



SERVICE LINE DIFFERENTIATION

| | Palliative Care | Traditional Hospice (MHB) | Medicare Care Choices Model (MCCM) |
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| Goal of Care | Optimizes quality of life by anticipating, preventing and treating suffering. | Addresses physical, intellectual, emotional, social, and spiritual needs of dying patient. | Focus on comfort and quality of life, but patient can continue to receive life-prolonging treatments. |
| Eligibility Requirements "At a Glance" | Varies by program and payment source | Medicare beneficiaries in the end-stage of a terminal illness | Medicare beneficiaries living in a traditional home in the end-stage of cancer, COPD, HIV/AIDS, or CHF |
| Life Expectancy | No life expectancy requirement; can be offered at any point in time for a pain-causing disease. | Life expectancy of six months or less if the disease process continues its current course. | Life expectancy of six months or less if the disease process continues its current course |
| Care for illness, including terminal diagnosis | Yes | No | Yes |
| Social Work | Available | Yes | Yes |
| Aide Services | No | Yes | Yes |
| Volunteers | No | Yes | Yes |
| Bereavement Services | No structured bereavement support after time of death. | Yes | Yes |
| Payment | Payment Sources Vary. | CMS reimburses on a daily per diem basis (4 levels) for all related care, including medications, DME, transport. | CMS reimburses through per beneficiary per month (PBPM) payment structure. Patients remain responsible for usual share of Medicare costs. |