

Fostering Independence Through Technology Act (S.501)

**Introduced by
Senators John Thune (R-SD) and
Amy Klobuchar (D-MN)**

Background

The Fostering Independence Through Technology Act (FITT) of 2011 has been introduced in the United States Senate by Senators John Thune (R-SD) and Amy Klobuchar (D-MN). The legislation (S.501) calls on the Secretary of Health and Human Services to implement remote monitoring pilot projects within Medicare to provide incentives to home health agencies to use home monitoring and communications technologies.

Expanding the use of technology in home care will allow for more efficient delivery of healthcare to the elderly and homebound. It will also allow seniors the option of aging at home for longer periods of time in a more cost effective setting than other healthcare options.

- The cost and burden of caring for seniors is steadily increasing. If given the choice, many seniors would prefer to remain independent in a home setting with the added reassurance that they could remain connected to a health care professional.
- One-third of seniors are living alone, so it is important to make innovative technologies available to them so that they retain the option of living at home without jeopardizing their health, safety or connection with their health care provider.
- Home monitoring devices now have the ability to track pulse rates, body temperature, body weight, blood pressure and capture numerous measures of clinical data.
- Consumers may easily program their device to contact family members or care providers when their monitor detects any sign of distress. Those who take advantage of this technology may move freely throughout their home, reassured that if anything may happen to them, there would be an immediate response from a trusted neighbor, family member or health care professional.
- Medicare home health services cost approximately \$41 per day over a 60 day episode of care, compared to skilled nursing facilities which cost \$358 a day and hospitals which cost \$1805 a day¹.

The Veterans Administration realized a 25 percent reduction in the number of bed days of care, a 19 percent reduction in hospital admissions, and an 86 percent satisfaction rate of veterans being seen in their home using remote monitoring technology². The FITT bill seeks to extend these positive benefits from remote monitoring to home health care services provided through the Medicare program. In fact, Medicare certified home health providers treat nearly 3.5 million patients annually.

¹Hospital and nursing home data for 2009, Health Care Financing Review/2010 Edition Medicare & Medicaid Statistical Supplement; Medicare home health data for 2009 updated using the BLS' PPI for home health services.

²Darkins, A., et al. "Care Coordination/Home Telehealth: The Systematic Implementation of Health Informatics, Home Telehealth, and Disease Management to Support the Care of Veteran Patients with Chronic Conditions." *Telemedicine Journal and E-Health: The Official Journal of the American Telemedicine Association*. Dec. 2008; 14(10): 1118-26. *PubMed*. U.S. National Library of Medicine, National Institutes of Health. June 10, 2009. <http://www.ncbi.nlm.nih.gov/sites/entrez>

Fostering Independence Through Technology (FITT) Act of 2011

Sponsors: Senator John Thune (R-SD) and Senator Amy Klobuchar (D-MN)

The Fostering Independence Through Technology (FITT) Act requires the Department of Health and Human Services to:

- Create pilot programs to provide incentives for home health agencies to use home monitoring and communications technologies to enhance health outcomes for Medicare beneficiaries and reduce Medicare expenditures;
- Establish project sites in both urban and rural areas;
- Identify various performance target methodologies for home health agencies participating in the pilot programs;
- Provide incentive payments to each participating home care agency equal to a portion of the Medicare savings relative to the performance targets;
- Determine that pilot project payments have no impact on other Medicare payments to participating agencies; and
- Consider additional pilot projects if health outcomes are enhanced and Medicare savings are realized.

The FITT bill is designed to be a no-cost program to the Federal government. No incentive payments will be paid to the participants of these pilot projects unless savings have been documented.