



AMERICAN ACADEMY OF  
HOSPICE AND PALLIATIVE MEDICINE

*Submitted electronically via [www.regulations.gov](http://www.regulations.gov)*

August 31, 2018  
Seema Verma, MPH  
Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
7500 Security Boulevard  
Baltimore, MD 21244-1850

**RE: Medicare and Medicaid Programs; CY 2019 Home Health Prospective Payment System Rate Update and CY 2020 Case-Mix Adjustment Methodology Refinements [CMS-1689-P]**

Dear Ms. Verma:

On behalf of the more than 5,000 members of the American Academy of Hospice and Palliative Medicine (AAHPM), thank you for the opportunity to comment on CMS's recent proposed rule that would update home health payments and policies for calendar year (CY) 2019. AAHPM is the professional organization for physicians specializing in Hospice and Palliative Medicine. Our membership also includes nurses, social workers, spiritual care providers, and other health professionals deeply committed to improving quality of life for patients facing serious illness, as well as their families and caregivers.

AAHPM's members care for our nation's sickest and most vulnerable patients, many of whom not only receive home health care as an integral part of their care plan and but also experience long-term – even indefinite – need for skilled services. Under current requirements, certifying physicians must include at each home health recertification an estimate of how much longer skilled services will be required. CMS received input from stakeholders that this requirement is duplicative of the Home Health Conditions of Participation requirements for the content of the home health plan of care. As such, CMS proposes to eliminate the regulatory requirement that the certifying physician, as part of the recertification process, provide an estimate of how much longer skilled services will be required.

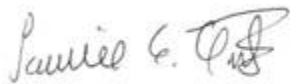
AAHPM supports this proposal, which we believe will contribute to significant burden reduction for those physicians who certify patients' ongoing need for home health services – a role that AAHPM members increasingly play as patients' access to home- and community-based palliative care services grows. As CMS notes, the home health plan of care includes information on the frequency and duration of visits to be made, and it must be reviewed, signed, and dated by the certifying physician at least every 60 days. As such, we agree that separately requiring the estimate of how much longer home health services will be required as part of recertification is duplicative and unnecessary, requiring significant additional time to complete the recertification process, yet can often lead to

claims denial. Eliminating this requirement as proposed would allow certifying physicians to focus more time on patient care, including to provide or facilitate patient access, as appropriate and necessary, to patient- and family-centered palliative care services that optimize quality of life and provide relief from the symptoms and stress of serious illness.

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We thank you again for the opportunity to provide this feedback on the CY 2019 Home Health proposed rule. Please address questions or requests for additional information to Jacqueline M. Kocinski, MPP, AAHPM Director of Health Policy and Government Relations, at [jkocinski@aahpm.org](mailto:jkocinski@aahpm.org) or 847-375-4841.

Sincerely,



Tammie E. Quest, MD FAAHPM  
President  
American Academy of Hospice and Palliative Medicine