

September 14, 2020

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

**RE: Dedicated Provider Relief Funding for COVID-19 Testing in Hospice**

Dear Secretary Azar:

On behalf of the National Hospice and Palliative Care Organization (NHPCO), I thank you for your continued leadership in keeping Americans safe and supporting our health care providers as we face the coronavirus pandemic together. NHPCO is the largest membership organization representing the entire spectrum of 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 48 state hospice and palliative care organizations. We appreciate your ongoing collaboration with the hospice and palliative care community in responding to the COVID-19 public health emergency.

We are grateful to the Administration for providing the hospice and palliative care community resources and flexibilities that have enabled hospices to provide high quality care to their patients and families during this time of uncertainty. However, with COVID-19 infection rates increasing and new testing mandates being imposed at the state and federal level, providers are experiencing a significant funding gap in payment for testing for their frontline hospice workers.

In our letter sent on July 27, 2020, NHPCO requested \$500 million in dedicated funding for test kits and rapid point-of-care testing machines in order to efficiently test hospice staff, family members and visitors of hospice patients and meet state and nursing home requirements.<sup>1</sup> As stated in the letter, this funding would be aimed at providing COVID-19 tests for hospice staff working in patients' homes, nursing homes, facilities and assisted living facilities. We will follow up this request for testing machines and supplies with official comments in response to the August 25, 2020 Interim Final Rule 3401-IFC<sup>2</sup>, which offers guidance on testing residents and staff in long term care facilities. We agree that hospice workers caring for patients in nursing homes are categorized as "staff" definition, providing "services under arrangement." Under this definition, they qualify to be tested by the nursing homes where they are providing care to nursing home

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<sup>1</sup> 28,500 employees for weekly testing and three tests for 1.1 million family members/visitors at \$150 per test

<sup>2</sup> <https://www.cms.gov/files/document/covid-ifc-3-8-25-20.pdf>

residents enrolled in hospice. Additional guidance to state survey agencies<sup>3</sup> issued on August 26, 2020 and supplemental to the Interim Final Rule states “facilities should prioritize those individuals who are regularly in the facility (e.g., weekly) and have contact with residents or staff.” Testing frequency is variable, depending on community COVID-19 activity levels.<sup>4</sup> Regardless of the frequency of their visits, hospice staff should be tested by the nursing facility to confirm that they do not pose a risk to extremely medically vulnerable patients, other residents, and staff. [QSO-20-38](https://www.cms.gov/files/document/qso-20-38-nh.pdf)<sup>5</sup> issued on August 26, 2020 and supplemental to the Interim Final Rule states “facilities should prioritize those individuals who are regularly in the facility (e.g., weekly) and have contact with residents or staff.” Testing frequency is variable, depending on community COVID-19 activity levels.<sup>6</sup> Regardless of the frequency of their visits, hospice staff should be tested by the nursing facility to confirm that they do not pose a risk to extremely medically vulnerable patients, other residents, and staff.

The interim final rule also notes that facilities may require outside vendors to be tested by their employers, which could pose a significant burden to hospice providers without additional support. CARES Act Provider Relief Funds have been crucial to helping hospices adapt and provide care through the COVID-19 pandemic, but many hospices will require additional funding and equipment since they are expected to provide tests for hospice staff entering nursing homes. Findings from a survey conducted of NHPCO membership in June show that 77% of respondents who accepted Provider Relief Funds reported they would need additional support in 2020 to address the financial impact of COVID-19. Three months later, we have heard from many state hospice and palliative care organizations and countless hospices across the nation that the need for immediate support to expand hospice testing capacity is continues to grow to prevent the spread of this deadly virus. In addition to the need for additional funds, hospices also need the Administration’s assistance with the acquisition of testing supplies which are in very limited supply when available at all.

