

MEDICARE HOME HEALTH

ENSURE ACCESS TO MEDICARE HOME HEALTH

Recent policy actions do not align with Medicare beneficiaries' preference to age in place. Medicare home health payments have been cut by almost 10% over the past two years. On top of these cuts, CMS has made clear that billions of dollars of additional cuts are on the horizon.

Access to home health services already suffers from referral rejections caused by budget cuts and is compounded by staffing shortages. This trajectory is untenable for older adults and families—and unsustainable for our nonprofit and mission-driven providers. Relief is needed.

ENACT THE PRESERVING ACCESS TO HOME HEALTH ACT OF 2023 (H.R. 5159 / S. 2137) TO:

- Ensure access to home health services by repealing the requirement that CMS adjust aggregate payment based on provider behavior. The bill instructs MedPAC to review and report on payment trends under Medicare Advantage, Medicaid, and other payers.

ENACT THE MEDICARE HOME HEALTH ACCESSIBILITY ACT (H.R. 7148) TO:

- Change the statutory language defining skilled needs for home health providers to align with other therapies and include occupational therapy as a qualifying home health service.

INSTRUCT MEDPAC TO EXAMINE HOW TO REDEFINE ACCESS:

- The current definition is based on the number of providers per zip code and is not consistent with the current reality—referral rejections are at an all-time high. We recommend looking at referral rejections and whether certain conditions or demographics are correlated with less access to care.

REINSTATE THE RURAL ADD-ON PAYMENT TO:

- Give additional reimbursement to home health providers in rural areas and to explore similar targeted payment adjustments for other underserved populations.

ALLOW TELEHEALTH REIMBURSEMENT AND AMEND PAYMENT POLICY:

- Allow for telehealth reimbursement in home health settings without reducing overall payments.
- Amend payment policy to allow for aides to be utilized as intended under the benefit. Aides are a vital component of home health care, but downward trends in payment and increased scrutiny on aide utilization makes it challenging for providers to use aides.