



OAHC 2017 Federal Position Paper

The Oregon Association for Home Care (OAHC), in its effort to preserve access and quality of care in the delivery of home care, has identified the following Federal priorities for 2017 and beyond:

- **Oppose Home Health Grouper Model Proposed by CMS:**
CMS included implementation of a new payment system, the Home Health Groupings Model (HHGM) in their proposed payment rule for 2018. This would be a total overhaul of the payment system and included no input from stakeholders. CMS must withdraw this policy because they have not provided the complete data to accurately model or understand the impact of HHGM on patients or providers, an essential aspect of any public regulatory review. HHGM would redistribute Medicare payments unevenly across the system, and would put patient access to home health services at risk. If implemented, HHGM would significantly reduce Medicare reimbursement for home health services by as much as \$950 million in 2019 alone. Please contact CMS to ask them to remove the language implementing HHGM from the proposed rule and to engage in meaningful discussions with our industry before implementing this type of dramatic and problematic payment reform.
- **Protect Access to Home Health in Rural Areas – Support S. 353:**
Congress should permanently extend the longstanding Medicare rural add-on for home health services set to expire at the end of 2017. Oregonians in rural areas need access to home health services and the costs for these services are higher in rural areas primarily due to travel time. Rural home care brings great value to rural residents as it helps prevent the need for urgent care, inpatient hospitalizations and institutional care. Supporting the rural add-on is extremely important to rural Oregonians who rely on Medicare home health services.
- **Allow for Non-Physician Practitioners Certification Authority – Support S. 445/H.R. 1825:**
Oregon has a rich history of utilizing Nurse Practitioners and other Non-Physician Practitioners in delivery of care, especially in our rural areas. However, they are not allowed to certify Medicare beneficiary eligibility for home health services. We support the legislation to allow Non-Physician Practitioners to certify a patient’s eligibility for the Medicare home health benefit and authorize them to establish, sign and date the plan of care when permitted in states like Oregon.
- **Revise Face to Face Physician Documentation Requirements - Support H.R. 2663:**
CMS requires a Medicare beneficiary to see a physician for a face-to-face encounter to qualify for the home health benefit but relies solely on the documentation from the encounter to determine eligibility for the home health services benefit. OAHC supports legislation that would direct CMS to review the complete patient record including the Home Health Agency’s documentation and allowing CMS to resolve a backlog of claims appeals through a negotiated settlement rather than costly hearings before Administrative Law Judges.