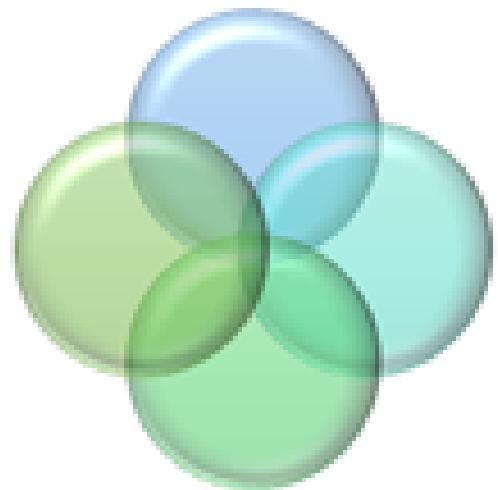


CHAMPION Care Action Team

Jan 7, 2026



Today's topics

- *Welcome*
- *Reminder of our mandate*
- *Framework Development*
- *Clarifying legal and policy points*
- *Group discussion about the draft Feb 6 Report*
- *Your help needed*
- *Calendar/Next steps*



CT Assembly Public Act 24-19: AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE PEDIATRIC HOSPICE WORKING GROUP

Response tour 2025 report

Our proposal: Developing a framework

- 1) *On and before March 1, 2025, the working group shall be responsible for the following:*
 - (A) *Reviewing existing hospice services for pediatric patients across the state;*
 - (B) *Making recommendations for appropriate levels of hospice services for pediatric patients across the state; and*
 - (C) *Evaluating payment and funding options for pediatric hospice care.*

- 2) *On and after March 1, 2025, and before July 1, 2026, the working group shall be responsible for developing recommendations for the establishment of a Children's Health, Advocacy, Management and Palliative Care program and, within such program, a Pediatric Palliative and Hospice Care Center of Excellence pilot program, as described in the working group's report submitted pursuant to subdivision (1) of subsection (f) of this section, including, but not limited to, recommendations regarding*
 - (A) *appropriations necessary to establish such program and pilot program,*
 - (B) *requirements for the operation of the pilot program, including, but not limited to, staff and facility requirements,*
 - (C) *education and curriculum requirements for nurses participating in the pilot program or providing pediatric palliative or hospice care services, and*
 - (D) *any licensing or certification requirements necessary for the operation of the pilot program or expanding the provision of pediatric palliative or hospice care services in the state.*

Simply said, our WG already has permission to move forward in developing a solution, but our February report needs to define key actions and identify the necessary funding to help us accomplish this effort



Barriers we identified	Themes for Phase 1 Framework Development to address barriers	Considerations, Proposed Action Steps
<p><i>Insufficient Number of Nursing Resources</i></p> <ul style="list-style-type: none"> ♦ <i>Limited Geographic Access to Services</i> ♦ <i>Lack of Certifications/ Licensures</i> ♦ <i>Disconnects with Continuity of Care/Services</i> <i>Delivery</i> ♦ <i>Limited Awareness of Available Resources</i> ♦ <i>Restrictions Due to Hospice Definition Parameters</i> ♦ <i>Limits with Insurances/Payer Sources & Limited Access to Medicaid</i> ♦ <i>Fear of the 'H' Word</i> 	<p>Increase number of skilled RNs</p>	<ul style="list-style-type: none"> • Sponsor RN pediatric palliative/hospice care training that includes formal classroom education and hospice practicum
	<p>Broaden access to services</p>	<ul style="list-style-type: none"> • Fund palliative/hospice care shift nursing hourly rates • Pursue legislative actions in CT to expand access
		<ul style="list-style-type: none"> • Explore removing/broadening 6-month hospice requirement • Increase access to Katie Beckett Waiver program
		<ul style="list-style-type: none"> • Centralize activity through Working Group to create CoE approach
	<p>Build a framework for a Pilot</p>	<ul style="list-style-type: none"> • Broaden hospice organization footprint and align with pediatric medical community
		<ul style="list-style-type: none"> • Create customized education for families and practitioners • Establish baseline certifications and licensures for practitioners • Build virtual tools and curate online information • Offer 1:1 coaching to guide families and practitioners





In order to finalize this report, we need to challenge ourselves whether we are meeting the 'ask' from Public Act 24-19



Does our proposal (Phase 1 Framework Development) put us on the path to meeting this objective?



Your expertise and experience are key to ensuring quality; please carefully scrutinize this information and consider changes

Actively consult with others in your networks to confirm facts and data

Look ahead and consider the possibilities, ie, ignore the current state/status quo, and focus on a vision for a future program

Actively recommend edits to this report – don't hold back!

