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Legislative Talking Points

Home Health Care is...

Cost-Effective - Less expensive than institutional health care delivery.

Preferred - Most people prefer to stay in their own home for health care, when viable.

Beneficial - Familiar surroundings reduce apprehensions and promote recovery.

Reality - There likely won't be enough health care institutions to serve future demand.

Medicaid Funding for Home Care, Waiver & EPSDT

Iowa home health agencies currently are cost-based providers for Medicaid payment purposes. Year-end reimbursement is adjusted based on the lesser of "actual cost" (i.e. filed Medicare cost report) or "Medicaid Limit" (i.e. based on 2000/2001 costs). Most home care providers are ultimately paid in 2000/2001 dollars, with minor adjustments, but incur expenses at 2010 levels.

This unfair and inequitable payment arrangement could be substantially corrected by adopting a statewide fee schedule. However, adequate funding is required for this option to be viable.

FY 2010

- \$3M State-share Medicaid Funding Increase - Additional funds not appropriated
- Status Quo Appropriations - Federal stimulus was to protect for full year
- Governor's ATB Cuts - Compliance plan unfairly applied to cost-based providers (i.e. reduction from fee schedule would be more equitable and manageable)

FY 2011

- DHS Appropriations - Maintain funding at original FY 2010 approved levels
- Home Care Reimbursement Analysis - Appoint legislative study committee
- FY 2012 Fee Schedule - Plan sufficient funding for full implementation

Home Telehealth Monitoring

The time has come for state Medicaid programs to recognize a home telehealth monitor encounter/transmission as a bona fide service. The technology is proven, it is widely accepted and it allows limited nursing resources to be more appropriately deployed in providing services to more lowans in their own homes.

A proposal has been submitted to the Iowa Department of Human Services for consideration to conduct a home telehealth monitoring pilot. Legislative support is requested.