

LD 2055 An Act to Prohibit the Department of Health and Human Services from Implementing Electronic Visit Verification for Hospice Providers Within the MaineCare Program Unless Mandated by the Federal Government

## Testimony in Support January 9, 2024

Senator Baldacci, Representative Meyer and members of the Health and Human Services Committee, my name is Colleen Hilton. I am the SVP Continuing Care and President of Northern Light Home Care and Hospice. I also serve as the chairperson of the Board of Directors for the Home Care and Hospice Alliance of Maine. I am here today providing testimony on behalf of Northern Light Health speaking in support of this bill.

Northern Light Home Care & Hospice is a statewide provider of home health, hospice, palliative care and community-based services. We have office locations from Fort Kent to South Portland and cover most of the state of Maine delivering clinically excellent, compassionate home care and hospice to the citizens of Maine. We are a member of the Northern Light Health system and have approximately five hundred employees from Aroostook to York County. On an average day our census is greater then 2000 patients being served in our various programs. In addition, we are the major provider of school based and community-based immunizations across our state.

Our organization has worked closely with the Home Care and Hospice Alliance of Maine as they advised the Department of Health and Human Services over the past year of the hospice provider opposition to expanding the electronic visit verification requirement, currently in place for home care, to hospice services. As required by the 21st Century Cures Act, states were required to implement electronic visit verification (EVV) for personal care services (PCS) by January 1, 2020, and for home health services (HHSC) by January 1, 2023. The Act, however, does not require electronic visit verification for hospice services. Expanding the EVV regulatory burden to hospice is proposed at the sole discretion of the MaineCare program.

Maine is a national outlier in its plan to adopt Electronic Visit Verification ("EVV") for hospice care. Attempting to adopt EVV for hospice signifies a lack of understanding on the methodology by which hospice is reimbursed. Payment is made for each day a member is on hospice care regardless of the provision of an actual visit to the patient. Payment in hospice is a bundled payment designed to cover not only visits, but all services a patient needs related to their terminal diagnosis. This includes payment by the hospice for all end-of-life care services including medications, medical supplies, ambulance services, labs, durable medical equipment, 24/7 on call services.

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Mercy Hospital
Northern Light Health Foundation
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Regulations requiring electronic visit verification forces us to institute a workaround to send a datapoint for each day the member is on hospice care to force the EVV system to pay for that day, even though a visit may not have been made. EVV exists to prevent billing for fraudulent visits, which in the Home Health (section 40) space makes logical sense. However, using electronic visit verification as a prerequisite to pay for hospice services that are not paid by the visit will of course have no effect on fraud prevention and certainly won't enhance the care provided to our hospice patients and families.

Electronic visit verification is a system to verify the date, time, and site of a home care visit, as well as services provided and who provided the service to the home care patient. The adoption of EVV in the home health space was expected and is a requirement that we have met. However, it must be said that it has been incredibly administratively burdensome to review every visit, correct issues with technology, make sure the data is clean, and reconcile every visit prior to submitting claims for payment. This has become a near full-time job for one employee, representing a cost of approximately \$50,000 without any reimbursement consideration. Expanding this to Hospice would increase this administrative burden without consideration for the increased financial cost. Noting that implementing EVV for hospice services requires a work around to establish a daily EVV entry we believe there is greater risk of error and wide variation in data that will provide no value to the state nor our industry.

As noted, Congress was clear in passing a law to mandate electronic visit verification for home health and personal care services. Congress did not include hospice nor does the law direct states consider expanding EVV requirement to hospice providers. We believe the MaineCare plan to require hospice providers to implement an EVV program is a wholly unnecessary regulatory burden that results in no tangible benefit to the state, hospice providers and most importantly the patients and families in our care.

I ask that you support this important legislation. Thank you.