

106TH CONGRESS
1ST SESSION

S. CON. RES. 47

Expressing the sense of Congress regarding the regulatory burdens on home health agencies.

IN THE SENATE OF THE UNITED STATES

JULY 21, 1999

Mrs. HUTCHISON (for herself, Mr. BOND, Ms. COLLINS, Mr. FRIST, Mr. ALLARD, Mr. EDWARDS, Mr. COCHRAN, Mr. CLELAND, Mr. ROBERTS, and Mr. TORRICELLI) submitted the following concurrent resolution; which was referred to the Committee on Finance

CONCURRENT RESOLUTION

Expressing the sense of Congress regarding the regulatory burdens on home health agencies.

Whereas 3,900,000 elderly persons currently use health care services provided under the medicare home health program;

Whereas the Balanced Budget Act of 1997 made a number of changes to the administration of the medicare home health program;

Whereas many such changes imposed by such Act were required to be implemented by the Health Care Financing Administration (referred to in this resolution as “HCFA”) of the Department of Health and Human Services;

Whereas many of such regulations promulgated by HCFA in order to implement such changes have proven to be administratively burdensome, have diverted funds away from needed beneficiary care, and were promulgated as final rules without prior opportunity for comment by the home health industry and home health patients;

Whereas HCFA has implemented a branch office policy that imposes arbitrary distance and suspension requirements that are administratively burdensome and threaten access to home health services, particularly in rural areas;

Whereas, in order to implement the shift of medicare payment for home health services from part A to part B, HCFA imposed a sequential billing policy that prohibited home health agencies from submitting bills for patient services if a previous bill was submitted for that patient who was undergoing medical review;

Whereas HCFA has expanded medical reviews of home health claims so that the processing of such claims has slowed down significantly nationwide;

Whereas HCFA is requiring home health agencies to submit patient data using the Outcomes and Assessment Information Set (referred to in this resolution as “OASIS”) in anticipation of and to assist the development of a prospective payment system (PPS) for home health services;

Whereas HCFA plans to implement an overly burdensome requirement that agencies report visit times in 15-minute increments that fails to account for the entire time spent in the home and on activities such as care planning, coordination, documentation, and travel that are essential for a home health visit;

Whereas most home health agencies will not be reimbursed for any of the costs or the increase in administrative requirements associated with OASIS;

Whereas the slowdown in claims processing, coupled with sequential billing and implementation of OASIS, has substantially increased home health agency cash flow problems because payments are often delayed by 3 months or more;

Whereas the vast majority of home health agencies are small businesses that cannot operate with such significant cash flow problems; and

Whereas there are many other elements of the medicare home health program, such as the interim payment system, which have created financial problems for home health agencies, such that more than 2,200 agencies nationwide have already closed: Now, therefore, be it

1 *Resolved by the Senate (the House of Representatives*
2 *concurring)*, That it is the sense of Congress that—

3 (1) Congress should actively oversee the admin-
4 istration by the Health Care Financing Administra-
5 tion (referred to in this resolution as “HCFA”) of
6 the medicare home health program;

7 (2) in overseeing such administration, Congress
8 should pay particular attention to HCFA’s compli-
9 ance with the public notice and comment require-
10 ments of the Administrative Procedures Act (5
11 U.S.C. 551 et seq.), HCFA’s consideration of input
12 from the home health community, and HCFA’s co-

1 ordination and consistent application of policies
2 among HCFA's central and regional offices; and
3 (3) Congress should monitor HCFA's adherence
4 to and implementation of Congressional intent when
5 executing changes during such administration.

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