2017 ANNUAL REPORT
ABOUT C-TAC

C-TAC is a diverse alliance of consumer advocacy groups, healthcare professionals and providers, private sector stakeholders, faith-based organizations, and healthcare payers with the shared mission of ensuring all Americans, especially the sickest and most vulnerable, receive comprehensive, high quality, person- and family- centered care that is consistent with their goals and values and honors their dignity.
Co-Chair Letter

2017 was a historic year for the movement to transform advanced care. For us personally, it marked C-TAC’s most successful year in accelerating this movement. We could not have imagined nine years ago when this organization was a vision in our minds that it would grow into what it is today. We are incredibly proud of everything C-TAC has accomplished over the last decade and beyond thankful to our members and supporters for joining us on this journey.

Our members came together through a variety of platforms. C-TAC hosted over a dozen programs ranging from a bipartisan bill introduction event on Capitol Hill, to expert panels on clinical and payment design at Harvard Law School, to convenings of faith leaders across the country.

We hosted two signature events in 2017: the launch of the Campaign to Transform Advanced Care and the fourth annual National Summit on Advanced Illness Care. The campaign launch event at the National Press Club in Washington, DC hosted a standing room only crowd of nearly 100 leading healthcare advocates to announce C-TAC’s new initiative to accelerate progress in this movement. The Summit brought together over 400 members and supporters, our largest event to date, to hear from chief policymakers, industry leaders, powerful consumer advocates, and faith and community organizers.

Throughout the year, our members were actively engaged in our legislative, regulatory, and interfaith workgroups that helped inform and advance our agenda. C-TAC also published several reports including a framework for how to design serious illness care programs and a blueprint for engaging faith communities in advocacy. We also championed federal legislation aimed at improving the lives of people living with advanced illness and their families by reforming care delivery, payment structures, and professional education.

As we championed these causes, our membership continued to grow. In 2017, our membership grew by 25 new members and we are honored to have esteemed hospices, health systems, health plans, and others join our coalition.

We are proud to share with you the Coalition to Transform Advanced Care’s 2017 Annual Report, which looks back at our accomplishments over the past year. We and the C-TAC team look forward to continuing working with our members in 2018, and welcome all those who believe that everyone with advanced illness deserves high-quality, person-centered care to join us for another incredible year in the movement.

Sincerely,

Tom Koutsoumpas
Co-chair and Co-founder

Bill Novelli
Co-chair and Co-founder
2017 BOARD OF DIRECTORS

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President Emeritus • American Hospital Association (AHA)

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Founder and Director • CCI
MEMBERS

As of January 2018, the Coalition is proud to include the following organizations leading advanced care transformation nationwide.

- AARP
- Aetna
- Aging With Dignity*
- Allina Health
- Alzheimer’s Association
- America’s Health Insurance Plans (AHIP)
- American Academy of Home Care Medicine (AAHCM)
- American Academy of Hospice and Palliative Medicine (AAHPM)
- American Academy of Nursing (AAN)
- American Association of Colleges of Nursing (AACN)
- American Association of Colleges of Osteopathic Medicine (AACOM)
- American Association of Colleges of Pharmacy
- American Association of Critical Care Nurses
- American Cancer Society / Cancer Action Network
- American College of Physicians
- American Dental Education Association
- American Diabetes Association
- American Geriatrics Society
- American Heart Association
- American Holistic Nurses Association
- American Hospital Association
- American Osteopathic Association
- American Society of Clinical Oncology (ASCO)
- AnMed Health
- Anthem
- Argentum
- As You Wish Advance Care Planning
- Ascension Health
- Aspire Health
- Association of American Medical Colleges (AAMC)
- Big Bend Hospice*
- Blue Shield of California
- Bluestone Physician Services
- Bon Secours Health System
- Cambia Health Foundation/Cambia Health Solutions
- CancerCare
- Capital Caring
- Care Support of America
- CareCentrix
- CareFirst BlueCross BlueShield
- Caregiver Action Network
- Centene
- Center for Practical Bioethics
- Cigna

