December 15, 2010

Donald Berwick, MD
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Ave, SW
Washington, DC 20201

Dear Dr. Berwick,

We are writing to you on behalf of Medicare beneficiaries who will be adversely impacted by provisions requiring a face-to-face encounter for physician certification for home health and hospice services. These new requirements, included in the Medicare Home Health PPS Update for 2011; Changes in Certification Requirements for Home Health Agencies and Hospices (CMS-1510-P), are scheduled to go into effect on January 1, 2011. Homebound and highly vulnerable elderly and disabled Medicare beneficiaries will be denied Medicare coverage for vital home health and hospice services unless they have a qualifying encounter and the physician complies with the extensive documentation.

We understand that these requirements are intended to prevent waste, fraud and abuse of the Medicare home health and hospice benefits. However, it is anticipated that patients could lose access to services or experience unacceptable delays if CMS does not provide a transition period of at least 6 months. A transition period of at least 6 months is needed for several reasons.

- First, a concerted outreach and educational effort needs to be undertaken to educate physicians and other health care professionals involved in home health and hospice care of their new responsibilities.

- Second, beneficiaries need to understand the new rules as the CMS publication, Medicare & You 2011, designed to educate beneficiaries and caregivers, does not address the requirement for a face to face encounter.

- Third, the transition provides time for CMS to monitor for compliance, provide notice of noncompliance, and make appropriate changes in instructions and guidelines where needed. Noncompliant claims should not be denied payment until successful completion of the transition period to be certain that bona fide patients do not lose access to care because they and their physicians are not aware of or fully understand these new and complex requirements.
In conclusion, a transition period of at least 6 months is needed, without penalties for home health and hospice patients and providers, to allow time for physicians and other health care providers, caregivers and beneficiaries to learn the new rules and for CMS to work out operational issues.

We appreciate your attention to this urgent matter.

Sincerely,

Alzheimer’s Association
American Academy of Nurse Practitioners
American Association of Homes and Services for the Aging
AARP
American Association of Service Coordinators
American College of Nurse Practitioners
American Federation of Teachers
American Geriatrics Society
American Hospitals Association
American Nurses Association
B’nai B’rith International
Catholic Health Association of the United States
Gerontologic Advanced Practice Nurses Association
Jewish Federations of North America
Lutheran Services in America
Military Officers Association of America (MOAA)
National Alliance for Caregiving
National Association of Area Agencies on Aging
National Association for Home Care and Hospice
National Association of Nutrition and Aging Services Programs
National Association of Nurse Practitioners in Women’s Health
National Association of Pediatric Nurse Practitioners
National Association of Social Workers
National Center on Caregiving-Family Caregiver Alliance
Visiting Nurse Associations of America (VNAA)
Wider Opportunities for Women (WOW)