

March 31, 2020

Vice President Pence
The White House
1600 Pennsylvania Avenue, NW
Washington, D.C. 20500

Secretary Alex Azar
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20101

Administrator Seema Verma
Centers for Medicare and Medicaid Services
200 Independence Avenue, SW
Washington, D.C. 20101

RE: Funding for Hospice under the Public Health and Social Services Emergency Fund in H.R. 748, *Coronavirus Aid, Relief and Economic Security Act*, or “CARES Act”

Dear Vice President Pence, Secretary Azar, and Administrator Verma:

On behalf of the National Hospice and Palliative Care Organization (NHPCO), I thank you for your continued leadership in keeping Americans safe and supporting America’s health care providers as we face the Coronavirus (COVID-19) pandemic together. NHPCO is the largest membership organization representing the entire spectrum of not-for-profit and for-profit hospice and palliative care programs and professionals in the United States. NHPCO is comprised of almost 4,000 hospice locations with more than 57,000 hospice staff and volunteers, as well as 46 state hospice and palliative care organizations. We appreciate your ongoing collaboration with the hospice and palliative care community in responding to the pandemic since our meeting with you, Vice President Pence and Administrator Verma and other members of White House COVID-19 Task Force on March 4, 2020.

Hospice providers across the nation, including in “hot spots,” are serving the most vulnerable people during this national emergency and as a result have incurred considerable expenses and lost revenue directly related to their COVID-19 response efforts. NHPCO requests that the Department of Health and Human Services (HHS) and

the Centers for Medicare & Medicaid Services (CMS) allocate funds for the Public Health and Social Services Emergency Fund that were designated for health care providers in the Coronavirus Aid, Relief, and Economic Security (CARES) Act. We estimate that hospices will need approximately \$800 million to \$1.1 billion to cover costs directly attributable to COVID-19 and not reimbursable by any other source.

We request that you consider establishing a dedicated allocation for hospice providers under the Public Health and Social Services Emergency Fund to cover costs related to Personal Protective Equipment (PPE), staffing costs, and lost revenue. Under the CARES Act, hospices are not eligible for extra funding which will be made available to other providers including hospitals. In some cases, hospitals are eligible for enhanced payments from FMAP and add-on payments for COVID-19 patients during the emergency period, none of which will help the hospice community. With regard to the types of expenses eligible for coverage under the Public Health and Social Services Emergency Funds, hospice expenses and lost revenue fall into categories that we believe are eligible under the CARES Act.

- Expenses Related to Surge Capacity include the following:
 - PPE including isolation gowns, masks (including N95 respirators and surgical masks), face shields and goggles, and medical grade gloves.
 - Respiratory Equipment and Supplies including nebulizers, nebulizer medication kits, concentrators, oxygen supplies, suction machines, and ventilators.
 - Telehealth Products including computer hardware, phones, telehealth software and network connections.

- Expenses Related to Ensuring Essential Workforce include the following:
 - Overtime pay for existing employees;
 - Wages, benefits, overtime, emergency pay and other expenses for new/re-hired/temporary/contract employees;
 - Paid leave for quarantined staff.

- Lost Revenue Attributable to COVID-19 for the following reasons:
 - Lost revenue due to reduced referrals, reduced patient access, cancelled events and reduced donations.

Hospice and palliative care providers offer community-based person-centered care for seriously ill patients and their families. The adoption of this funding recommendation will enable hospice and palliative care providers to provide uninterrupted care to the extent possible while promoting safety and health for all Americans. This support will be doubly important as we enter a phase of COVID-19 that will unfortunately include an increased demand for hospice services. We stand by ready to help, but we require support to be in a position to do so at full capacity.

Hospices also provide direct support to communities in other meaningful ways including filling a gap in the availability of bereavement support to victims and the families of victims of natural disasters, mass casualty events, and today during this public health emergency.

Hospice and palliative care providers also serve thousands of veterans through an ongoing partnership with the Department of Veteran Affairs and the We Honor Veterans program which brings together over 5,300 hospice and community partners to better serve and honor our nation's veterans at the end of life. We are diligently working every day to assist our community partners in addressing the unique challenges and tragic situations that veterans and their families are experiencing in the face of the COVID-19 pandemic.

We thank you for your consideration and look forward to continued collaboration with the Administration and the White House COVID-19 Task Force to strengthen the American health care system and to serve patients and families during this national emergency.

Sincerely,

A handwritten signature in black ink, appearing to read 'Edo Banach', written in a cursive style.

Edo Banach, President & CEO
NHPCO