



IHHC

FEDERAL LEGISLATIVE WATCH LIST

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2019

116th Congress

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ILLINOIS
**HOMECARE
& HOSPICE
COUNCIL**

Bill # & Title	Bill Synopsis	Sponsors	# of Co-Sponsors	Co-Sponsors from IL	Bill Status	IHHC Position
LEGISLATION						
<p><u>H.R. 647</u> Palliative Care and Hospice Education and Training Act</p>	<p>Requires HHS to provide support for Palliative Care and Hospice Education Centers. These centers must improve the training of health professionals in palliative care and establish traineeships for individuals preparing for advanced education nursing degrees, social work degrees, or advanced degrees in physician assistant studies in palliative care.</p> <p>HHS may provide support to schools of medicine, schools of osteopathic medicine, teaching hospitals, and graduate medical education programs for training physicians who plan to teach palliative medicine.</p> <p>HHS must: (1) provide Palliative Medicine and Hospice Academic Career Awards to individuals to promote their career development; (2) support entities that operate a Palliative Care and Hospice Education Center; (3) support advanced practice nurses, social workers, physician assistants, pharmacists, chaplains, or students of psychology pursuing an advanced degree in palliative care or related fields; and (4) award grants to schools of nursing, health care</p>	Rep. Eliot Engel (D-NY)	House: 268	<p>House: 15 Bost Casten D. Davis R. Davis Foster Kelly Kinzinger Krishnamoorthi LaHood Lipinski Quigley Rush Schakowsky Schneider Underwood</p>	<p>House: 10/28/19 – Passed the House</p> <p>Senate: Referred to Committee on Health, Education, Labor and Pensions</p>	Support

	<p>facilities, or programs leading to certification as a nurse assistant to train individuals in providing palliative care.</p> <p>The Agency for Healthcare Research and Quality must provide for a national education and awareness campaign to inform patients, families, and health professionals about the benefits of palliative care.</p> <p>The National Institutes of Health must expand national research programs in palliative care.</p>					
<p>H.R. 1343 Protecting Married Seniors from Impoverishment Act</p>	<p>This bill makes permanent certain provisions regarding Medicaid eligibility that protect against spousal impoverishment for recipients of home and community-based services. Under current law, these provisions expire on March 31, 2019.</p>	<p>Rep. Debbie Dingell (D-MI)</p>	<p>House: 2</p>	<p>House: 0</p>	<p>House: 02/26/19 – Referred to the Subcommittee on Health</p>	<p>Support</p>
<p>H.R. 3253 Sustaining Excellence in Medicaid Act of 2019</p>	<p>This bill alters several Medicaid programs and funding mechanisms. Specifically, the bill</p> <ul style="list-style-type: none"> • makes appropriations through FY2024 for, and otherwise revises, the Money Follows the Person Rebalancing Demonstration Program; • allows state Medicaid fraud control units to review complaints regarding patients who are in noninstitutional or other settings; • temporarily extends the applicability of Medicaid eligibility criteria that protect against spousal impoverishment for 	<p>Rep. Debbie Dingell (D-MI)</p>	<p>House: 9</p>	<p>House: 0</p>	<p>08/06/19 – Became Public Law No: 116-39</p>	<p>Support</p>

	<p>recipients of home and community-based services;</p> <ul style="list-style-type: none"> temporarily extends the Medicaid demonstration program for certified community behavioral health clinics; repeals the requirement, under the Medicaid Drug Rebate Program, that drug manufacturers include the prices of certain authorized generic drugs when determining the average manufacturer price (AMP) of brand name drugs (also known as a "blended AMP"), and excludes manufacturers from the definition of "wholesalers" for purposes of rebate calculations; and increases funding available to the Medicaid Improvement Fund beginning in FY2021. 					
<u>S. 2000</u>	Makes permanent certain provisions regarding Medicaid eligibility that protect against spousal impoverishment for recipients of home and community-based services.	Rep. Robert Casey (D-PA)	House: 8	House: 0	House: 06/27/19 – Referred to the Committee on Finance	Support
<u>S. 296 / H.R. 2150</u> Home Health Planning Improvement Act	Allows NPs, clinical nurse specialists, certified nurse-midwives, and PAs to order home health services and oversee home health plans of care.	Sen. Susan Collins (R-ME) Rep. Jan Schakowsky (D-IL)	Senate: 37 House: 120	Senate: 0 House: 5 Schakowsky R. Davis Foster Lipinski Underwood	Senate: 01/31/19 – Referred to the Committee on Finance House: 04/09/19 – Referred to Subcommittee on Health	Support
<u>S. 433/H.R. 2573</u>	Requires CMS to use “observed evidence” of behavior change instead of behavioral assumptions when	Sen. Susan Collins (R-ME) Rep. Terri Sewell (D-AL)	Senate: 31 House: 144	Senate: 0 House: 4	Senate: 02/11/19 – Referred to the	Support