We thank you for your consideration of the immediate needs of the hospice and palliative care community regarding testing and would welcome the opportunity to discuss our requests with you. You or your staff should please reach out to Judi Lund Person, Vice President of Regulatory and Compliance for NHPCO at [jlundperson@nhpco.org](mailto:jlundperson@nhpco.org) with questions or to schedule a meeting. We look forward to continued collaboration with the Administration to strengthen the US health care system and to serve patients and families during this public health emergency.

Sincerely,



Edo Banach President & CEO

cc: CMS Administrator Seema Verma

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<sup>3</sup><https://www.cms.gov/files/document/qso-20-38-nh.pdf>

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<sup>5</sup> <https://www.cms.gov/files/document/qso-20-38-nh.pdf>

<sup>6</sup> <https://www.cms.gov/files/document/qso-20-38-nh.pdf>

July 27, 2020

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

Seema Verma  
Administrator  
Centers for Medicare and Medicaid Services  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, D.C. 20101

**RE: Dedicated Provider Relief Funding for COVID-19 Testing**

Dear 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 our health care providers as we face the coronavirus pandemic together. NHPCO is the largest membership organization representing the entire spectrum of 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 COVID-19 public health emergency.

We are grateful to the Administration for providing the hospice and palliative care community resources and flexibilities that have enabled hospices to provide high quality care to their patients and families during this time of uncertainty. However, with COVID-19 infection rates increasing and new testing mandates being imposed at the state and federal level, providers are experiencing a significant funding gap in payment for testing for their frontline hospice workers. Hospices provide care to patients wherever they reside. According to the latest data available, 48.2% of patients received hospice care in their home, 31.8% in nursing facilities and assisted living, 11.2% in inpatient hospice facilities, 7% in acute care hospitals, and 1.7% in other settings.<sup>7</sup>

COVID-19 testing of frontline hospice workers is essential. There is equal risk of nursing home and hospice staff to contracting COVID-19 through community spread. Identifying COVID-19 positive care delivery professionals would assist in protecting vulnerable hospice patients, their families, and other nursing home and skilled nursing facility residents from life-threatening COVID-19 outbreaks.

In June 2020, approximately 40% of those who responded to an NHPCO survey of hospice providers reported serving patients in COVID-19 hot spots, and approximately 75% of respondents reported having

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<sup>7</sup> [https://www.nhpco.org/wp-content/uploads/2019/07/2018\\_NHPCO\\_Facts\\_Figures.pdf](https://www.nhpco.org/wp-content/uploads/2019/07/2018_NHPCO_Facts_Figures.pdf)

treated patients who are presumed to be positive for COVID-19. Hospices directly impacted by COVID-19 exposure need support to keep patients and their families and other health care providers staffs safe.

**In order to efficiently test staff and meet state and nursing home requirements, hospices would need \$500 million<sup>8</sup> in dedicated funding aimed at covering COVID-19 tests for hospice staff working in patients' homes, nursing homes, facilities and assisted living facilities.**

In addition to the individual test kits, hospice providers require assistance in accessing coronavirus test machines. On July 14, 2020 HHS announced<sup>9</sup> a large-scale procurement of FDA-authorized rapid point-of-care diagnostic test instruments and tests to be distributed to nursing homes in COVID-19 hotspot geographic areas with the United States. We urge you to include hospice providers in this initiative, enabling the one-time procurement of devices and tests targeted to facilitate on-site testing among hospice patients and staff. This would enable hospice providers to augment their current capacity for COVID-19 testing, bolstering their ability to prevent reduce community spread of COVID-19.

We thank you for your consideration and look forward to continued collaboration with the Administration to strengthen the US health care system and to serve patients and families during this public health emergency.

Sincerely,



Edo Banach  
President & CEO

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<sup>8</sup> 28,500 employees for weekly testing and three tests for 1.1 million family members/visitors at \$150 per test

<sup>9</sup> <https://www.hhs.gov/about/news/2020/07/14/trump-administration-announces-initiative-more-faster-covid-19-testing-nursing-homes.html>