

Dear Secretary Price and Administrator Verma:

We are writing with regard to the calendar year (CY) 2019 Home Health Groupings Model (HHGM) that is included in the CY 2018 Home Health Prospective Payment System proposed rule, published in the Federal Register on July 28, 2017. We ask that the agency not move forward with the proposed HHGM model until affected stakeholders can fully analyze and understand the impact of the proposed changes.

Home health is a critical service for our constituents and the millions of seniors and people with disabilities on Medicare. It allows patients to receive quality care in the location they most prefer – the comforts of their own home. We have heard from a number of stakeholders who are concerned that the proposed rule lacks sufficient information and data points to allow home health agencies to accurately estimate the impact of the proposed HHGM prior to the September 25, 2017 comment deadline. It is important that those most affected by the proposed rule have the opportunity, as well as the necessary information, to evaluate any consequences prior to the Centers for Medicare and Medicaid Services' (CMS) finalizing the proposed reforms. According to CMS estimates, the HHGM model and other changes included in the proposed rule that are scheduled to take effect in CY 2019 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 who depend on these services to remain healthy and at home in their communities. As such, we also ask for the following questions to be answered:

1. Does CMS plan to provide the data used to determine the cost estimates of the HHGM to home health providers before the September 25th comment deadline?
2. If so, when will that information be made available?
3. If not, what is the rationale for not providing that information?

We concur with and share CMS' stated goal of more closely aligning home health reimbursements with the patients' clinical need. 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 and providers, and patient groups, 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.