

Good afternoon,

I'm reaching out to you on behalf of the <u>National Partnership for Healthcare and Hospice Innovation</u> – the leading national organization representing the nonprofit end-of-life and serious illness care provider community. I write to emphasize the *critical* importance of the hospice care benefit, which now serves over half of all annual Medicare decedents. Established more than four decades ago, the Medicare hospice benefit was designed to deliver high-quality, compassionate care to individuals with terminal conditions, regardless of where they reside. This benefit not only enables Medicare beneficiaries to receive care in the comfort of their own homes but also significantly reduces Medicare expenditures by minimizing hospitalizations and ER visits at the end-of-life.

When delivered in accordance with the spirit and intent of the benefit, hospice is a holistic and allencompassing care delivery model that produces cost savings for the Medicare program and better outcomes for the patient and family compared to hospital-based end-of-life care alternatives. Sadly, in recent years profiteering behavior and outright fraud have infiltrated this benefit, leading NPHI to work hand-in-hand with Congress, urging CMS to take stronger action to address program integrity concerns. While we're committed to stronger enforcement and oversight, we also acknowledge that this benefit is in dire need of modernization to fix many of the misaligned incentives driving bad actors into the space.

In recognizing the potential to capture Medicare savings via increased hospice utilization and simultaneously reduce fraud, waste, and abuse, NPHI is developing a proposal to redesign the hospice benefit in a way that promotes upstream palliative care and aligns payment with both quality outcomes and the provision of services. The goal of this alternative benefit framework is to provide Congress, CMS, and other stakeholders with options to redesign the benefit while protecting well-meaning providers, Medicare beneficiaries, their families, and the solvency of the Medicare program. We look forward to sharing more information with you about this effort in the coming months.

Concurrently, we remain committed to advancing interim improvements to the current Medicare hospice benefit, including addressing ongoing workforce challenges, supporting telehealth flexibilities, and promoting access to high-quality care across the post-acute continuum.

Lastly, encourage you to take a few minutes to review our <u>People Over Profits</u> blueprint – our vision for a better healthcare system. We look forward to working with you to ensure Americans have access to the serious illness and end-of-life care they deserve. Should you have any questions, concerns, or comments regarding the above information, please do not hesitate to contact NPHI Policy Director, Ethan McChesney, at ethan@nphihealth.org.

