

DEAR COLLEAGUE

DO NOT COMPROMISE SENIORS / VETERANS ACCESS TO HOME HEALTH CARE
URGE CMS NOT TO FINALIZE THE PROPOSED HOME HEALTH GROUPINGS MODEL
(HHGM)

DEADLINE: OCTOBER 20, 2017 – COB

Sending Office: Honorable Ralph Abraham, MD, and Honorable Terri Sewell

Dear Colleague,

Please join us in sending a bipartisan letter urging HHS Acting Secretary Don Wright, MD, MPH and CMS Administrator Seema Verma to not finalize the calendar year (CY) 2019 Home Health Groupings Model (HHGM) in the proposed CY18 Home Health Prospective Payment System rule.

Home health care is a critical service that allows over 3.5 million patients to be treated in the cost-effective setting they prefer most – their homes. CMS is proposing to cut Medicare payments to home health providers, impacting millions of patients' access to care, by completely overhauling the payment system with the so-called Home Health Groupings Model (HHGM). Implementation of this proposal would result in a cut to home health providers by an estimated \$950 million in Medicare payments in 2019 alone.

The HHGM proposal would significantly redefine the Medicare home health benefit, imposing a 15% reduction in payment levels and an untested, wholly revised case mix adjustment model. If implemented, HHGM will create unnecessary barriers to care, and diminish the value that home health services bring to the Medicare system and the seniors who rely on them.

Home Health patients' access to care will be jeopardized if the HHGM is not withdrawn from the proposed rule by October 31.

There are significant revisions that must be made to the HHGM for it to be a workable payment model. The current proposal is missing key data elements and thus it is impossible to measure impacts. We invite you to join us in urging HHS and CMS to not finalize the HHGM policy and instead work with patients, providers and stakeholders in a more inclusive, transparent process to produce an alternative that does not limit beneficiary access or unfairly diminish provider resources.

If you would like to sign this letter, or have any questions, please reach out to Heinz Kaiser (Abraham) or Hillary Beard (Sewell).

Thank you for your consideration.

Sincerely,
Ralph Abraham, Member of Congress

Terri Sewell, Member of Congress

Dear Acting Secretary Wright and Administrator Verma:

We write today regarding the calendar year (CY) 2019 Home Health Groupings Model (HHGM) that is included in the CY2018 Home Health Prospective Payment System proposed rule published in the Federal Register on July 28, 2017. Specifically, we ask that the Centers for Medicare and Medicaid Services (CMS) refrain from finalizing the proposed HHGM until affected stakeholders can fully analyze and understand the impact of the proposed changes.

Home health is a critical and cost-effective service for our constituents and the millions of seniors and people with disabilities who rely on it for treatment and high-quality care in the environment they prefer –their home.

We have heard from a number of stakeholders who are concerned that the proposed rule lacks key methodology and data points. Complete information is essential for home health agencies to be able to accurately estimate the impact of the proposed HHGM on patient access and provider resources. It is essential that those most affected by the proposed rule have the opportunity, as well as the necessary information, to evaluate any consequences prior to the CMS finalizing the proposed reforms.

According to CMS estimates, the HHGM model and other changes included in the proposed rule are not budget neutral and could reduce Medicare reimbursements for home health services by as much as \$950 million in 2019 alone. While we support efforts to increase efficiencies in Medicare, we believe this must be done in a prudent manner that does not compromise access to care for the increasing number of seniors and veterans who depend on these services to remain healthy and at home in their communities.

We agree and share CMS' stated goal of more closely aligning home health reimbursements with the patients' clinical needs. To that end, we ask that CMS not include the HHGM proposal in its final CY 2018 Home Health Prospective Payment System rulemaking and instead work with relevant stakeholders, including home health agencies, providers and patient groups, in a more inclusive process as you develop and implement payment reforms.

Thank you for your attention to this matter and we look forward to working with you on these important matters.