



April 11, 2022

Chiquita Brooks-LaSure  
Administrator  
Centers for Medicare & Medicaid Services  
Attention: Document Identifier/OMB Control Number: CMS-10545  
Room C4-26-05  
7500 Security Boulevard  
Baltimore, MD 21244-1850

*Submitted electronically*

RE: Agency Information Collection Activities: Proposed Collection; Comment Request; CMS-10545  
Outcome and Assessment Information Set OASIS-E

Dear Administrator Brooks-LaSure:

LeadingAge appreciates the opportunity to provide feedback regarding the Centers for Medicare & Medicaid Services (CMS) request for the Office of Management and Budget (OMB) approval to modify the Outcome and Assessment Information Set (OASIS) that home health agencies are required to collect in order to participate in the Medicare program.

The mission of LeadingAge is to be the trusted voice for aging. We represent more than 5,000 nonprofit aging services providers and other mission-minded organizations that touch millions of lives every day. Alongside our members and 38 state partners, we use applied research, advocacy, education, and community-building to make America a better place to grow old. Our membership encompasses the entire continuum of aging and disability services. We bring together the most inventive minds to lead and innovate solutions that support older adults wherever they call home.

LeadingAge supports the principles of the Improving Medicare Post-Acute Care Transformation Act of 2014 (the IMPACT Act) including the standardization of information collection across post-acute care provider settings. The implementation of OASIS-E will bring the current home health assessment tool in line with the principles of the IMPACT Act. We strongly supported CMS' decision to delay the implementation of OASIS-E to provide maximum flexibilities for providers of home health agencies to respond to the COVID-19 Public Health Emergency. However, the COVID-10 public health emergency remains in place and the strain of the pandemic has continued to impact home health agency operations including a significant burden on staffing which will have a negative impact on this instrument's implementation.

The data on workforce that is used to justify the changes to OASIS-E are out of sync with the current staffing realities for home health agencies. CMS' supporting documents state that registered nurses (RNs) complete 76% of the OASIS assessment. The Bureau of Labor Statistics data used in CMS'

supporting statement cite RN hourly wages as \$38.47, but the reality is that many agencies are struggling to hire and retain RN staff at this or even significantly higher wages. This dynamic is forcing agencies to pay for more costly traveling nurse services to meet the daily demands of patient care. According to Nursing Process, travel nurses earn an average of \$56.49 an hour, considerably more than CMS' assumption of staff costs and create an unrealistic burden for agencies to implement OASIS-E.<sup>1</sup> Additionally, burnout and stress continue to add significant strains on existing nurses with more than one-third of nurses in a recent survey saying it is very likely they will leave their role by the end of 2022.<sup>2</sup> Regardless of the factors driving the current shortage, the United States is on track to have a shortage of 3.6 million nurses for 82 million aging adults due to demographics by 2030.<sup>3</sup> Due to these factors, it is likely that this average wage has increased since the staffing shortages continue to get worse.<sup>4</sup>

The lack of RNs and the need to pay more for the ones that exist while concurrently rebuilding census creates uncertainty for home health agencies. Agencies also have two major structural changes coming up --- OASIS-E and Home Health Value Based Purchasing (HHVBP). In the CY 2022 Final Home Health Rule, in addition to finalizing the implementation of OASIS-E for CY 2023, CMS also finalized the expansion of the Home Health Value Based Purchasing program nationwide for the same calendar year. This demonstration achieved considerable savings to the Medicare program and the successful implementation of this demonstration should be the primary focus of home health agencies for the following calendar year. Delaying the implementation of OASIS-E for an additional year will have no negative impact on the demonstration's expansion as the OASIS data being collected for the expansion is not based on the new OASIS-E items. Home health agencies are spending as much time as possible given the nurse staffing shortages, to train staff on current OASIS items which will be used in for Home Health Value-Based Purchasing scoring.

LeadingAge urges CMS to delay the OASIS-E tool for CY 2023 implementation and instead implement the tool after the first full year of the Home Health Value Based Purchasing program, CY 2024. An additional year delay will allow home health agencies to focus on the successful implementation of Home Health Value Based Purchasing while also allowing time for agencies to adjust to the new staffing normal.

Thank you for considering the feedback in this letter. If you have any questions, please don't hesitate to contact us to discuss these comments further.

Sincerely,



Katy Barnett  
Director, Home Care and Hospice Operations and Policy  
LeadingAge  
[kbarnett@leadingage.org](mailto:kbarnett@leadingage.org)

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<sup>1</sup> Nursing Process. *2022 Travel Nurse Salary + Job Outlook*. <https://www.nursingprocess.org/travel-nurse-salary/>

<sup>2</sup> Incredible Health. *STUDY: 34% of Nurses Plan to Leave their Current Role by the End of 2022*.

<https://www.incrediblehealth.com/blog/nursing-report-covid-19-2022/>

<sup>3</sup> American Association of Colleges of Nursing. *Fact Sheet: Nursing Shortage*. <https://www.aacnnursing.org/news-information/fact-sheets/nursing-shortage>, U.S. Department of Health and Human Services, *Supply and Demand Projections of the Nursing Workforce: 2014-2030*. <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/nchwa-hrsa-nursing-report.pdf>

<sup>4</sup>Kaiser Health News. "Pandemic Fueled Home Health Care Shortages Strand Patients."

<https://khn.org/news/article/pandemic-fueled-home-health-care-shortages-strand-patients/>