

Congress of the United States
Washington, DC 20515

July 30, 2015

Dear Colleague,

Please join us in sending a letter to the Centers for Medicare & Medicaid Services (CMS) requesting careful reconsideration of two draft policy changes in light of their potential impact on homebound Medicare beneficiaries. Home health is a critical service that allows frail senior citizens and individuals with disabilities to receive the medical treatment they need in their homes without having to be placed in a more costly healthcare setting.

Earlier this month, CMS issued the Home Health Prospective Payment System (HHPPS) proposed rule for 2016. Two concerning elements of the rule are the 1.72 percent “case mix” cut in 2016 and again in 2017, and the nature of implementation for the incentive/penalty range for the proposed Home Health Value Based Purchasing (HHVBP) program. These changes are of concern for several reasons:

Case Mix Cut: The cut appears to be based on an outdated data analysis of 2000 to 2010 changes in case mix weights, rather than on the medical condition of home health beneficiaries during the relevant 2012 to 2014 period when the average case mix weights increased. This reduction is in addition to the 4-year, 14 percent rebasing adjustment in effect from 2014 through 2017 and which CMS itself has publicly reported will cause “approximately 40 percent” of all home health agencies (HHAs) nationwide to operate at a loss on or by the end of 2017.


Home Health Value Based Purchasing (HHVBP): The draft rule creates a mandatory HHVBP program in nine states with a proposed payment withhold adjustment increasing from 5 to 8 percent over a 5-year period. This range and timing of adjustments are significantly more aggressive than other VBP programs implemented by Medicare. Given the other pressures faced by HHAs, this has the potential to jeopardize access to care. HHAs will most likely be subject to payment penalties without the time or resources to meet the long list of 25 performance improvement measures.

The draft HHPPS rule’s proposed case-mix cut and the nature of HHVBP implementation could exacerbate the weakened fiscal environment in which providers are already working, impacting the care upon which some of the most vulnerable Medicare beneficiaries depend.

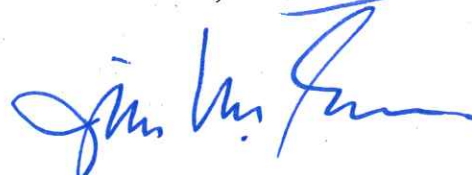
Please contact Kristen Shatynski with Rep. Greg Walden to add your name to the letter to CMS. She can be reached at kristen.shatynski@mail.house.gov or 202-225-6730. **The deadline to sign on is Wednesday, September 2, 2015.**

Sincerely,


Greg Walden


Tom Price, M.D.


Earl Blumenauer


James P. McGovern