* new member in 2017
• Coalition for Compassionate Care of California
• Common Practice*
• Community Hospice of Texas
• Consumer Coalition for Quality Health Care
• Cornerstone Hospice and Palliative Care*
• Curadux
• DocuBank
• Eli Lilly and Company
• Engage With Grace/Eliza Corporation
• Fidelity Health Care*
• Geisinger Health System
• George Washington Institute for Spirituality and Health
• Gerontological Advanced Practice Nurses Association (GAPNA)*
• Good Shepherd Community Care*
• Gordon and Betty Moore Foundation*
• Guadalupe Regional Medical Center*
• Gunderson Health System
• HealthCare Chaplaincy
• Healthcare Leadership Council
• Healthwise
• Highmark
• Home Centered Care Institute*
• Honoring Choices Idaho
• Honoring Choices Massachusetts
• Honoring Choices Minnesota
• Honoring Choices Virginia*
• Honoring Choices Wisconsin
• Hope HealthCare Services*
• HopeWest*
• Hosparus Health
• Hospice & Palliative CareCenter
• Hospice and Palliative Nurses Association (HPNA)
• Hospice Compassus
• Hospice of Chattanooga*
• Hospice of Cincinnati
• Hospice of Santa Cruz County*
• Hospice of the Piedmont*
• Hospice of the Western Reserve*
• Humana
• Intermountain Healthcare
• JourneyCare*
• Kaiser Permanente
• Kōkua Mau*
• LeadingAge
• Meddecision
• Medstar Health
• Mountain Valley Hospice & Palliative Care*
• Nathan Adelson Hospice*
• National Academy of Elder Law Attorneys (NAELA)
• National Academy of Medicine
• National Alliance for Caregiving
• National Alliance for Hispanic Health
• National Business Group on Health
• National Center for Medical-Legal Partnership
• National Coalition on Health Care
• National Council on Aging
• National Healthcare Decisions Day Initiative
• National Partnership for Hospice Innovation (NPHI)

* new member in 2017
• National Partnership for Women & Families
• National POLST Paradigm*
• Novant Health
• Oncology Nursing Society
• Optum Center for Palliative and Supportive Care
• Priority Health
• Progressive National Baptist Convention
• ReACT
• Samaritan Healthcare & Hospice*
• SCAN Health Plan
• SENIORLINK
• Sharp HealthCare
• Social Work Hospice and Palliative Care Network
• Southern Christian Leadership Council
• Sutter Care at Home/Sutter Health
• CSU Institute for Palliative Care
• The Carolinas Center for Hospice and End of Life Care
• The Conversation Project
• The John A. Hartford Foundation
• The SCAN Foundation
• Trillium Institute
• Trinity Health
• UCLA Healthcare Ethics Center
• UnitedHealth
• University of Pennsylvania School of Nursing
• University of Virginia Health System
• US Department of Veterans Affairs
• US Medical Management
• Visiting Nurse Associations of America
• Visiting Nurse Service Of New York
• VNA Health Group*
• Vynca, Inc.
• WiserCare, Inc.*
• Zen Hospice Project

* new member in 2017
CAMPAIGN

The population is aging rapidly – the number of older Americans will double by 2050. Though Americans are leading healthier and longer lives than ever before, the vast majority will face advanced illness at some point. Advanced illness involves one or more conditions impacting general health to the point that the effects of curative treatment become limited, and care increasingly becomes focused on quality of life.

Unfortunately, for all its strengths, our healthcare system is not yet equipped to provide such care when people are seriously ill. People living with advanced illness still face challenges like fragmented, siloed systems that result in unnecessary suffering and not getting the care they want when and where they choose.

This is not a problem we can ignore.

That is why C-TAC launched the Campaign to Transform Advanced Care, a national movement built on policy change, state and community organizing, and support for family caregivers, to accelerate the movement to transform advanced illness care.
POLICY

C-TAC pursues a comprehensive policy agenda to help guide advocacy initiatives, including delivery system reform, preference-driven care, caregiver and consumer support, and professional engagement.

Legislative

C-TAC continues to collaborate with our bipartisan allies on Capitol Hill to ensure that all Americans living with advanced illness receive comprehensive, high-quality, person- and family-centered care that is consistent with their goals and values and honors their dignity.

In 2017, C-TAC advanced two crucial legislative measures in the U.S. Senate, developed a care delivery model that serves as the foundation of a landmark bipartisan, bicameral bill, and continued to break new ground in developing legislative solutions for the struggles Americans living with advanced illness face every single day.

