

PUBLIC POLICY and ADVOCACY Report 2019
Baltimore Affiliate

So far in 2019, these are the Hot Topics being focused on by our National WOCN Society:

1. Pressure Reducing Support Surface Policy Change (Dated 10/03/2019), going into effect 10/21/2019.

Pressure Reducing Support Surfaces Prior Authorization

URGENT: An upcoming process change will make it **mandatory to submit prior authorization for pressure reducing support surfaces as of October 21, 2019**. WOC nurses must act to educate, collaborate and advocate with other medical professionals, case managers and DME companies about this process to ensure patients receive the appropriate medical equipment for their condition.

Background

Section 1834(a)(15) of the Social Security Act (the Act) authorizes the Secretary of Health and Human Services to develop and periodically update a list of DMEPOS that the Secretary determines, on the basis of prior payment experience, are frequently subject to unnecessary utilization and to develop a prior authorization process for these items. CMS announced in December 30, 2015 a finalized rule creating a prior authorization (PA) process for certain DMEPOS items and now include Pressure Reducing Support Surfaces (PRSS). Prior authorization helps to ensure that all applicable Medicare coverage, payment, and coding rules are met before an item is provided. Prior authorization is a process through which a request for provisional affirmation of coverage is submitted for review before an item is provided to a Medicare patient and before a claim is submitted for payment. This FAQ document is intended to help WOCN members comply with these new requirements. Go to wocn.org; click on Public Policy Advocacy Tab; click on FAQ. There are 12 FAQ. I'm including #12 in this report.

• What Can WOC Nurses Do to Impact this Issue?

It is important for WOC nurses to understand the process to ensure their patients receive the appropriate durable medical equipment for their condition.

- Please share [this document](#) with your colleagues in all care settings as it doesn't just affect one aspect of health care.
- Please contact the WOCN Society Public Policy Coordinator, Kate Lawrence, or the Society's Director of Government Relations, Chris Rorick, at info@wocn.org if you have feedback or have witnessed concerns about this policy change in your work environment

2. The Home Health Care Planning Improvement Act

The Home Health Care Planning Improvement Act of 2019 (S. 296), was introduced by Senators Susan Collins (R-ME) and Ben Cardin (D-MD) in the Senate. In the House a

companion bill (H.R. 2150) was introduced by Reps. Jan Schakowsky (D-IL), Buddy Carter (R-GA), Ron Kind (D-WI), and Mike Kelly (R-PA) The legislation would authorize nurse practitioners, clinical nurse specialists, certified nurse-midwives, and physician assistants to certify home healthcare services for their Medicare patients. This legislation would ensure that beneficiaries have timely access to the home health care they need and reduce costs for Medicare.

Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Midwives, and Physician Assistants are playing increasingly important roles in the delivery of primary health care services. This is especially true in rural and medically-underserved areas. Medicare currently recognizes these four categories of Advanced Practice Nurses (APRNs) for the care they provide in home health settings; however, only a physician may certify that a patient is eligible for Medicare home health services. This is an unnecessary barrier to care that also increases costs for Medicare. The Society is a strong supporter of this legislation and will push for its passage. Take action now!

3. Lymphedema Treatment Act (September 2018) – Unfortunately, DID NOT PASS.

4. This is not part of the Hot Topics for our National WOCN Society, but is included here FYI. H.R. 1570 and S. 668 – both introduced 03/06/2019 – “Removing Colorectal Screening Barriers” – is supported by the UOAA., and the American Cancer Society Cancer Action Network.

Currently, CMS has a cost-sharing/coinsurance requirement that accompanies colonoscopies when a polyp is found. Advocates want this requirement waived, but CMS has opted not to waive this requirement. Instead, CMS proposed that physicians address the issue by informing their patients in advance of a colonoscopy that there might be an additional cost if a polyp is found, & then document these notifications in the medical record. This may make it less likely that patients would opt to have a screening colonoscopy. The American Cancer Society & the UOAA (among other professional societies) are concerned because Colorectal Cancer is the second-leading cause of cancer death among men and women combined in the United States, and screening for colorectal cancer can save lives. Comments submission deadline: 09/27/2019 is passed.

5. Public Policy and Advocacy Survey for Presidents/President-elects and Members. 15 questions long. Due by Friday 10/11/2019. Please take the survey, so that the National WOCN Society can get a grip on how Public Policy and Advocacy Issues are being received/handled in all the various Affiliates/Regions.

Respectfully submitted,
Bernie Rock, RN, CWON

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