

March 20, 2020

The Honorable Mitch McConnell Majority Leader United States Senate Washington, DC 20510 The Honorable Charles Schumer Minority Leader United States Senate Washington, DC 20510

RE: Request to protect against risks of hospice face-to-face visit recertification requirements – temporary waiver or increased telehealth flexibilities

Dear Majority Leader McConnell and Minority Leader Schumer:

On behalf of the nearly 5.400 members of the American Academy of Hospice and Palliative Medicine (AAHPM), I write to call your attention to an issue that poses life-threatening risks to our patients and their families and caregivers, and to urge the inclusion of immediate relief in any additional legislation enacted to address the unprecedented effects of the COVID-19 outbreak.

AAHPM is the professional organization for physicians specializing in hospice and palliative medicine. Our membership also includes nurses, social workers, spiritual care providers, and other health professionals deeply committed to improving quality of life for patients facing serious illness, as well as their families and caregivers. COVID-19 has altered our landscape as hospice and palliative care providers and, while we stand ready to support those diagnosed with this disease, we believe that greater protections are needed immediately to ensure the safety of our workforce and the patients and families they serve, including by mitigating the risk of spead of the novel coronavirus.

While we appreciate that the Centers for Medicare & Medicaid Services (CMS) has exercised broad authority to waive telehealth restrictions in the Medicare program that was provided in the *Coronavirus Preparedness* and *Response Supplemental Appropriations Act of 2020*, CMS's new flexibilities do not extend to waiving face-to-face visits that are required for recertification of patients to hospice care at 1814(a)(7)(D)(i) of the Social Security Act. We therefore urge the Congress to either waive the face-to-face hospice recertification requirement on a temporary basis or extend the telehealth flexibilities to the completion of this requirement.

We note that the face-to-face hospice recertification requirement is administrative only and does not provide a medical benefit to the patients for whom they are required. At the same time, it unnecessarily exposes physicians and nurse practitioners to COVID-19 infection during a time when many healthcare systems are facing an alarming shortage of trained providers. Infected but asymptomatic providers could then spread the disease to other patients who may have weakened immune systems and further worsen the spread of this contagious virus. This risk is heightened when caring for patients at end-of-life, where family members or other caregivers may be present from across the state or country, exacerbating the spread of the disease. Furthermore, many hospice patients may reside in skilled nursing or long-term care facilities, where exposure to the virus could have compounding consequences for other frail and elderly patients residing in the facilities.

The face-to-face requirement also unnecessarily wastes personal protective equipment (PPE) that is already running in short supply in many areas, when hospices need to preserve PPE for symptom-related visits and care of the dying. Finally, the requirement keeps physicians and nurse practitioners tied up with paperwork when they could be helping to treat patients. Waiving the hospice face-to-face requirement, or allowing the visit to be conducted utilizing approved telehealth technology, will save the lives of many patients, family members, physicians and other clinicians, and increase the support available to the entire community.

We appreciate your leadership and commitment to mitigating the harm of the COVID-19 pandemic through sound policies that protect the sickest and most vulnerable patients, and we look forward to working with you to address this urgent issue.

Sincerely,

Rodney O. Tucker, MD MMM FAAHPM

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AAHPM President