

## Eli's Hospice Insider

### Regulations: Can New Medicare Burden Reduction Office Live Up To Its Name?

#### Hospices need reduced regulatory burdens.

Medicare is saying all the right words when it comes to lightening providers' regulatory load, but will it actually make a difference for hospices?

The **Centers for Medicare & Medicaid Services** is creating "the Office of Burden Reduction and Health Informatics to unify the agency's efforts to reduce regulatory and administrative burden and to further the goal of putting patients first," CMS says in a release. "The new office is an outgrowth of the agency's Patients over Paperwork (PoP) Initiative, which is the cornerstone of CMS's ongoing efforts to implement **President Trump's** 2017 executive order to 'Cut the Red Tape' and eliminate duplicative, unnecessary, and excessively costly requirements and regulations. This announcement permanently embeds a culture of burden reduction across all platforms of CMS agency operations," the agency pledges.

"The new office will strengthen CMS's efforts across Medicare, Medicaid, the Children's Health Insurance Program and the Health Insurance Marketplace to decrease the hours and costs clinicians and providers incur for CMS-mandated compliance," CMS says. "It will take a proactive approach to reducing burden, carefully considering the impact of new regulations on health care system operations," it adds.

"This reorganization should be viewed as a commitment to burden reduction," praises **National Association for Home Care & Hospice** President **William Dombi**. "That is a good thing for ... hospice."



But some industry observers wonder if this initiative will move beyond mere lip service. So far, "we have not seen as much effort to simplify home health and hospice," judges attorney **Robert Markette Jr.** with **Hall Render** in Indianapolis.

#### A Fresh Start

The formation of the new Office of Burden Reduction may be CMS's chance to grant real regulatory relief to hospice providers.

CMS could start with making many of the COVID-19 waivers permanent, Markette suggests. For hospices, "the use of telehealth/telecommunications to supplement routine home care, the waiver of on-site supervisory visits every two weeks and the use of volunteers are ... changes that seem ripe to be made permanent," Markette suggests. "The extension of the time frame to complete the update of the comprehensive assessment from 15 to 21 days is another waiver change that CMS could consider making permanent."

**Another one:** "The HHA and Hospice Aide annual training requirements may not need to be waived completely, but these last few months may have demonstrated that the overall training requirement could be reduced," Markette adds.

**Bottom line:** "The fact that the home health and hospice industries have been operating without these requirements for several months is a strong indicator that they really are not that necessary," Markette maintains. "Since we have already demonstrated that we can continue to care for our patients at a high level without these waived requirements in place, it seems that eliminating them won't harm anyone and will reduce the regulatory burden on providers."

CMS may be signaling it is on board with the idea of extending COVID-19 waivers and even making them permanent. "CMS is committed to leveraging the significant flexibilities introduced in response to the COVID-19 pandemic as we continue to lead the rapid transformation to value-based healthcare," the agency says in its release.

"The Office of Burden Reduction and Health Informatics will ensure the agency's commitment to reduce administrative costs and enact meaningful and lasting change in our nation's health care system," CMS Administrator **Seema Verma** sums up. "Specifically, the work of this new office will be targeted to help reduce unnecessary burden, increase efficiencies, continue administrative simplification, increase the use of health informatics, and improve the beneficiary experience."