<p>To amend title XVIII of the Social Security Act to improve home health payment reforms under the Medicare program</p>	<p>updating home health payment rates under PDGM and include such data in the HH PPS notice and comment rulemaking; Requires CMS to phase-in any increase or decrease in HH payment rates exceeding 2% in equal amounts.</p> <p>Further, the bill permits the waiving of the homebound regulatory requirement to enable greater flexibility for Medicare beneficiaries in Medicare Advantage plans (and waiver programs) to receive home health services.</p>			<p>Bost D. Davis R. Davis Rush</p>	<p>Committee on Finance</p> <p>House: 05/08/19 – Referred to House Committee on Ways and Means and House Committee on Energy & Commerce</p>	
<p>S. 548 / H.R. 1342 The EMPOWER ACT – A Bill to reauthorize the Money Follows the Person Demonstration Program</p>	<p>Extends and improves the Money Follows the Person program (MFP) through 2023. MFP incentivizes investment in home and community-based services by providing federal funding for transitional services for individuals who wish to leave a nursing home or other institution. The bill also reduces the time an individual must be in a nursing home before becoming eligible to transition from 90 days to 60 days.</p>	<p>Sen. Rob Portman (R-OH) Rep. Debbie Dingell (D-M)</p>	<p>Senate: 3 House: 51</p>	<p>Senate: 0 House: 4 Kelly Krishnamoorthi Lipinski Schakowsky</p>	<p>Senate: 02/25/19 - Referred to the Committee on Finance</p> <p>House: 02/26/19 – Referred to Subcommittee on Health</p>	<p>Support</p>
<p>S. 829 The Removing Barriers to Person-and Family-Centered Care Act</p>	<p>Allows CMS to issue waivers to allow Medicare beneficiaries to receive hospice and curative treatment at the same time; allow NPs, PAs and clinical nurse specialists to certify and re-certify eligibility for home health services, establish and review home health plans of care, document the required F2F encounter, and provide the initial certification for hospice care; allow patients to receive home health services without being</p>	<p>Sen. Sheldon Whitehouse (D-RI)</p>	<p>0</p>	<p>0</p>	<p>Senate: 03/14/19 – Referred to the Committee on Finance</p>	

	homebound. Allows expanded services under the hospice benefit including allowing Medicare to pay for room and board at inpatient facilities for patients who elect and are certified for routine hospice care, but whose home is not safe for home-based hospice care; allow Medicare coverage for short-term, home-based respite care as an alternative to inpatient respite care for patients who elect and are certified for routine hospice care.					
S. 1190 / H.R. 2594 Rural Access to Hospice Act	Allows Rural Health Clinics and Federally Qualified Health Clinics to bill Medicare for hospice attending physician services if the physician is a clinic employee.	Sen. Shelley Moore Capito (R-WV) Rep. Ron Kind (D-WI)	Senate: 11 House: 33	Senate: 0 House: 1 Krishnamoorthi	Senate: 04/11/19 – Referred to the Committee on Finance House: 05/08/19 – Referred to the Committee on Energy & Commerce and the Committee on Ways & Means	Support
S.1725/H.R.3127 Medicare Home Health Flexibility Act	Allows Occupational Therapists to perform the initial OASIS assessment when starting a case	Sen. Benjamin Cardin (D-MD) Rep. Lloyd Doggett (D-TX)	Senate: 4 House: 16	Senate: 0 House: 0	Senate: 06/05/19 – Referred to the Committee on Finance House: 06/05/19 – Referred to the Committee on Energy & Commerce and the Committee on Ways & Means	

<p><u>S. 2807</u> Hospice Care Improvement Act of 2019</p>	<p>Takes important steps toward addressing the issues identified in the recent OIG reports by:</p> <ul style="list-style-type: none"> • Addressing the need for greater transparency of survey compliance by <ul style="list-style-type: none"> ○ Requiring uniform collection and reporting of hospice survey findings ○ Making survey information publicly available online ○ Including stakeholders in the process of identifying key survey findings that link to quality of care for use in published summaries of survey findings ○ Requiring annual reports on hospice survey performance • Making triennial surveys permanent • Requiring more frequent surveys for hospices subject to intermediate sanctions and new providers entering the program • Requiring state and accrediting organization surveyors to alert hospices to areas of concern at the time a survey concludes, and to provide educational support to assist with improvement on survey performance • Development of intermediate sanctions that would include: <ul style="list-style-type: none"> ○ payment suspension ○ temporary management 	<p>Sen. Rob Portman</p>	<p>Senate: 1</p>	<p>Senate: 0</p>	<p>Senate: 11/07/19 – Referred to the Committee on Finance</p>	
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	<ul style="list-style-type: none">○ directed plans of correction○ mandatory staff in-service training					
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