C-TAC federal policy priorities include:

1. Promoting person-centered care coordination
2. Supporting payment structures for innovative models
3. Establishing best practice-based care
4. Identifying comprehensive quality measures
5. Ensuring impact and accessibility of advance directives
6. Increasing availability of resources for family caregivers
7. Expanding the advanced care workforce

“Over the years C-TAC has built an absolute bulldozer of support behind it and I think its maybe time to put that bulldozer into forward gear and start looking to drive some legislation through Washington.”

U.S. Senator Sheldon Whitehouse (D-RI)
The Patient Choice and Quality Care Act of 2017

The Patient Choice and Quality Care Act of 2017 (PCQCA) was developed in consultation with C-TAC’s policy team and includes several provisions that would make important improvements to advanced illness care for all Americans:

• Establishes a new Medicare model for advanced illness care and management
• Allows eligible individuals to voluntarily engage in team-based advance care planning (ACP) to align their goals, values, and preferences with their care
• Facilitates increased coordination and alignment between public and private sector quality measures
• Improves Medicare’s existing coverage for advance care planning services by allowing appropriately trained or experienced clinical social workers to provide ACP services, and ensuring copay costs do not create barriers for patients
• Ensures patients and providers have needed support tools and that advance directives follow patient across clinical settings and states
• Requires healthcare facilities to ensure that individual’s care plans are appropriately documented and shared with other providers and facilities upon discharge
• Funds $50 million in grants to increase public awareness of ACP and advanced illness care

Other Legislative Priorities

We worked closely with our members to advance other bills through Congress, including:

• Compassionate Care Act
• Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act
• Independence at Home Act of 2017
• Medicare Choices Empowerment and Protection Act of 2017
• Medicare Patient Access to Hospice Act of 2017
• Palliative Care and Hospice Education and Training (PCHETA) Act
• Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act
• Removing Barriers to Person-Centered Care
• Rural Access to Hospice Act


**Regulatory**

A substantial portion of C-TAC’s policy objectives are achievable through regulatory reform, particularly with regards to the Medicare and Medicaid programs.

**Advanced Care Model (ACM) Service Delivery and Advanced Alternative Payment Model**

In February 2017, C-TAC submitted an Advanced Alternative Payment Model (APM) to the United States Department of Health & Human Services (HHS). The ACM is specifically designed to meet the needs of individuals with advanced illness and their family caregivers by breaking down silos among professional groups, bridging traditional medical and social services, and providing comprehensive care management, concurrent case management support, and systematic advance care planning.

We expect a review of our proposal in early 2018.

**Rulemaking**

Another integral component of C-TAC’s regulatory work is the submission of comments to the Centers for Medicare & Medicaid Services (CMS) during the rule making process.

Throughout the summer of 2017, CMS issued various rules that potentially involved care for those living with advanced illness. C-TAC submitted comments on several, with suggestions for ways they could further improve advanced illness care. CMS acknowledged and incorporated C-TAC comments on certain rules and initiatives during the year, including:

- 2018 Physician Fee Schedule
- End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) and Quality Incentive Program (QIP) rule
- FY 2018 Hospital Inpatient PPS and the Skilled Nursing Facility Value-Based Purchasing Program and Quality Reporting Program
- HHS’s draft strategic Plan for FY 2018-2022
- Home Health Rule
- Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Quality Payment Program (QPP) Rule
SUPPORTING FAMILY CAREGIVERS

To better understand the struggles faced by family caregivers, C-TAC undertook a digital ethnography study of over 6,700 conversations from websites where family caregivers discuss caring for a loved one. The analysis provided a vivid depiction of the state of family caregivers in the United States and the need to do more to support these individuals and their families. This project was supported by funding from the Cigna Foundation.

Overall, the draining nature of the work is a top issue for family caregivers who often feel their work lacks meaning. 69% of caregivers reported a net negative experience with caregiving. They also struggled with a lack of knowledge about the disease they’re caring for, what to expect in the process, and how to cope with the demands of caregiving. Finally, their financial burdens are significant.

- Caregiving is a high stress task that takes a toll on both emotional and physical health of the caregiver
- Mental fatigue, loneliness, and anger arise from caregivers’ resentment at lack of support
- Aggravated conditions result in higher medical bills; 48% of caregivers are unable to work and report a negative impact on their financial health
- It’s very difficult to balance other relationships and the inability to leave patient isolates the caregiver from the rest of the world
- 24% of caregivers don’t get adequate support from their families

We are creating a whole generation of caregivers who sacrifice their jobs and personal relationships, lack financial security, and are left with little after their loved ones pass away. While these challenges are not necessarily new, this research adds vividness and personal dimensions to the problem.

