Cosponsor the Home Health Care Planning Improvement Act

Supported by the American Association of Nurse Practitioners, the National Association for Home Care and Hospice, the American Nurses Association, the American Academy of Physician Assistants, and the American College of Nurse Midwives

Dear Colleague:

Nurse practitioners (NP), clinical nurse specialists (CNS), certified nurse midwives (CNM), and physician assistants (PA) play an increasingly important role in the delivery of primary health care services, particularly in rural and medically-underserved areas where access to a physician can be scarce. In 1997, Congress authorized Medicare coverage for the physician services provided by these professionals as long as they are within the scope of practice defined by state laws, such as physician supervision guidelines.

Despite this recognition of their role in the health workforce, these clinicians remain unable to order home health services for the Medicare patients under their care. Medicare recognizes their role for the rest of the care they provide in home health settings, but requires a physician’s signature to initiate or certify a home health episode, even if state law says otherwise.

H.R. 1825, the Home Health Care Planning Improvement Act of 2017 would ensure that Medicare beneficiaries get the home health care they need in a timely manner by allowing NPs, CNSs, CNMs, and PAs to order home health services, if allowed by their state.

For many patients, these non-physician providers serve as their main source of care, especially in areas where a physician is not always readily available. In such situations, this impediment amounts to an extra administrative and paperwork burden, and creates an unnecessary step that fails to recognize current training and scope-of-practice guidelines. As a result, patients in need of home health care services are either placed in more expensive health care settings or experience a delay in receiving the care they need.

This bill also eases a burden with a new requirement that providers must perform a face-to-face encounter with a patient prior to certification for home health services. Current law allows non-physician providers to substitute for the physician for the purposes of this face-to-face requirement, but does not allow the non-physician to sign the final care plan. The Home Health Care Planning Improvement Act would give these non-physician clinicians that flexibility.
Please join us in this important initiative to improve the efficiency healthcare delivery. To sign on as a cosponsor, please contact Ted Alexander (Theodore.Alexander@mail.house.gov) with Rep. Collins; Amy Kelbick (Amy.Kelbick@mail.house.gov) with Rep. Schakowsky; Elizabeth Stower (Elizabeth.Stower@mail.house.gov) with Rep. Kind; or Abby Finn (Abigail.Finn@mail.house.gov) with Rep. Tiberi.

Sincerely,

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