**COSPONSOR THE HOSPICE EVALUATION AND LEGITIMATE PAYMENT**

**(HELP) ACT (S. 722/H.R. 3506)**

Sen. Ron Wyden (D-OR) and Rep. Tom Reed (R-NY) have introduced companion legislation that would make important refinements to existing Medicare hospice policy by:

**• Ensuring an Appropriate Transition to the New Hospice Payment System** — Under current law, payment reforms will be implemented in hospices nationwide on or after Oct. 1, 2013. The Centers for Medicare & Medicaid Services (CMS) is not required to test these payment reforms to find out what the “real world” impact will be on beneficiary access to quality care and on the financial viability of hospice programs. S. 722/H.R. 3506 would address this concern by requiring a 15-site demonstration of the new payment system prior to nationwide implementation.

**• Refining the Hospice Face-to-Face Encounter Requirements** — In Jan. 2011, CMS implemented a requirement that hospice patients entering their third or later benefit period (180 days) have a face-to-face encounter with a hospice physician or nurse practitioner (NP). While CMS allows an additional two days to complete the face-to-face under documented exceptional circumstances (such as when a patient is a new readmission to hospice after a break in service or when CMS data systems are unavailable or lack full information on the patient’s benefit period status), hospices continue to have difficulty meeting the time frames for the face-to-face. S. 722/H.R. 3506 would make modest changes by allowing seven days for completion of the face-to-face requirement when exceptional circumstances occur; the legislation also permits hospices to use other clinicians, such as physician assistants, to perform the encounter. These changes will be of particular benefit to small, rural providers and in areas where physicians and NPs are

in short supply.

**• Requiring Surveys of Hospice Programs Every Three Years** — Despite the need for regular surveys of hospice programs to ensure they meet Medicare’s many and frequently changing regulatory requirements, most hospices are surveyed only every six or seven years. S. 722/H.R. 3506 would require that hospice programs be surveyed at least once every three years, which will help to ensure that hospice providers are adhering to survey and certification requirements.