“Families told us they need this help. This Campaign provides them with what they need.”

Dr. Christina Stasiuk
Senior Medical Director
Cigna
COMMUNITY WORK

The movement to improve advanced illness care in America plays out on the ground with people and their families interacting with their providers, community hospitals, and faith congregations. C-TAC recognized this crucial component of our work with the launch of the Campaign to Transform Advanced Care. C-TAC is the only national convener for local leaders to come together and learn what other communities have done to raise awareness around these issues, develop their own set of goals and objectives, and build a state, regional, or local network of advocates to help this high-need population in their communities.

Coalition Building

This year, C-TAC hosted forums with leaders in several states around the country who reached out to us for technical support in building capacity in their states. We helped expand their network by bringing in local C-TAC members and other leaders to have a robust discussion on how to accomplish their goals. Going forward, C-TAC will continue to build bridges between communities by sharing past successes, providing technical assistance to groups interested in addressing these issues locally, and developing a comprehensive state policy agenda.

Faith Community Engagement

Through our Community Action Project, supported by the Cigna Foundation and the Patient-Centered Outcomes Research Institute, we have continued to expand our partnerships with faith leaders who want to be supportive of their vulnerable and underserved congregation members. In March, C-TAC released a blueprint for how faith leaders can develop stronger partnerships with community stakeholders and change how we deliver care for people with advanced illness.

“We have major issues in our country that we need to solve... If we don’t work together, we will fail.”

Phil Marshall
President and CEO
Hosparus Health

Bishop Simon Gordon discusses the unique role of faith communities in advanced care
Advanced Care Transformation Index

C-TAC developed the Advanced Care Transformation Index (ACT IndexSM), which provides an evaluation of efforts by policymakers, health systems, clinicians, and the public to improve the quality of life for the advanced illness population and their families. The Index provides a readily-understood, consolidated overview that will encourage the nation to monitor performance over time and focus its efforts and resources on the most promising opportunities for improving care, lowering costs and supporting the caregivers who serve this population.

The Index integrates published data from a variety of resources to create a single composite measure of the growth of our nation’s effectiveness in caring for the advanced illness population. The current ACT IndexSM index includes 25 measures from patient and family surveys of the patient care experience and transactional care processes such as cost, hospital readmissions, and home health visits. These measures cover five dimensions of advanced care including care delivery, communication, cost-of-care, community and caregiving.

To develop the index, C-TAC engaged more than 30 experts from across the healthcare spectrum, including both providers and consumers of care, to review, evaluate and select the 25 measures that comprise the index. The first version of the Index, unveiled at the 2017 National Summit in Washington, DC. rose 20% between 2003-2014 – a compound annual growth rate of 1.7%.

The 2017 ACT IndexSM depicts composite national level performance, but C-TAC is developing state-level indices over the coming year.
CARE MODELS

Advanced Care Model

In February 2017, C-TAC submitted the Advanced Care Model (ACM) to HHS.

Our model would improve person- and family-centered outcomes through interventions focused on people receiving comprehensive, high-quality care that is consistent with their goals and values and lowers the cost of care for people and families as well as health systems through better coordinated, patient-centered care.

The ACM creates an advanced illness care service under Medicare by using a value-based payment structure and taking on accountability for the quality of care a person receives. If fully implemented, the ACM would affect:

- **OVER 1 MILLION** Medicare Beneficiaries
- **Almost ALL Members** of Care Delivery
- **25%** of Medicare Expenditures

The model’s target population is comprised of Medicare beneficiaries with advanced chronic conditions in their last year of life while supporting flexibility for services to be delivered beyond one year.

The ACM delivers comprehensive, person-centered care management, concurrent curative and palliative treatment, care coordination across care providers and settings, comprehensive advance care planning, shared decision making with patient, family, and providers, and 24/7 access to clinical support.

