassionate Care Program.

Program Design

A two-tier strategy

Aetna designed the Compassionate Care Program using a two-phase strategy to address the gap in care for individuals facing serious illness. The first phase, rolled out in 2004, consisted of implementing a comprehensive case management program. Aetna started the second phase of the program in 2005, which involved expanding access to hospice benefits, and piloted its hospice program with 13 large customers, with Dow as an early adopter of the program for its active employees and pre-Medicare retirees.

Overall the Compassionate Care Program is intended to:

- Support members with serious illness in a culturally sensitive manner that respects their decisions.
- Help members better understand their condition(s) and encourage discussions with their providers and families.
- Help members identify and access community-based resources.
- Provide clinical resources to assist members, families, and caregivers.
- Help coordinate care among providers and promote continuity of care.
- Help members manage their benefits and engage in advance care planning.
- Assist with pain and symptom management.
- Provide compassionate support to members, families, and caregivers.

Phase one: Comprehensive case management

For Aetna, case management was an obvious first step for a program like this. Comprehensive case management helps empower members and their families in their care decisions and supports them in having difficult conversations about advanced and serious illness. It is critical that individuals understand their conditions and the benefit options available to them so that they can make the best choices for their care.

The stars align

As Dow was looking for a solution, Aetna created one. The health plan approached Dow, a member of Aetna's customer forum which it consults for insights, with its idea for a pilot. When Aetna described the Compassionate Care Program, Dow realized it aligned with its goals and was the solution it had been seeking.

Aetna identifies members who can benefit from the program using claims, pharmacy, and lab data, as well as self-referrals from members and their families. In this program, members are eligible for case management if they are diagnosed with a serious illness that has a life expectancy of 12 months or less.

After identifying potential members, a case manager reaches out to them to introduce and explain the program. Case managers assess each member's unique needs and preferences and develop a case plan which they review with members, families, and providers and then use to coordinate services the complex care these members need. A case management team that includes social workers, behavioral health specialists, and medical directors supports case managers with connecting members to appropriate care and resources.

Phase Two: Hospice care

Even with a focus on case management, Aetna found that when people gain a better understanding of their condition and their options, they are eager for less aggressive care including hospice care. Thus, expanding access to hospice benefits came into play as the next logical step of the program's development. Hospice provides better quality of life at the end of life. More liberal access to hospice services can break down the barriers to utilization of hospice care. When hospice is framed as a benefit only available in the last six months of life and only when patients stop seeking curative treatment, patients may hesitate to use it because doing so acknowledges that death is imminent. The Compassionate Care Program offers an enhanced hospice benefit including:

- The ability to receive active treatment while also receiving hospice services;
- Access to hospice services with a life expectancy of 12 months or less
- No day or dollar limits on hospice care (members are directed to plan documents for specific costs related to hospice care);
- No precertification requirement for inpatient hospice, effective January 1, 2016; and,
- Respite care for families and caregivers.

Implementation

Dow rolled out the program to its active employee population and pre-Medicare retirees. Dow found it relatively easy to manage because Dow employees mostly live and work in a concentrated area, which made finding appropriate provider partner - MidMichigan Home Care – relatively easy. Moreover, although employees might not have been aware of the program or proactively seeking it initially, the defined geographic area allowed Dow to circulate information about the program efficiently to employees.

The major components of the program essentially remained the same during the transition from the pilot to the full program; however, there was one key difference pertaining to bereavement and respite benefits. During the pilot, Aetna noticed that these services were underutilized, likely due to the fact they Aetna treated them as a separate set of benefits disconnected from the hospice benefit. Prior to the implementation of the Catalyst for Payment Reform

final program, Aetna rolled bereavement and respite services into the hospice benefit, which significantly increased their utilization.

Staffing and resources

Having the right support staff in place is crucial to helping seriously ill patients utilize their available benefits. Interestingly, both Dow and Aetna found that implementation of the program had virtually no impact on the need for staffing or resources. During the pilot, and to this day, a general nurse case manager works with members throughout their various stages of health. The workload for nurse case managers is managed such that, at any given time, only a small percent of their patients are in the Compassionate Care Program. Aetna manages it this way because it wants case managers to develop relationships with patients, be able to dedicate time to having goals-of-care conversations, and to obtain core competencies in managing these types of cases.

As such, Aetna invested in ongoing training and support for case managers to ensure they provide the highest level of service. Aetna worked with the National Hospice and Palliative Care Organization (NHPCO) to develop a training program for nurse case managers in palliative care. The program includes training on patient engagement, cultural issues, and their ability to identify members in need of such services and outreach to them appropriately. Case managers communicate with members principally over the telephone and are continually evaluated to ensure they have adequate training and to identify ways to enhance the training and development program. Aetna developed the Compassionate Care Steering Committee to support the program in an ongoing way. This clinical workgroup is dedicated to delivering the best possible experience for the member and their family, and works to continually improve program delivery, training, and other areas.

