

Understanding New Jersey's New Community Based Palliative Care Benefit

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Community Based Palliative Care is new benefit to all NJ Family-Care members. As of April 1, 2026, this new legislation enables Medicaid beneficiaries with serious illnesses to receive palliative care services. The program aims to support patients with serious illnesses by managing their symptoms and helping them navigate the complex healthcare system.

Distinguishing Palliative Care From Hospice Care

Although often used interchangeably, palliative care is distinct from hospice care. Palliative care is focused on improving quality of life for both the patient and family by providing relief from the symptoms and stress associated with illness (Center to Advance Palliative Care, n.d.). Community Based Palliative Care provides access to resources for patients living with serious illnesses including a care team of nurses, chaplains, doctors, mental health professionals and child life specialists. Unlike hospice which focuses solely on end-of-life, patients participating in this palliative care program can still receive cure directed treatment and do not need a terminal diagnosis to receive services.

Implications for New Jersey Nurses

Research suggests that nearly three-quarters of American adults have never heard of palliative care (Trivedi, 2019). This leaves New Jersey nurses uniquely positioned to bridge this gap, serving as advocates who can educate patients about the benefits of palliative care and connect them with this valuable new state resource. Beyond education, nurses can advocate for their patients by utilizing this simple screening tool to initiate a palliative care eligibility assessment. To qualify for this benefit, patients must have a diagnosis of a serious illness and show decline in quality of life. Clinically, nurses should look for patients who have a serious illness and meet at least one of the following triggers:

- Difficulty completing at least one Activity of Daily Living (ADL), such as bathing, dressing, or transferring.
- One or more hospitalizations within the past year.
- Two or more emergency department visits within the past six months.

Identifying these clinical triggers early ensures that we can quickly connect eligible patients with this vital service. As members of a deeply trusted profession, it is our responsibility to educate our patients about palliative care and empower them with the resources needed to enhance their quality of life.

References

- Center to Advance Palliative Care. (n.d.). What is palliative care? Get Palliative Care. <https://getpalliativecare.org/whatis/>
- Trivedi, N., Peterson, E. B., Ellis, E. M., Ferrer, R. A., Kent, E. E., & Chou, W. S. (2019). Awareness of Palliative Care among a Nationally Representative Sample of U.S. Adults. *Journal of palliative medicine*, 22(12), 1578–1582. <https://doi.org/10.1089/jpm.2018.0656>

Disclaimer and link to eligibility screening tool

"During the preparation of this work, the authors used generative AI to enhance clarity and structure of the article. After using this tool, the authors reviewed and edited the content as needed and take full responsibility for the content of the publication."

Link to eligibility screening tool https://www.nj.gov/humanservices/dmahs/documents/providers-stakeholders/NJ_CBPC_Program_Eligibility_Screening_Tool.pdf

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