Serious Illness Program Design and Implementation Framework

C-TAC published the ‘Serious Illness Program Design and Implementation Framework’ (SIP Framework) in August 2017. Built on available evidence and best practices, the Framework is a tool for providers to inform the development, implementation, and evaluation of serious illness care programs. Developed over several convening sessions of expert stakeholders, the SIP Framework reflects the growing evidence base for serious illness care models. This project was supported by funding from the Gordon and Betty Moore Foundation.
The SIP Framework is designed to:
- Inform serious illness program development, replication, and scaling
- Integrate with care model payment design
- Inform care and payment model simulator development
- Inform other aspects of design and development such as policy, standardized measurements, and regulatory analysis

The framework includes the foundational elements of program design and implementation that contribute to program success, such as:
- Leveraging existing programs and resources
- Recruiting strong program leaders
- Engaging staff
- Assembling experienced multidisciplinary care teams
- Building strong team, patient, and caregiver relationships
- Establishing processes for continuous quality evaluation and improvement

Moving forward, C-TAC plans to use the SIP Framework as the foundation for additional work toward improving care for the seriously ill.

**Blue Shield of California Home-based Palliative Care Program**

In July, C-TAC announced a $500,000 grant from the Stupski Foundation to analyze Blue Shield of California’s home-based palliative care and develop guidelines, tools, and best practices for payers interested in adopting similar models of care. This program is a unique collaboration of the health plan’s Accountable Care Organization providers, such as Hospice by the Bay and UCSF Health.

Initial findings from this cutting-edge project will be available in 2018 and highlighted at the fifth annual National Summit on Advanced Illness Care in Denver.

“Through this important work, we are exploring ways to make it easier for health care providers to offer these services to people with advanced illness and support their families.”

Glen Galaich
CEO, Stupski Foundation
SPRING 2017 ISSUE OF GENERATIONS


The issue was guest edited by Bill Novelli, Co-Chair of C-TAC’s Board of Directors, and Raca Banerjee, former Policy & Clinical Models Program Manager at C-TAC. Their article, “Closing the Care Gap”, addressed how those living with multiple chronic conditions require specially tailored care, why aggressive treatment is sometimes inappropriate, and why people with advanced illness need guidance when transitioning from curative treatment to high quality end-of-life care.

Other articles included:

- Supporting the Patient Voice: Building the Foundation of Shared Decision-Making by Patricia Bomba
- Advance Care Planning: Ensuring Patients’ Preferences Govern the Care They Receive by Brad Stuart, Angelo Volandes, and Benjamin W. Moulton
- My Life, My Story: A Personal Experience with the Right Care, at the Right Time by Amy Berman
- Caregiving at the End of Life: The Challenges for Family Caregivers by Barbara A. Given and Susan C. Reinhard
- Lessons from the Hospice Benefit for Advanced Illness Care by Perry G. Fine and Malene S. Davis
- A Prescription for Population-Based Palliative Care Education by Jason A. Webb and David Casarett
- The Changing Landscape of Palliative Care by Diane E. Meier and Brynn Bowman
- Policy and Politics to Drive Change in End-of-Life Care: Assessing the Best and Worst Places to Die in America by Andrew L. MacPherson and Ravi B. Parikh
EVENTS
Capitol Hill Event

On May 5, C-TAC teamed up with other leading advanced illness stakeholders to host a Capitol Hill event highlighting the need for policy change to improve end-of-life care and supporting the introduction of the bipartisan PCQCA. Over 100 stakeholders attended to hear Senator Shelley Moore Capito (R-WV), Representative Phil Roe (R-TN), Representative Earl Blumenauer (D-OR), and the event co-hosts discuss why now is the time to make lasting change.

This event energized C-TAC policy efforts and kicked off several months of aggressive advocacy that resulted in 31 members of congress co-sponsoring the bill and important pieces being added to other legislation.

The event was co-hosted by AARP, American Heart Association, Alzheimer’s Association, Capital Caring, LeadingAge, the National Coalition on Health Care, the National Partnership for Hospice Innovation, and The Pew Charitable Trusts.

“This work is extremely close to me ... people need that caring, helping hand in these moments.”

U.S. Senator
Shelley Moore Capito (R-WV)

Malene Davis, CEO, Capital Caring, discusses the need for policy change in end-of-life care along with Nancy LeaMond, Executive Vice President, AARP, Senator Shelly Moore Capito (R-WV), and Cheryl Phillips, Senior Vice President, LeadingAge
Campaign Launch

On June 28, C-TAC launched the Campaign to Transform Advanced Care by holding a press conference at the National Press Club in Washington, D.C. We also launched our family caregiver research at this event.

