

Please also support:

Expanding Access to Palliative Care Act (S. 2565)

This bill requires the Center for Medicare and Medicaid Innovation (CMMI) to test a model that provides community-based palliative care and care coordination for high-risk Medicare beneficiaries and that may replace the Medicare Care Choices Model (currently set to expire on December 31, 2021).

Under the new model, multi-disciplinary teams must provide coordinated, palliative care that is available 24-7 for Medicare beneficiaries with serious illnesses or injuries, such as cancer. The CMMI must evaluate the model by comparing patients participating in the model with those outside of the model in relation to specified metrics, including the election and duration of hospice care.

Advancing Telehealth Beyond COVID-19 Act (H.R. 4040)

The Advancing Telehealth Beyond COVID-19 Act (H.R. 4040) would extend a number of the most important telehealth flexibilities through the end of 2024. This bill recently passed the US House with overwhelming bipartisan support. We now need the Senate to do the same and get it over the finish line! The specific flexibilities H.R. 4040 would extend through 2024 include:

- Allowing the hospice face-to-face (f2f) recertification visit to be performed via telehealth.
- Removing the pre-pandemic geographic restrictions and expanding originating sites for Medicare telehealth services, which are allowing for teleservices to be delivered in patients' own homes and in communities all across the country.
- Allowing the continuation of coverage and payment of telehealth services furnished using audio-only telecommunications technology (i.e. phone calls).
- Delaying the in-person requirements under Medicare for mental health services furnished through telehealth and telecommunications technology.
- Extending telehealth services for Federally Qualified Health Centers and Rural Health Clinics; and
- Expanding the practitioners eligible to furnish telehealth services, to include qualified physical therapists, occupational therapists, speech-language pathologists, and audiologists.

Palliative Care and Hospice Education and Training Act (PCHETA) (S. 4260)

The Palliative Care and Hospice Education and Training Act (PCHETA) would make transformative investments in this critical workforce by funding new programs and initiatives to increase specialty hospice and palliative knowledge and competencies across the health care system. PCHETA has been introduced in past congresses, and has garnered major bipartisan support in both the House and Senate. The legislation introduced in the 117th Congress, like previous versions, would:

- Create "Palliative Care and Hospice Education Centers," to improve the interdisciplinary team-based training of health professionals in palliative care, develop and disseminate tools relating to palliative care, and support the training and retraining of faculty at accredited medical schools, nursing schools, social work schools, and other programs (including physician assistant education programs).
- Provide grants to schools of medicine and nursing to support faculty and curricula development in hospice and palliative care topics.
- Require a national public education campaign on hospice, palliative care, and other issues related to living with a serious illness.
- Direct the National Institutes of Health (NIH) to expand and intensify its palliative care research efforts.