



## Home Health and Hospice Weekly: Recap of LeadingAge Updates

June 3, 2022

**Unclaimed Phase 4 Provider Relief:** HRSA notified us today that a number of providers have a PRF Phase 4 payment available but have not set up an Optum Pay account, which allows HRSA to distribute them funds to the provider. HRSA indicates that UnitedHealth Group (via the email address:

[UHG\\_HRSA@ProviderEmail.uhc.com](mailto:UHG_HRSA@ProviderEmail.uhc.com)) has contacted providers, for which this situation applies, multiple times. Providers who believe they are eligible to receive or have received notice that a Phase 4 payment is pending can set up an Optum Pay Account by going to:

<https://myservices.optumhealthpaymentservices.com/beginEnrollment.do>. It can take up to 2 weeks to complete this enrollment process and then an additional two weeks for the funds to be available within the providers' accounts. Members can reach out to Nicole at [nfallon@leadingage.org](mailto:nfallon@leadingage.org) if they have questions.

**LeadingAge Home Health Member Network Call.** Join us on Tuesday, June 7, at 2 PM ET, for the Home Health Member Network call. We will be discussing the newly released Home Health Value Based

**States Use Appendix K and Emergency Waivers to Support HCBS in Response to COVID-19** - To help Medicaid enrollees get the long-term services and supports they need during the COVID-19 crisis, states have used waivers and amendments to incorporate more flexibility into their programs. Many states use these tools to modify their HCBS for older adults and their family caregivers during the PHE. This National Academy for State Health Policy's interactive map tracks each state's new flexibilities in Purchasing cohorts, achievement thresholds, and benchmarks as a group. Nicole Fallon, LeadingAge's VP of Health Policy and Integrated Services will also walk members through the LeadingAge's Center for Managed Care Solutions & Innovation resources. We'll also check in on news from CMS and the Hill. Any LeadingAge member can join the Home Health Member Network or submit advance questions by emailing Katy ([kbarnett@leadingage.org](mailto:kbarnett@leadingage.org)) or Mollie ([mgurian@leadingage.org](mailto:mgurian@leadingage.org)).

**HHS Launches Office of Environmental Justice.** This week the Department of Health and Human Services (HHS) [launched](#) an Office of Environmental Justice (OEJ) to better protect the health of disadvantaged communities and vulnerable populations on the frontlines of pollution and other environmental health issues. The new office is [seeking public comment](#) on a draft outline of the 2022 HHS Environmental Justice Strategy and Implementation Plan by June 18, 2022. The OEJ is tasked with:

- Leading initiatives that integrate environmental justice into the HHS mission to improve health in disadvantaged communities and vulnerable populations across the nation.
- Developing and implementing an HHS-wide strategy on environmental justice and health.
- Coordinating annual HHS environmental justice reports.
- Providing HHS' Office of Civil Rights with environmental justice expertise to support compliance under Title VI of the Civil Rights Act of 1964.
- Promoting training opportunities to build an environmental justice workforce.

**COVID-19 Funding Action Alert.** Congress Must Pass New COVID-19 Funding Now! With COVID-19 cases, test positivity rates, and hospitalizations again on the rise, the country is not past the pandemic. Now is the time to ask Congress to fully fund additional support for the nation’s ongoing efforts to fight COVID-19—especially for older adults who have been disproportionately affected by the pandemic.

Experts are predicting new surges in the late Summer and Fall but additional funding is needed to make sure the country has enough vaccines, boosters, tests, and treatments to meet projected needs. We know the tools we need to confront COVID-19; Congress must act now so communities across the nation are prepared to deal with the coming surges.

We must ensure that test kits and testing locations remain available and accessible to everyone who needs them and that vaccines (including boosters) are readily available and robustly promoted. Treatments and therapeutics must also be easy to find and access, while research to find new tests, vaccines, and treatments continue.

Please take two minutes to write to your members of Congress now and advocate for more COVID-19 relief. Link: <https://www.votervoice.net/LeadingAge/campaigns/94910/respond> Thank you!

**Congressional Update.** Although the House and Senate are in recess this week, there’s no shortage of work left to be done before Congress adjourns ahead of the midterm elections. What began as the Build Back Better plan is now being reshaped into a much narrower, inflation-fighting measure that would amount to a fraction of the spending in the original bill. According to recent reporting, the new framework being discussed by the Administration and Congressional leaders would raise about \$1 trillion in revenue and spend roughly \$500 billion over the next decade, with the remainder of the new revenue being applied to reduce the deficit. Senator Joe Manchin of West Virginia, who brought a halt to the measure back in December, has been discussing a revised bill with Majority Leader Chuck Schumer from New York. This new framework would focus on clean energy tax credits, higher taxes on the wealthy, as well as provisions to lower prescription drug costs that could potentially include authorizing Medicare to negotiate drug prices, capping insulin costs at \$35 per month, and allowing the importation of drugs from Canada.

The latest news out of Congress on COVID funding is that the \$10 billion agreement will need to be renegotiated because some of the money designated to pay for it has already been spent. Dr. Cameron Webb, a member of the White House’s COVID-19 Task Force, made it clear this week just how important additional COVID funding will be, particularly if we want to be at the front of the line to procure the latest vaccines in the pipeline, not to mention more testing, PPE, and therapeutics like Paxlovid.

