

2023 NAHC Legislative Priorities



Since 1982, the National Association for Home Care & Hospice (NAHC) has been the leading association representing the interests of home health, hospice, and home care providers across the nation, including the home caregiving staff and the patients and families they serve. Our members are providers of all sizes and types – from small rural agencies to large national companies – including government-based providers, nonprofit organizations, systems-based entities, and public corporations.

Throughout the COVID-19 Public Health Emergency, home care and hospice providers stood ready and answered the call to provide high-quality care in the safest setting for the most vulnerable among us. However, over the past three years historical home care workforce shortages were amplified, new challenging payment methodologies were implemented, and oversight concerns emerged. These issues need attention from various governmental bodies to stabilize and protect integral benefits and services. NAHC and its members continue to be willing and engaged partners in addressing these challenges providing the expertise, insight, and real-world experience needed for the optimal outcome.

The NAHC Legislative and Regulatory Priorities for 2023 address issues related to workforce, home health, hospice, home care, and innovation. The priorities highlight the areas needed for Congressional and regulatory action to support and expand care in the home. The proposed priorities aim to improve access to high-quality care, reduce costs, and address workforce shortages to better meet the needs of patients and their families.

These priorities were identified to address previous actions that hold direct impact on the home care and hospice community, as well as forward-looking policies designed to position providers for stability and growth in the future through payment methodology reforms, workforce competition improvements, and benefit enhancements.

The legislative priorities identified in this document were selected from the larger [NAHC Regulatory Blueprint for Action](#) reviewed and approved by the NAHC Board of Directors.

WORKFORCE

Support Proposals that will Supply a Qualified, Stable, Direct Care Workforce for Long-term Care Consumers

The workforce shortage has reached crisis proportions and is only expected to worsen as the demand for workers is accelerating at an unsustainable pace. Currently, home care providers are reporting having to turn down nearly half of people seeking care. People turning 65 today have a nearly 70 percent chance to require long-term services and supports. Recent data suggest that the caregiving workforce needs to grow by some 8.2 million jobs to accommodate future needs. Congressional intervention is necessary to attract more young people to the industry, both those that are currently in the US as well as those that are interested in coming to the US. Immigration policies should provide a portal for qualified foreign-born individuals.

Require Medical Residents and Other Professional Licensed Staff to Have Home Care and Hospice Experience as Part of their Education

Currently, very little, if any, home care focused curriculum is included in educational paths for Medical Residents, RNs, and other professional licensed staff, leaving much to the imagination of those entering the industry to what it truly means to work in home care. Home care practitioners report high levels of satisfaction in their work, citing things like the ability to give all their attention to one patient at a time to flexible scheduling, allowing them to have much higher levels of work/life balance. Requiring home care and hospice experience during the early part of their education would make the home care industry far more attractive to these professionals.

Provide Sufficient Home Care and Hospice Payments so That Agencies can Provide Appropriate Wages and Benefits to Caregiving Staff

Medicaid reimbursement rates have never kept pace with wage inflation, resulting in home care aides/direct care workers leaving the industry for jobs in retail, hospitality, and similar sectors that are paying well above minimum wage. A recent direct care workforce report shows that caregivers are seven times more likely to live in the poorest income category versus the average US population. Without adequate reimbursements to home care and hospice, this critical level of care professional is seeking employment elsewhere, even if they would prefer to stay in home-based care.

Ensure Availability of Home Care and Hospice Personnel to Meet the Growing Needs of the Baby Boom Generation, Particularly in Rural, Inner City, and Other Underserved Areas

Accessing health care has long been a challenge for those in rural, inner city, and other underserved areas. As the first line of defense, home care providers have the greatest opportunities to reach these vulnerable individuals, making these providers possibly the most critical component in achieving care. Emphasis must be placed on excellent training for home care direct care workers. Additionally, they must be equipped with the best tools to do their jobs, such as technology and access to a reliable network infrastructure.

Support Efforts to Meet the Growing Need for Trained Palliative Care Professionals

There is a huge gap between the demand for high-quality palliative care across health care settings, and the supply of adequately trained professionals capable of delivering this type of person-and-family centered care focused on pain and symptom management for the seriously-ill. Congress should finally pass the *Palliative Care and Hospice Education and Training Act* (PCHETA) to help alleviate some of these workforce and skills shortages. PCHETA, which has garnered bipartisan support in numerous past Congresses, would provide funding to train physicians through palliative care academic career development awards, provide career incentive awards for nonphysician clinicians, such as nurses, who commit to practicing and teaching palliative care, as well as funding for training centers to provide short-term, intensive training to build both clinical and educational skills in caring for people with serious illness.

HOME HEALTH

Ensure that Medicare Home Health Payment Model Revisions Provide Fair and Reasonable Reimbursement to Maintain Access to Care

Medicare Home Health has faced a series of payment rate cuts, most recently behavioral assumption and budget neutrality cuts as part of the transition to the Patient Driven Groupings Model (PDGM). Congressional intervention is needed to end CMS's rate cutting practices and bring stability to home health providers.

