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Andy Slavitt
Acting Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244-1850

September 3, 2015

Re: Medicare and Medicaid Program: CY 2016 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model; and Home Health Quality Reporting Requirements

Dear Acting Administrator Slavitt,

The Alzheimer's Association appreciates the opportunity to comment on the Centers for Medicare & Medicaid Services' (CMS) proposed updates and changes to the Home Health Payment System.

The Alzheimer's Association is the world's leading voluntary health organization in Alzheimer's care, support, and research. Today, there are more than 5 million Americans living with Alzheimer's disease. Alzheimer's is the sixth leading cause of death in the United States, and the only cause of death among the top 10 without a way to prevent, cure, or even slow its progression. Twenty-three percent of Medicare beneficiaries age 65 and older with dementia have at least one home health visit during the year, compared to 10 percent of beneficiaries without dementia.¹ Given the importance of home health care to individuals with dementia and their families, the Association appreciates CMS's efforts to improve the quality of these services.

The Alzheimer's Association applauds CMS's increasing emphasis on advanced care planning across settings. Effective advanced care planning can lead to better outcomes for persons with dementia and their families. It allows the affected person to participate in decision making while he or she is still able and can reduce stress and confusion for friends and family in the future. Advanced care plans are particularly important for the more than 800,000 people in the United States who live alone,² and naming surrogates in the early stages of the disease allows those surrogates to understand and help implement those plans.

Surrogates and/or caregivers help to implement advanced care plans by providing insight into the affected person's preferences and eventually making decisions when the person with dementia is no longer able. The 2015 Institute of Medicine report *Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life*,³ makes the distinction between advanced care planning and surrogates,

¹ Alzheimer's Association. (2015). *2015 Alzheimer's Disease Facts and Figures*.

² Alzheimer's Association. (2012). *2012 Alzheimer's Disease Facts and Figures*.

³ IOM (Institute of Medicine). 2015. *Dying in America: Improving quality and honoring individual preferences near the end of life*. Washington, DC: The National Academies Press.

discussing surrogates as stewards of patients' wishes and preferences, often guided by the use of a plan. These are two separate and equally important elements of effective care.

Specifically, we write concerning the quality measure, "Advanced Care Planning," which is to be part of the proposed value-based purchasing model. This is similar to a quality measure proposed in the Calendar Year 2015 Physician Fee Schedule update and we note here similar concerns expressed in those comments.

The proposed measure reads: *Patients [aged 65 and older] who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advanced care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advanced care plan.*

As written, the measure includes two distinct elements: an advanced care plan and a surrogate decision maker. While we support the underlying intention--to capture the percentage of individuals with advanced care plans and surrogates--these are not and should not be alternatives to each other. We believe capturing these percentages separately would better serve CMS's purpose. The Association respectfully suggests that CMS replace the current single measure with two measures:

Advanced Care Plan: Percentage of patients aged 65 years and older who have an advanced care plan documented in the medical record and documentation in the medical record that the advanced care plan was discussed and distributed to the patient and/or a designated surrogate decision maker.

Designated Surrogate Decision Maker: Percentage of patients aged 65 years and older who have a designated surrogate decision maker documented in the medical record or documentation in the medical record that the patient did not wish or was not able to name a surrogate decision maker.

Thank you for the opportunity to comment. The Alzheimer's Association would welcome a chance to serve as a resource to CMS as it considers these important issues and how they relate to individuals living with Alzheimer's and related dementias. Please contact Laura Thornhill, Manager of Regulatory Affairs, at 202-638-7042 or lthornhill@alz.org if you have questions or if we can be of additional assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Egge", with a stylized flourish at the end.

Robert Egge
Executive Vice President, Government Affairs