



Hospice Action Network (HAN) is the advocacy affiliate of the National Hospice and Palliative Care Organization (NHPCO). NHPCO is the nation's largest and oldest membership association for providers who care for people affected by serious and life-limiting illness. NHPCO represents over 4,000 hospice locations with thousands of hospice staff and volunteers, and 48 state hospice and palliative care organizations.

HAN is working with provider members, state organizations, other national healthcare organizations, and relevant stakeholders to advance the NHPCO legislative and regulatory agenda. As hospice advocates, we urge Congress and the Administration to support policies that promote equitable access to high-quality hospice and palliative care for patients and families in need across our communities and improve healthcare delivery.

Protect Care for Patients and Families

- **Program Integrity:** Ensure appropriate oversight and regulation to protect the quality of care hospice patients receive, via additional oversight of new and suspicious hospices to prevent bad actors from operating.
- **Flexibilities:** Extend or make permanent flexibilities issued through legislation and regulatory waivers that enable hospice palliative care providers to offer needed care to Americans facing serious or life-limiting illness at home or wherever they call home.
- **Bereavement Services:** Expand coverage of bereavement services offered by hospice providers that care for grieving communities in the face of natural disasters and other mass casualty incidents.

Make Meaningful Benefit Improvements to Increase Access and Advance Health Equity

- **Workforce Crisis:** Address the workforce crisis providers are facing by allowing practitioners to perform at the top of their licensure plus, secure the workforce of tomorrow by increasing diverse healthcare professionals with expertise in palliative and hospice care.
- **Eligibility:** Reform the outdated six-month prognosis barrier and tie hospice eligibility to need, not an arbitrary time limit.
- **Concurrent Care:** Avoid having patients in need of hospice care make "the terrible choice" between continuing disease specific therapies like dialysis and accessing person-centered, interdisciplinary care services offered by hospice providers.
- **Equity and Inclusion:** Advance health equity by removing structural barriers to high-quality hospice and community-based palliative care and building trust by offering education and culturally appropriate outreach and resources to improve communication and increase transparency.



Innovation In Serious Illness Care Delivery and Payment

- **Community-Based Palliative Care Benefit:** Build upon the Centers for Medicare and Medicaid Services (CMS) Innovation Center's Medicare Care Choices Model (MCCM) which improved quality and produced cost savings when testing concurrent care in hospice. Determine the scope of minimum required services that define "community-based palliative care" which is offered by an interdisciplinary team and have CMS adopt the defined services. Improve care delivery across the care continuum by covering needed community-based palliative care further upstream from hospice.
- **MA VBID Hospice Carve-In:** Fix the hospice component of the Center for Medicare and Medicaid Innovation Value-Based Insurance Demonstration to ensure the model requires consumer protections, defines required services for community-based palliative care, includes proper quality measures, addresses operational concerns, and allows for patient choice.

Protect Access and Ensure Quality

- **Financing:** Ensure hospice providers can offer the right care at the right time by securing a level of reimbursement for services that guarantees every American facing a serious or life-limiting illness access to the high-quality hospice and palliative care they deserve.
- **Quality Improvement:** Position NHPCO's Quality Connections program as the gold standard for providers offering the high-quality care that all Americans facing serious and life-limiting illness deserve.
- **OIG Engagement:** Serve as the main source for the HHS Office of Inspector General by leading a national coalition to engage with the U.S. Department of Health and Human Services (HHS) Office of Inspector General on issues related to hospice program audits, inspections, and evaluations.
- **Red Tape Reduction:** Ensure resources are going directly to patient care by eliminating overly burdensome regulations that jeopardize access, while strengthening program integrity measures that promote high-quality care.

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