

Eli's Hospice Insider

Budget: Look To Trump Administration Proposal For Budget Threats

Survey fees among resource-draining proposals.

While most observers agree the **Trump** administration's budget proposal is DOA as an entire document, politicians looking for ways to raise funds for their initiatives are likely to cherry pick cost-cutting ideas from the plan.

The budget proposal released last month suggests a provision already enacted into law - penalizing hospitals for "quickly discharging" patients to hospice care (see Eli's Hospice Insider, Vol. 11, No. 3). The proposal offers a \$1.3 billion savings from that move, according to a **Department of Health & Human Services** budget overview.

The Trump budget also suggest charging surveyed providers a user fee for survey revisits.

And, as usual, it singles out home health as an area in need of fraud and abuse enforcement. The document calls for "additional funding to address fraud, waste, and abuse in home health and other noninstitutional-based services."

The proposal continues, "Services provided in a beneficiary's home or other noninstitutional settings, including home health, hospice, and other home- and community-based services, are susceptible to fraud." The **HHS Office of Inspector General** "will develop new recommendations for targeted program safeguards for beneficiaries in homes- or community-based settings and prevent fraud by bad actors while limiting the burden on legitimate providers," the proposal says. "Through data analytics, OIG would also detect new and emerging fraud schemes, enabling us to monitor trends and evolution of known fraud schemes."

RQI: Centers for Medicare & Medicaid Services "actuaries conservatively project that, for every new dollar spent by HHS to combat health care fraud, about \$2 is saved or avoided," the budget says.

Big picture: Overall, the proposal would cut \$554 billion from Medicare spending in the next 10 years, notes the **National Association for Home Care & Hospice**. About \$47 billion of that would come from a cut to "spending on prescription drugs over a decade by having senior citizens move more slowly through the 'doughnut hole' coverage gap and preventing most people from ever reaching the catastrophic part of the program where the federal government pays 80 percent of the cost for drugs," NAHC notes.

Note: See the HHS budget summary at www.hhs.gov/sites/default/files/fy-2019-budget-in-brief.pdf.