



May 11, 2017

Centers for Medicare and Medicaid Services  
United States Department of Health and Human Services  
Attention: CMS-3819-P2  
Box 8010  
Baltimore, MD 21244-1850

RE: CMS-3819-P2

Dear Sir/Madam:

The Home Care Association of New York State (HCA) strongly supports the U.S. Centers for Medicare and Medicaid Services (CMS) April 3 proposed rule (CMS-3819-P2) that would delay the effective date for the final rule entitled: "Medicare and Medicaid Programs: Conditions of Participation (CoPs) for Home Health Agencies (published in the Federal Register on January 13, 2017).

The current effective date for the final rule is July 13, 2017 and CMS proposes to delay the effective date for an additional six months until January 13, 2018. The proposal also delays implementation of the CoPs' quality assessment and performance improvement (QAPI) requirement from January 13, 2018 to July 13, 2018; and it does not apply new home health agency administrator requirements in cases where administrators are employed by home health agencies (HHAs) prior to January 13, 2018 (instead of July 13, 2017).

The final CoP changes are very comprehensive and necessitate HHAs to make major changes in many aspects of their operations. They include an array of new requirements and revised procedures related to: nursing, therapy and aide services; supervision; assessments; patients' rights; care planning; quality improvement; clinical records; agency structural requirements; governance; management; and other provisions that dictate the operation and function of HHAs certified by Medicare (and Medicaid).

Along with HHAs needing further time to implement these changes, state survey departments need adequate time to review and understand CMS's Interpretive Guidelines (which have not been issued yet) and train their staff. Subsequently, HHAs will need this additional time to understand their compliance obligations as well as how state surveyors will interpret and enforce the Interpretive Guidelines.

For your information, HCA is a statewide association representing nearly 400 health care providers, organizations and individuals involved in the delivery of home care services to over 175,000 Medicare patients and 400,000 Medicaid patients in New York State. HCA's members include Certified Home Health Agencies (CHHAs), Long Term Home Health Care Program (LTHHCP) providers, Licensed Home Care Services Agencies (LHCSAs), providers of various waiver programs, Managed Long Term Care plans, hospices and others. HCA's home care providers are sponsored by hospitals, nursing homes and free-standing nonprofit, public and proprietary agencies.

While we support efforts by CMS to revise the CoPs to focus on a patient-centered, data-driven, outcome-oriented process that promotes high quality patient care, our members need more time to implement these changes in ways that strengthen patient care.

Thank you for the opportunity to offer our comments on the proposed CoPs. If you have any questions or need additional information, I can be reached at (518) 810-0662.

Sincerely,



Andrew Koski  
Vice President for Program Policy and Services