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# CMS' innovation arm signals it is moving toward palliative care, capitation payment models



[Liza Berger](#)



The Centers for Medicare & Medicaid Services' (CMS) likely will be initiating a palliative care

payment model, the agency said Wednesday.

"We are hopeful we are going to be moving forward with something in that space," said Chris Smith Ritter, Ph.D., director of the Patient Care Models Group for CMS' [Center for Medicare and Medicaid Innovation \(CMMI\)](#), during an afternoon session of LeadingAge's Center for Aging Services Technologies Collaborative Care & Health Innovations Summit.

She noted that the Medicare Care Choices Model, which is geared for the hospice community, is concluding. The model allows Medicare beneficiaries to receive supported care services from selected hospice providers while continuing to receive services by other Medicare providers, including care for their terminal condition. Under current payment rules, Medicare beneficiaries are required to forgo Medicare payment for care related to their terminal condition in order to receive services under the Medicare or Medicaid hospice benefit.

Palliative care providers have been concerned that people cannot receive both curative care and palliative care concurrently. They have expressed optimism that [CMS would offer a community-based palliative care benefit this year](#).

### Home Health Value Based Purchasing Model

Ritter also noted that home health providers should look for information regarding the expansion of the [Home Health Value Based Purchasing Model](#) in the prospective payment system rule, which typically is published between June and August. CMS currently is in the notice and comment period of rule making for the expansion, Ritter said. In January, CMS authorized expansion of the program.

### More capitated payment models

In another area of discussion, Ritter indicated that CMMI is interested in moving away from fee-for-service and toward more capitated payment models. A capitated payment is a value-based concept in which insurance plans receive a set amount of money per member per time period. Medicare Advantage is a capitated payment model.

The pandemic has revealed that "the fee-for-service is terribly vulnerable in a lot of ways," Ritter said, adding that looking for ways to shore up some of that "would be moving toward more capitation."

CMMI, which came into being with the Affordable Care Act, aims to create value-based innovations with the goals of improving quality, reducing costs and better aligning payment systems to promote patient-centered practices.

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