

PDGM
Support the Home Health Payment Innovation Act of 2019 – (S. 433/H.R. 2573)
Sample Telephone Script

(Add any agency specific details on how PDGM and the behavioral assumptions calculation will affect your agency, staff and patients).

Caller: Hello, my name is _____ and I am a constituent of (Congressman _____ /Senator _____). I am calling to request support for the Home Health Payment Innovation Act of 2019 (S. 433/H.R. 2573) which is bipartisan legislation that would protect access to Home Health care and require CMS to rely on actual claims data before imposing cuts to Home Health providers.

Missourians want to age in their own homes and communities, where they can maintain their independence, dignity, and spend time with family and friends. Not only does Home Health care allow this, it also **saves taxpayers billions of dollars by avoiding more costly institutional settings and preventing many patients from being re-hospitalized. Your constituents deserve better than being forced to receive needed care in a hospital or nursing home or worse yet, go without care as many home health agencies will be forced to close under the new payment model. You must stand up today for Missourians and protect the home health benefit and providers of home health services.**

The Bipartisan Budget Act of 2018 (BBA of 2018) made a series of reforms to the home health payment structure including establishing the Patient-Driven Groupings Model (PDGM) which is the most significant change to the home health payment system **EVER**. When implementing the BBA of 2018, the steps the Centers for Medicare and Medicaid Services (CMS) took in rulemaking to implement the home health provisions included large reductions in payment due to **assumptions**, without real-world evidence, about how home health agencies may change billing under the new payment model. These “assumptions” result in a 6.42% off the top cut to home health payments for 2020. The changes to home health payment required by the BBA of 2018 were not intended to create significant cuts in 2020. It is interesting to note that when the Skilled Nursing Facilities payment rules were finalized, CMS stated that they did “not have any basis on which to assume the approximate nature or magnitude of these behavioral responses.” It is wildly inconsistent for assumptions to be made about one provider type, but not another.

This new payment model with the substantial “assumptions” rate cut will create great upheaval and instability for home health providers and will negatively impact Medicare beneficiaries’ access to care and more importantly, their choice to remain at home and in their communities.

This bipartisan legislation seeks to provide stability for home health patients and providers while reforms are being made to the Medicare Home Health benefit. It would remove CMS’s ability to make rate adjustments based upon assumptions of provider behavior, and instead require that rate changes be based on **actual observed evidence**. It would also require changes to be phased in by equal amounts. This adds another element of stability through payment reform. The legislation is designed to maintain budget neutrality over a 10-year period.

Please support and cosponsor S. 433/H.R. 2573 and help to protect Missouri’s Home Health beneficiaries and providers. We are counting on your support!

Thank you for your consideration.

(If you do not get to speak directly with your Representative or Senator, please let them know you plan to follow up on this issue). For example:

Caller: I am interested in the Representative’s/Senator’s position on these proposed cuts to Home Health providers and would like to hear back from them. My phone number is _____

- **Tips when phoning your legislators:**

- * Introduce yourself
- * Think about what you want to say (have list of talking points)
- * Refer to issue you are calling about
- * Don’t ramble in your conversation
- * Don’t forget to ask for their position on the issue