Ensure Adequate Reimbursement from Medicare Advantage Plans for Home Health Services

Many MA plans reimburse on a per-visit basis, as opposed to episodic. Per-visit rates often do not cover the full cost of care. In addition, claim denials are common and are typically overturned on appeal while costing the home health agency in the meantime. Reforms are needed for adequate reimbursement and reductions in inappropriate claim denials.

Pursue Market Basket Update Reforms that Better Reflect Actual Costs of Providing Care

CMS's Market Basket updates are simply inadequate and not reflective of the costs of providing high-quality care, staying competitive in the labor marketplace, and the realities of operating a business.

MEDICAID/PRIVATE DUTY

Support Tax Incentives for Family Caregivers

AARP estimates that in 2021 unpaid family caregiving totaled \$600 billion. For many family caregivers little support currently exists. Congress should provide incentives for family members who help shoulder the burden of providing care for a loved one. Such incentives will encourage the utilization of cost-effective home care services for those in need.

Ensure Appropriate Medicaid Rates for Home Care and Hospice

Medicaid plays an increasingly important role in providing coverage of home care and hospice services to children, the disabled, and the elderly. Data indicates that Medicaid expenditures for home care and hospice services already exceed Medicare expenditures. Reimbursement rates have failed to keep pace with increasing costs of care, and, in some cases, they have been subject to reduction for purely budgetary savings purposes.

HOSPICE

Enact Hospice-Specific Program Integrity & Compliance Measures

In response to recent reports identifying quality of care and compliance concerns in select hospice programs, including the proliferation of potential problem providers in certain western states, Congress should enact a hospice-specific compliance package targeted to hospices that have demonstrated questionable practices.

Protect Integrity of the Medicare Hospice Benefit by Averting Major Payment Cuts or Structural Changes That Will Reduce Access to Care

The hospice benefit has undergone significant changes in recent years, and hospice providers have been subject to severe financial strains as the result of increased regulatory requirements, dramatic workforce shortages, the impact of the COVID-19 PHE, and rapid inflation. Additionally, [new research](#) released in 2023 from NORC at the University of Chicago has demonstrated that utilization of the hospice benefit is associated with billions of dollars in savings to the Medicare program. Congress

should oppose reductions in the annual payment update or any other major payment system changes (including a cut to the hospice aggregate cap), and instead work to advance policies that support more timely access to hospice for eligible patients facing a terminal illness.

Ensure Accessibility and Promote Use of Advance Care Planning Counseling, Advance Directives, and Other Advance Care Planning Documents

A key problem in hospice care is that a large proportion of patients elect hospice care too late to reap the full benefits that the benefit supplies to beneficiaries and their family members. To help improve patients' understanding of their care options, Congress should expand opportunities for advance care planning activities, including ensuring that all appropriate disciplines (including clinical social workers) are able to be reimbursed to perform such services, removing cost-sharing under Medicare for advance care planning, ensuring advance care directive reciprocity across states, mandating the development of standards for advance care plan inclusion in and portability across electronic health records, and supporting a broad public awareness campaign.

INNOVATION

Establish New Home- and Community-based Palliative Care Delivery and Payment Demonstration to Address the Needs of Seriously-ill Medicare and Medicaid Patients

Palliative care is interdisciplinary patient and family-centered care that optimizes quality of life. It is appropriate at any age and any stage in a serious illness, and involves addressing physical, intellectual, emotional, social, and spiritual needs. Despite the proven impact it has on patient and family wellbeing, and its ability to reduce health care spending associated with unnecessary acute care utilization, the lack of a predictable and sustainable payment mechanism has limited community-based palliative care's development and reach across the country. As the population continues to age and people live longer with serious and chronic illnesses, innovative delivery and financing models are needed to increase access to community-based palliative care's many benefits.

Incentivize Home Health and Hospice Interoperability and Establish Standards to Facilitate Data Exchange with Hospitals, Physicians, and Other Provider Types

Home health and hospice agencies operate in environments demanding the use of IT solutions to manage

patient care, report claims data, and coordinate care with other providers. The recent focus on collection and measurement of metrics, and a shift towards value-based care models increase the responsibilities of home health and hospice agencies to respond to data management trends. Congress needs to make meaningful investments in EHR interoperability and standards.

Support Home-Based Alternatives to the Medicare Skilled Nursing Facility Benefit

The COVID-19 PHE demonstrates the need to develop and implement new care delivery models that would provide additional services and supports to meet the needs of patients in their home.

Remove Barriers to the Use of Remote Patient Monitoring and Telehealth Services in the Home

Telehealth use in the home has proven to be a valuable tool in meeting patient need in a timely manner while reducing cost. Congressional action is needed to ensure robust telehealth access within the Medicare home health benefit.