Points of resistance

While Dow recognized the benefits of the Compassionate Care Program from the start, its employees had a different initial response. Steve Morgenstern noted that employees - even one of the company leaders at the time - were confused by initial communications about the details of the new program, perceiving that it was going to eliminate hospice care. This misunderstanding led to a defensive and negative response. Dow needed to reverse the perception that the Compassionate Care Program was undermining hospice and convince skeptical employees that the program was 'hospice on steroids.'

To turn the situation around, Dow enhanced its employee communication and education efforts with presentations and mailings to make it clear that the program was an expansion of hospice benefits. Morgenstern adds that the program's name, "The Compassionate Care Program" underscores Dow's goal to provide high quality care to seriously ill members of its population earlier than under the previous benefit.

An unexpected reaction

"The initial response [from employees] was concern that we were trying to undermine hospice or take it away, rather than expand it, because the perception is that palliative care is end of life care. Until you're threatened by the need for palliative care you aren't threatened by it. Only a select population recognizes a need for it."

- Steve Morgenstern,
The Dow Chemical Company

Dow also worked to improve employee engagement in the program, as the company knew that giving all employees the chance to have goals-of-care conversations with their family and health care providers before care was needed would enhance the program's success. Dow worked with Aetna to leverage its call center to provide information about the program when Dow employees called in, and Aetna sent nurse case managers to visit doctors' offices to educate them on the program, which helped direct (and redirect) eligible patients to important services. These strategies helped overcome employees' unwillingness and discomfort with thinking about palliative care in advance and make them aware of the benefit before they needed it.

Results

The right thing to do

It is important point to note that while Dow was certainly interested in cost savings, the implementation of this program was a personal and culturally based choice. As Steve Morgenstern described, the company knew that in terms of return on investment, they were likely dealing with small amounts of money, but the investment was worth it because it was the right thing to do. In addition, the company informally observed patients using hospice services earlier and decreasing their utilization of low-value services.

Aetna has also found evidence of success. In testing the program among three groups – commercial members who received case management and standard hospice benefits; commercial members who received case management and had access to the expanded hospice benefit; and Medicare members who received case management and traditional Medicare hospice benefits – hospice election increased from 31 percent to 72 percent across its commercial population, while use of the hospital days were reduced by 37 percent. Moreover, there were no significant cost differences between the two commercial groups suggesting that expanded access to hospice was implemented without associated cost increases.

Patient satisfaction is a key metric

Both Dow and Aetna felt that a key aspect of the program's success was patient satisfaction. Although there were a lot of questions at the beginning of the pilot, Aetna has not received a single member complaint about the program. This is significant considering the number of participants who have participated in the program and the sensitive nature of the issues associated with serious illnesses. Aetna believes that the lack of complaints speaks to overwhelming member support for the program. Moreover, the program has received glowing feedback. Donna Traverso noted that the Compassionate Care Program had such a positive impact on some members that their families would request that case managers attend funerals and were mentioned by name in obituaries. For Traverso, that feedback was especially meaningful and spoke volumes about the

A Small Price for a Big Investment

" [I realized], this may cost us some money, it will probably save us some money, but almost certainly it will be a benefit for people—It was the right thing to do."

—Steve Morgenstern,
The Dow Chemical Company

impact of the program. Aetna and its case managers have received many personal letters from patients and their families expressing thanks and appreciation for the program.

Insights gained

Recalling employees' initial confusion about the program, Steve Morgenstern noted that when implementing a program in a new area like this, not everyone [your employees] will know what you are talking about. Clarity in communications is essential—explanations that may seem obvious to you are not obvious to others.

Aetna recommended that employers be open to innovation in new areas like hospice care. Sometimes a program like this can be scary to employees given the implications of participating, but it also can bring significant value to patients and their families.

MidMichigan Home Care emphasized the importance of case managers and providers working together more closely, as their coordination and mutual understanding is essential for delivering integrated care.

MidMichigan also encourages employers with programs like this to provide employees with plenty of facts about the program and encourage them to ask lots of questions of their doctor. Knowledge is power when it comes to health care, and patients who are better informed of their benefits can more easily receive care that fits their needs.

Next Steps

The Dow Chemical Company was ahead of its time when it implemented the Compassionate Care Program for its employees well over a decade ago. To this day, the program remains in place at Dow, and the company is proud of the effort it made on behalf of its employees and their families to enhance their quality of life.