**Senators Release Draft Mental Health Care Telehealth Proposal.** Four Senators on the Senate Finance Committee released a bipartisan discussion draft, as part of the committee’s ongoing work to advance legislation that strengthens mental health care across the nation. The discussion draft, “[Telemental Health Access to Care Act](#),” sponsored by Chairman Ron Wyden (D-OR), Ranking Member Mike Crapo (R-ID), Senator Ben Cardin (D-MD) and Senator John Thune (R-SD), includes a public call for comments. The policies would:

- Remove Medicare’s in-person visit requirement for telemental health services.
- Establish benefit transparency for mental health care services delivered through telehealth to

inform Americans with Medicare how and when they can access telehealth.

- Preserve access to audio-only mental health coverage in Medicare, when necessary and appropriate. Also, require the National Academy of Medicine to conduct an evaluation and submit a report on mental health services furnished via audio-only telecommunications systems, within 5 years after enactment.
- Direct Medicare and Medicaid to promote and support provider use of telehealth.
- Incentivize states to use their Children’s Health Insurance Program (CHIP) programs to establish and improve in-person and virtual mental health care services in schools.

Ranking Member Crapo emphasized in the Finance Committee’s [press release](#), “The Finance Committee took crucial first steps toward modernizing telehealth coverage for mental health services in late 2020, and I look forward to building on those efforts through this bipartisan process.” The committee’s five areas of focus for addressing shortfalls in mental health care include: workforce, care integration, mental health parity, telehealth and youth.

**Department of Labor Reports job openings at record highs.** Today the U.S. Department of Labor, Bureau of Labor Statistics released the [April Job Openings and Labor Turnover Report](#). Key findings for the month of April were:

- Job openings decreased slightly to 11.4 million. The largest decrease in job openings was in health care.
- 4.4 million people quit their jobs.
- New hires and separations held steady at around 6.6 million and 6 million respectively.

**VA Seeks Nominees for Advisory Committee on Rural Health.** The Department of Veteran’s Affairs published a solicitation for nominations of qualified candidates for its [Veterans Rural health Advisory Committee](#). Nominations for three year terms are due no later than July 1. The VA specifically seeks individuals with diverse professional and personal qualifications to ensure a balanced membership on the Committee. (Editorial note: long-term care services face particular challenges in rural areas. There’s no doubt the Committee would benefit from an aging services perspective.)

**UsAgainstAlzheimer’s Launches Free Brain Health Academy.** The nonprofit UsAgainstAlzheimer’s has launched a new series of free online courses to equip healthcare providers and wellness professionals with the knowledge and resources to help people reduce their risk of Alzheimer’s and related dementias. The Academy includes six courses covering the science and interventions to address modifiable risk factors for dementia, including nutrition, sleep, social isolation and loneliness, physical inactivity and hypertension. Courses were designed in partnership with the Centers for Disease Control and Prevention along with the American College of Lifestyle Medicine, and the American Heart Association. The hour-long courses will be offered on the second Wednesday of each month starting June 15, 2022, from 1:00-2:00 PM ET through November 16, 2022. [To learn more and register for courses click here.](#)

**Leading Medicaid out of Emergency and Into Its Future:** In this *Medicaid Leadership Exchange* [podcast](#), former Medicaid directors explore what they would prioritize now and into the future when the Medicaid public health emergency unwinds — and where blind spots may lie.

**Home Health and Hospice Updated Blanket Waiver Charts.** The Centers for Medicare and Medicaid

Services has continued to update waivers to support providers during the Public Health Emergency. LeadingAge has updated charts of what waivers have been made permanent, ended, or remain in place for both home health and hospice. Read the full article [here](#).

**LeadingAge Comments on FY 2023 Hospice Wage Index Proposed Rule.** LeadingAge submitted comments on behalf of hospice members to the Centers for Medicare and Medicaid Services regarding hospice payment, regulation, and quality for Fiscal Year 2023. Read the full article [here](#).

**Shared Decision-Making to Support Person and Family-Centered Care:** Under authorizing legislation, Washington’s Health Care Authority (HCA), which administers Medicaid, has the authority to certify Patient Decision Aids. This [spotlight](#) focuses on engaging patients to identify individual preferences as states and the federal government are focusing on person-centered planning as an opportunity to better support high quality care, in particular for people with complex care needs.

**Introduction of the Connecting Rural Telehealth to the Future Act.** Reps. Adrian Smith (R-NE), Tom O’Halleran (D-AZ), and Kelly Armstrong (R-ND) have introduced bipartisan legislation to enable rural health providers to continue operating and treating patients by extending telehealth flexibilities implemented during the COVID-19 Public Health Emergency (PHE). The legislation, the Connecting Rural Telehealth to the Future Act ([H.R. 7876](#)), would extend certain telehealth flexibilities for two years, giving patients and providers certainty while Congress works to make them permanent.

The Connecting Rural Telehealth to the Future Act would:

- Extend all temporary telehealth provisions included in the FY22 omnibus through December 31, 2024;
- Permanently allow the use of audio-only technologies when providers are evaluating or managing patient health or providing behavioral health services;
- Restore Rural Health Clinic and Federally Qualified Health Clinic reimbursements for telehealth services to their normal reimbursement methods; and
- Extend allowance for Critical Access Hospitals (CAHs) to directly bill for telehealth services.

The Alliance for Connected Care, of which LeadingAge is a member, strongly supports this legislation that would allow rural health providers to continue to provide telehealth services after the PHE ends and extends some of the most important flexibilities permitted during the PHE

**White House Releases Mental Health Fact Sheet:** The White House released a [fact sheet](#) on all of the Administration’s efforts to date on their strategy to address the National Mental Health Crisis.