

Home Health and Hospice Weekly Recap

March 12th, 2021



From the Hill and the Administration

- 1) **Update on American Rescue Plan.** On Thursday March 11th, a day earlier than anticipated, President Biden signed the \$1.9 trillion American Rescue Plan into law – one of the largest stimulus plans in American history. We posted two articles on the provisions of the bill that are especially important for LeadingAge members bill ([one general](#) and one specifically on [HCBS](#) and other provisions). The Senate Democrats published an estimate of how much money states, counties, cities, towns and other jurisdictions are projected to get under the new COVID relief package. You can see those estimates on the excel file at the following link: <https://www.democrats.senate.gov/final-state-and-local-allocation-output-030821>. Your hometown is probably in this spreadsheet!
 - a. The 8.5 billion dollar additional rural provider relief fund includes language that specifically says that home health, hospice, and long term services and supports providers that serve individuals in their homes that are in a rural area can qualify for provider relief funds that are directed at rural providers. LeadingAge advocated for this change when the rural provider relief fund language was added to the bill in the Senate.
- 2) **Nursing Home Visitation Guidance Updated: Key Points for Hospice and Home Health.** Today, CMS released [QSO 20-39-NH](#) revising visitation guidance for nursing homes. Read our summary [here](#). The guidance allows nursing homes to expand visitation options in a safe and responsible manner, regardless of vaccination status of the resident or visitor. CMS has outlined certain scenarios that would limit visitation using community positivity rates and nursing home resident vaccine percentages. In the past few weeks, LeadingAge has advocated for changes in visitation. In response, CMS stated they were collaborating with CDC on reviewing vaccination data and the decline of community positivity rates in order to revise visitation guidelines. We are pleased to see the updates to indoor and outdoor visitation but know nursing homes will need to emphasize the importance of infection control protocols and continued testing.

We hope this guidance is helpful as you support family members who may have been previously restricted from visiting their family members in nursing homes resume visitation. We also note that there is also a re-emphasis on compassionate care visitation procedures. We are hopeful that this guidance is helpful for hospice providers as they think about their inpatient units and visitation in light of vaccinations. There is no change in the testing guidance for nursing home staff so hospice and home health staff treating patients who reside in nursing homes will still have to follow testing requirements.

- 3) **New CDC Guidance.** Concurrent with the new guidance from CMS, CDC also updated [guidance for infection prevention and control recommendations in healthcare settings](#). We note that the guidance on visitation is consistent with CMS's visitation guidance to nursing homes. Additionally, CDC has updated recommendations for work restrictions and quarantine following exposure for fully-vaccinated individuals. *Critically for hospice and home health providers,*

healthcare personnel are no longer required to be restricted from work. This is a change from the previous recommendation that healthcare personnel were exempt from work restrictions in cases of staffing shortages only. Additionally, CDC no longer recommends quarantine for fully vaccinated residents being admitted to nursing homes provided they have had no close contact with anyone with COVID-19 infection in the past 14 days. This quarantine guidance also applies to hospice inpatient facilities and to hospice patients who may be admitted to a nursing home.

- 4) **Continued work with the CDC and White House Letter.** We continue to meet with the CDC to emphasize the need for vaccine access for home health and hospice staff who have not had access to date as well as the people they serve. We discussed options for mobile vaccination units and mechanisms that our members could be involved in vaccinating their own patients and other homebound older adults. [We also sent a letter to Dr. Cameron Webb](#), a White House advisor on COVID-19 and equity that included these points. The CDC remains engaged with us about how to operationalize these ideas and we hope to have more concrete updates soon.
- 5) **Preventing Medicare payment cuts.** [H.R. 1868](#) will 1) extend the Medicare sequester moratorium through December 2021 and 2) Prevent mandatory cuts (known as “PAYGO” or pay as you go) due to budget rules triggered by the reconciliation process that would include a further 4% Medicare spending sequestration was introduced by House leadership on Friday March 12th. Watch for an action alert on Monday March 15th to encourage your members of Congress to take action on this critical bill before April 1st when the sequester moratorium ends. We also signed onto a letter to Congressional leadership from a variety of health care groups urging Congress to pass this legislation as soon as possible.
- 6) **Medicare Hospice VBID Demonstration 2022 Webinar.** The [Medicare Advantage Value-Based Insurance Design \(VBID\) Model](#) team will host a webinar on Wednesday, March 17, 2021 from 4:00 - 5:00 PM EDT. During this webinar, presenters will provide a review of the Calendar Year 2022 payment design related to the Hospice Benefit Component of the VBID Model. This session will also offer attendees an opportunity to ask follow-up questions. Please submit questions in advance by emailing the VBID Mailbox at VBID@cms.hhs.gov.

LeadingAge Events and Resources

1. **LeadingAge partnering on national home health and hospice study.** LeadingAge is joining forces with others in the field to co-sponsor the [2021 National Healthcare at Home 2021 Best Practices and Future Insights](#). Designed to produce insights that will ensure quality, outcome-driven care in the new reform environment, the research project aims to help identify clinical and operational best practices for care and training that agencies can implement to position themselves for future success.
2. **Upcoming Life Safety Webinar for Hospice Providers.** The *Life Safety and Emergency Preparedness: Post-COVID Compliance* webinar is now live for registration on the LeadingAge Learning Hub!
[Life Safety and Emergency Preparedness: Post-COVID Compliance](#), Thursday April 8 at 2 p.m. ET

This Webinar details current life safety and emergency preparedness challenges nursing home and hospice providers should plan for as they return to pre-pandemic operations.

- Consider approaches to sunseting 1135 waivers for alarm and fire suppression system testing, emergency storage, emergency preparedness education for staff, and other changes that will expire after the national emergency declaration ends.
- Learn about trends in survey citations and hot-button issues that may arise when regular life safety surveys resume.
- Receive a template to help you document your organization's COVID-19 response as an official emergency preparedness drill to meet federal survey disaster planning requirements.

Link for more information: <https://learninghub.leadingage.org/courses/life-safety-and-emergency-preparedness-post-covid-compliance>

3. **Medicare Part B Rate Calculator Available.** The member-only Medicare Part B rate calculator is now available [here](#). The tool allows a member to identify their location specific rates for Part B services including therapy. It accounts for the rate changes from the year-end legislation that increased rates from those published in the final rule.

Other items of interest

1. **New report from PHI offers comprehensive look at direct care workforce.** Today, PHI released "[Caring for the Future: The Power and Potential of America's Direct Care Workforce.](#)" PHI developed the report because 2020's two large scale challenges – the pandemic and the need to address the consequences of gender and racial disparities on direct care workers – brought issues related to the LTC workforce to the fore. The report presents a statistical overview of the demographics, socio-economic characteristics and employment projections for this workforce; in addition, it describes the changing role of aging services workers in home care, residential care, and nursing homes. Did you know 24% of all direct care workers are over age 55? Or that 42% require some form of public assistance? The report goes on to present the case for LTC financing reform, beginning with the premise that Medicaid is not the answer. It presents ideas to elevate the role of direct care workers, emphasizing training, upskilling, career ladders, and integration with care teams. It provides details on the quality of LTC jobs. PHI offers eight key areas of recommendations, beginning with LTC financing reform. Many of these recommendations align with LeadingAge's priorities and goals.