



PRESS STATEMENT  
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## **Coalition to Preserve Rehabilitation Calls for CMS to Rescind Home Health Proposed Rule**

*Coalition views rule as denying rehabilitation and skilled home care to Medicare beneficiaries with disabilities and chronic conditions*

**Washington D.C. – September 22, 2017:** The Coalition to Preserve Rehabilitation (CPR) urged the Centers for Medicare & Medicaid Services (CMS) to rescind its proposed rule on home health care ([CMS-1672-P](#)) in comments submitted to the agency today.

In its [comment letter](#), CPR expressed concern that the proposed change from a 60-day to 30-day episode of care and new financial incentives to serve acute care patients would undercut access to home healthcare for Medicare beneficiaries with long-term or chronic conditions, and those who seek ongoing services to maintain their function and live independently. These outcomes would contradict the *Jimmo* Settlement reached in a federal lawsuit between Medicare advocates and CMS that confirms the availability of Medicare coverage for skilled home healthcare in order to maintain or prevent deterioration of an individual's function, not only to improve it.

“The proposed home health payment rules conflict with Medicare coverage law and the *Jimmo* Settlement,” says Judith Stein, executive director of the Center for Medicare Advocacy. “The proposal would add incentives for home health agencies to serve people with short term needs, and those who have had a prior hospital stay. This will make a bad access situation worse for people with longer-term conditions and needs.”

“United Spinal Association opposes the rule change which cuts in half the number of days included in an episode of care from 60 to 30 days,” said Alexandra Bennewith, the association's vice president of government relations. “Access to home health care is critical to individuals with spinal cord injuries or disorders being able to remain in their homes and to maintain their independence by integrating as fully as they can into their own communities.”

CPR is further concerned that the proposed rule may lead to discrimination against patients living at home who develop a need for home health care without first requiring admission to a hospital or post-acute care institution. In its comment letter, CPR called for CMS to rescind the proposed rule and seek input from patients, providers and other stakeholders to develop a payment system that is “margin neutral,” so that all beneficiaries who qualify have equal access to necessary home care.

“We are very concerned about the potential for this rule to cause significant harm, especially to people with longer-term or chronic conditions,” said Sam Porritt, founder of the Falling Forward Foundation. “The proposed rule would create financial incentives that would prevent many patients, especially those needing rehabilitation and longer term skilled services, from receiving the care they need to remain in their homes.”

“Medicare is proposing a change to home healthcare benefit that is ‘penny wise and pound foolish.’ It would disproportionately and negatively impact Medicare beneficiaries living with advanced or severe forms of MS,” says Kim Calder, director of health policy at the National Multiple Sclerosis Society. “Creating new barriers to skilled rehabilitation services for these individuals will erode their ability to live their best lives safely and independently, place them at a greater risk of pain, falls, and choking, and increase their need for nursing home care.”

“We are alarmed by the proposed rule,” said Susan Connors, president and CEO of the Brain Injury Association of America. “Individuals with brain injury need access to rehabilitation at the right time, with the right scope and intensity, and in the right setting of care, including their own home. This proposal will only deny access to rehabilitation for the most vulnerable people with long-term chronic conditions,” stated Connors.

“Medicare beneficiaries who are living with paralysis will be disproportionately impacted by this proposed rule,” says Kim Beer, director, public policy of the Christopher and Dana Reeve Foundation. “We are very troubled that individuals who may have significant mobility and health challenges would potentially not receive the critical care they need to stabilize, improve and return to their homes.” “The Reeve Foundation is dedicated to ensuring that individuals living with paralysis are able to live independently and flourish,” said Beer.

The [Coalition to Preserve Rehabilitation](#) (CPR) is a coalition of national consumer, clinician and membership organizations with the goal of preserving and improving access to inpatient and outpatient rehabilitation services. Those offering comments in this release are members of the CPR Steering Committee.

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