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September 11, 2017

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**National Home Health Leaders Host Policy Summit in DC to Advocate for
Policies to Protect Medicare Home Health Benefit**

– Representatives from 20 states urge lawmakers to protect Medicare’s home health patients by withdrawing CMS’ Home Health Groupings Model and instituting a rural safeguard –

WASHINGTON, DC – With policy changes on the horizon that could significantly harm Medicare’s home health benefit through significant payment cuts, nearly 150 representatives from home health, hospice and homecare agencies across the country gathered in Washington today to ask lawmakers to support efforts to protect the approximately 3.5 million Medicare beneficiaries who depend on home health.

Sponsored by the Council of State Home Care Associations – which represents the nation’s homecare and hospice associations, and serves more than 15,000 agencies – today’s Public Policy Summit focused largely on the need for the Center for Medicare & Medicaid Services (CMS) to withdraw implementation of its proposal to overhaul the current payment system, called the Home Health Groupings Model (HHGM), as well as the need for Congress to reinstate a rural safeguard for 2018 and beyond.

“Our members have come to participate today bringing with them the concerns of thousands of caregivers from across the country,” said Tim Rogers, Chair, Council of State Home Care Associations. “While we are committed to caring for the growing number of Medicare beneficiaries who require our services, we know it will be that much more difficult if Congress fails to reinstate a rural safeguard for home health, and if CMS moves forward with its HHGM payment model.”

The HHGM payment reform approach has raised concern among home health providers because it was developed without input or comment from home health community leaders. Set to begin as early as 2019, the policy would completely overhaul the current home health payment system – causing enormous disruption and negative impacts on patient access.

“Not only does the HHGM approach dramatically alter Medicare payment amounts for skilled home health services in a non-budget neutral manner, it also bases payments on patient characteristics rather than expected care needs – and seriously undermines CMS’ efforts to reduce administrative burden by replacing the historically used 60-day episodes with 30-day ‘periods,’” said Vicki Hoak, Immediate Past Chair of the Council.

Analysts say that reimbursement cuts associated with HHGM will be unsustainable for many providers and create access to care barriers for vulnerable home health patients. Moreover, the redistribution of payments away from medically-necessary and cost-saving home health services – like physical, occupational and speech therapy – could ultimately result in higher Medicare costs as patients are forced to access institutional care rather than receive appropriate care in their own homes.

Participants in today’s summit also asked lawmakers to follow in the footsteps of their predecessors and extend the home health rural safeguard, which is set to expire December 31 of this year.

Medicare's home health rural safeguard was put in place in 2000 to ensure older Americans living in rural parts of America were not excluded from receiving home health, and thereby forcing patients to seek care in the hospital or physician office setting at a greater cost.

Because the cost of providing Medicare home health to patients in rural areas is significantly higher due to increased transportation and staffing costs, Medicare has historically provided the rural reimbursement safeguard – enabling home health agencies to reach patients, prevent hospital and nursing facility stays, and reduce Medicare costs.

“Today's outreach to lawmakers is extraordinarily important because, although federal policy continues to push more care into cost-effective settings like home health, policies like HHGM and expiration of the rural safeguard would result in the exact opposite,” added Rogers. “Delivering the type of quality care that Medicare beneficiaries desire in their homes depends on lawmakers' attention to these important issues that stand to dramatically alter America's home healthcare landscape.”

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The Council of State Home Care Associations is an organization of the associations representing homecare and hospice provider communities across the United States. Learn more at thehomecarecouncil.org.