



National Hospice & Palliative Care Organization
Public Policy Committee
Legislative Priorities for the 112th United States Congress

Ongoing priorities for NHPCO and the Hospice Action Network:

- Roll back the rate cuts imposed by the Affordable Care Act and the Budget Neutrality Adjustment Factor.
- Repeal the HHS Secretary's authority to reset routine home care payment methodology (i.e. the u-shaped curve).
- Enhance provider accountability through more frequent surveys.
- To promote and advocate for innovative models.

Legislative Priorities suggested by the 2010 Public Policy Committee and the Legislative Task Force:

- Medicare Elections- CMS has routinely stated that they will not allow Hospice Medicare elections to be submitted in batch form, because Congress never mandated it. So, all hospices manually input over 1 million elections every year. We should ask Congress to require CMS to accept batch Medicare elections from hospices (just like batch hospice claims). (Short Term) (suggested as part of a small Medicare fix bill if possible)'
- 6 Month Admission Rule- Expansion of the criteria for admission to hospice from a prognosis of 6 months to a prognosis of 1 year (if necessary, first, on a pilot basis) to evaluate potential reduction in Medicare hospitalization costs or to evidence based clinical markers that indicate late stage terminal illness. (Long Term)'
- Hospice cost effectiveness study- Seek an appropriation to conduct a third party study of the cost-effectiveness of hospice. The study would build on existing research and affirm the benefits of hospice care. (Short Term)'
- PA Billing- Add PA's to list of those professionals to act as attending. (Short Term)'
- „The Patient Care Education & Training Act- Advocate for the hospice and palliative care training components in the Wyden bill. (Short Term / Long Term not specified)'
- Sequential Billing- Ask Congress to require CMS to eliminate the need to submit and have claims paid in sequential order. (Long Term)'
- Hospice and Palliative Physician Training- Funding for hospice and palliative physician training so there are enough qualified MDs to meet the needs of hospices and palliative care providers and patients. (Short Term / Long Term not specified)'
- Make the Medicaid Hospice Benefit a part of the “essential benefits” package contemplated by the Affordable Care Act.
- NHPCO and the Public Policy Committee should continue to find ways to serve the unique needs of rural providers.
- Increased funding for NIH research on behavioral implications of hospice and palliative care utilization.