

Tell CMS to Stop Additional Cuts to Home Health through the Preserving Access to Home Health Act of 2023 (S. 2137/H.R. 5159)

Cuts to home health care reimbursement threaten access to care to vulnerable populations – especially rural and hard to reach communities.

The Centers for Medicare & Medicaid Services (CMS) finalized a permanent **-4.07%** cut to payments for Medicare home health services in the CY 2025 Home Health Prospective Payment System (HHPPS) Final Rule.



Since 2020, CMS has implemented cuts equaling **-\$25 billion** over a decade to a program that annually spends **\$17 billion**.

Decrease in funding = decrease in caregiver wages

This leads to a reduction of available workforce, which then means patients have **less access to care**.



Every day, more people become eligible to receive services, but as a result of continued cuts by CMS, **500,000 fewer patients are receiving care** through the Medicare home health program in 2023 than in 2019.

Nationwide, home health providers are being forced to close their doors, deny patients admission to care, and reduce their service delivery areas. Due to continuing cuts to reimbursement rates, this problem will only get worse.

86% of adults and 94% of Medicare beneficiaries say they would prefer to receive post-hospital, short-term care **at home** instead of in a nursing home. However, the **referral rejection rate has increased significantly** (from 49% in 2020 to 71% in 2022) due to providers' inability to staff cases.

SNF

\$2,010 Medicare Home Health base payment amount in 2023 for 30-day period. (MEDPAC).

HH

\$16,500 Medicare Skilled Nursing Facility (SNF) payment for 30 days in 2020 after accounting for beneficiary copays (Dobson Davanzo).

Home health spending leads to Medicare cost savings:

- A total savings of **\$3.376 billion** to Medicare (CMS).
- **Reduction in admissions** to more costly settings such as hospitals and emergency rooms (*The American Journal of Accountable Care*).
- Significant reduction in **readmissions and death** (*American Journal of Medicine*).

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