The press conference featured a variety of speakers who applauded the Campaign and identified the long-term goals for advanced illness care reform.

Since the launch event, the Campaign to Transform Advanced Care has continued to serve as the foundation for C-TAC’s programming and advocacy efforts.

“We don’t teach this idea of how to talk about end of life care.”

Malene Davis, President and CEO, Capital Caring

EVENTS

Nancy LeaMond, Executive Vice President, AARP, outlines goals for C-TAC’s Campaign
National Summit

Over 400 healthcare leaders, including providers, policymakers, health systems, payers, employers, and consumer advocates joined C-TAC for our fourth annual National Summit on Advanced Illness Care at the Capital Hilton in Washington, D.C. from November 27 – 29, 2017.

This year’s Summit, co-chaired by former Senate Majority Leaders Tom Daschle (D-SD) and Bill Frist, MD, (R-TN), gave attendees a rare opportunity to learn from industry influencers and national leaders. Each day featured panel discussions and breakout sessions focused on a range of perspectives on the future of care delivery for America’s elderly population, opportunities for policymakers to enact much-needed reform, strategies to support family caregivers, and other issues underpinning C-TAC’s Campaign to Transform Advanced Care.

“For the past four years C-TAC has brought together hundreds of champions in the advanced care space, including payers, providers, employers, academics, consumer advocates, and faith and community leaders, mirroring the broad diversity - and depth of that diversity - across the country.”

Former Senate Majority Leader Bill Frist

Jon Broyles, Executive Director, C-TAC gives closing remarks at the Summit

BJ Miller, Lucy Kalanithi, and Mark Ganz, CEO, Cambia Health Solutions, share their personal stories
Themes

Patients and families at the center of care
Summit attendees talked about how people are better equipped to make the right decisions when they are informed about all their care options.

Personal narratives drive passion
We all have a personal story that drives our passion to do this work. On stage, speakers offered a glimpse into how we all can pave our own path.

Unifying influencers across the spectrum
C-TAC prides itself on unifying policymakers across the political spectrum to ensure that advanced care remains a bipartisan issue.

Empowering family caregivers
C-TAC is supporting new strategies to provide care to family caregivers. This year’s Summit inaugurated these efforts, based on research to better understand the needs of family caregivers.

Everyone has a role to play
The Summit offered a venue for community- and state-based leaders to discuss their local initiatives to help this population. A crucial component of C-TAC’s mission is giving activists an opportunity to speak directly to an audience of industry leaders.

Payment drives change
We heard from innovators designing new methods to fund and support advanced illness care programs across the country, including C-TAC’s ACM. Without payment reform, we will never be able to scale and sustain care delivery reform.
JOIN US IN DENVER

C-TAC is excited to take next year’s program on the road to Colorado. Mark your calendars for October 9-11 at the Hilton Denver City Center. Join us and hundreds of visionaries in the field for another three days of thought leadership, networking, and developing the tools needed to drive change on the ground.
As the implementation affiliate of C-TAC, Innovations identifies novel and practical ways to help people take control of their care through two lines of service:

**Advanced Care Transformation℠**

Advanced Care Transformation℠ connects intensive medical management of complex chronic illness, palliative care and hospice, and promotes appropriate use of these services. It permits intensive management to continue if needed, but also allows comfort and psycho-social needs to be addressed. Advanced care supports good clinical outcomes, respects personal choice, prevents unwanted procedures and hospitalizations, and makes the care of serious illness more affordable.

**Respecting Choices®**

**PERSON-CENTERED CARE**

Respecting Choices® is an internationally recognized, evidence-based system for person-centered decision making that transforms the healthcare culture by honoring an individual’s goals and values. It involves respectful and open communication between providers, individuals, and families, while keeping the focus of planning on what matters most to each person. By making sure preferences are known, documented, and honored, Respecting Choices® helps identify care that is in-line with the goals of each individual.

Respecting Choices® offers a system of person-centered care that is guided by the best scientific evidence and is aligned with an individual’s goals and values.
We would like to thank the Aetna Foundation, the Cambia Health Foundation, the Cigna Foundation, the Gordon & Betty Moore Foundation, the John A. Hartford Foundation, the Peter G. Peterson Foundation, the SCAN Foundation, and the Stupski Foundation, as well as our members, for their generous support of the Coalition to Transform Advanced Care.