



Western Maryland Health System

September 20, 2018

Robert R. Neall
Secretary of Health
Maryland Department of Health
Herbert R. O'Connor State Office Building
201 West Preston Street
Baltimore, MD 21201-2399

Dear Secretary Neall,

Recently, I reached out to both Rivka Friedman, Director of the Division of All-Payer Models for CMMI, and Adam Boehler, Deputy Administrator and Director of CMMI, regarding the challenges associated with nurse practitioners not being permitted to write orders for Home Care services in Maryland, despite statutory full practice authority. Those discussions as well as others led me to ask for your assistance in resolving this issue.

This Centers for Medicare and Medicaid Services (CMS) restriction in writing orders for Home Health services creates a tremendous barrier to the access and continuation of care in our community. It is severely impacting Western Maryland Health System (WMHS) on many of our primary care patients who seek and receive their care from nurse practitioners who are legally permitted to work independently in their care of the patient in Maryland. As you are well aware, our health system delivers care under a value-based model, which focuses on providing patient care in the most appropriate location and not necessarily in the acute care setting. At WMHS, we have applied this model quite effectively, and the "home" has become a very important care delivery site. We are performing remote tele-monitoring of our patients in their homes, and Respiratory Therapists are seeing patients in the home along with Dietitians, Pharmacists, Community Health Workers and, of course, RNs. Maryland has adopted a care delivery model that is most successful, and the care of the patient has been improved dramatically. Unfortunately, anytime the patient has a nurse practitioner as their primary care provider (PCP), the PCP in these cases is restricted from ordering Home Care services. According to CMS, only physicians and podiatrists are permitted to write orders for Home Care. The acute shortage of primary care physicians in Western Maryland, Southern Maryland and the Eastern Shore has been partially abated by nurse practitioners who effectively manage the care of many patients across the continuum with the exception of Home Health services. This limitation creates an unnecessary break in care when recently discharged acute care patients are most vulnerable. We strive to keep patients as healthy as possible once they are discharged from the hospital, and Home Care plays a critical part in that process. However, patients of nurse practitioners are ending up back in the hospital within 30 days because of the challenges associated with getting them seen in their homes once they are discharged.

So my request of you is could the provision of permitting nurse practitioners to write orders for Home Care be handled as part of what Maryland is successfully accomplishing through the Waiver? Could the change be addressed possibly as a demonstration project, or simply granted like the Maryland Primary Care program? It appears that the Maryland situation could be ideal for such a potential exemption. As I noted previously, this problem is not a Maryland problem; it is a problem faced by every nurse practitioner in every state who is permitted by law to act as a fully independent PCP. This situation

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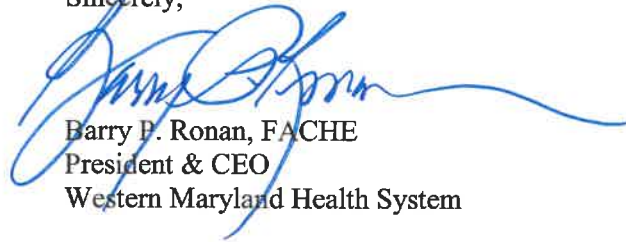
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is a more significant issue for rural areas where we have come to depend on the nurse practitioner as the PCP for so many of our patients.

I would certainly make myself available as well as anyone on my staff to discuss this issue further. As I stated earlier in this letter, this issue has become a significant disruption in the care that we are delivering and is not only impacting our ability to reduce the total cost of care through unnecessary utilization of inpatient services, but it has a direct impact on the much needed care of the patient.

Thank you in advance for your attention to this matter, and I look forward to your response.

Sincerely,



Barry P. Ronan, FACHE
President & CEO
Western Maryland Health System

Cc: Howard Haft, MD, Executive Director, Maryland Primary Care Program
Bob Atlas, President, Maryland Hospital Association
Michael Johansen, Esq., Rifkin Weiner Livingston, LLC
Nancy D. Adams, Senior VP/COO, Western Maryland Health System
J. Matthew Gilmore, Esq., General Counsel, Western Maryland Health System



MARYLAND Department of Health

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

October 24, 2018

Ms. Nicole Stallings
Senior Vice President, Government Affairs
Maryland Hospital Association
6820 Deerpath Road
Elkridge, Maryland 21075

Dear Ms. Stallings:

I have attached for the review by the Stakeholder Innovation Group (SIG) of a request by the Western Maryland Health System to permit statewide home health services order writing authority by nurse practitioners. I am requesting that the SIG review this issue and make the appropriate recommendation to the Health Services Cost Review Commission (HSCRC) and to the Department of Health as part of its routine business this fall in preparation for the implementation of the Maryland Total Cost of Care Model Agreement.

The Centers for Medicare and Medicaid Services (CMS) has an existing restriction against nurse practitioners being able to write orders for home health services and is a practical barrier towards ensuring responsible and timely care for patients, especially in Maryland's rural regions. My staff advise me that payment changes for Medicare services typically require either a federal statutory change or the granting of a waiver by CMS. There are two potential solutions – one is to request that our Federal delegation to explore the first approach; and the second is to explore the feasibility of applying for a waiver under the current Total Cost of Care Model. I have suggested that the Western Maryland Health System reach out to Maryland's Federal delegation to explore the first approach.

Section 5 "Medicare Waivers" of the Total Cost of Care Model State Agreement broadly authorizes the HSCRC to request Medicare payment, fraud and abuse, or other waivers from the national Medicare program that are not already listed in Appendix G "Medicare Payment Waivers" of the Agreement. As part of the State's governance structure to implement the Total Cost of Care Model, the Stakeholder Innovation Group is the best forum to discuss and recommend next steps forward on this issue and other potential waivers.

Should you have any questions, please do not hesitate to contact me at 410.767.4639 or my Deputy Chief of Staff, Webster Ye, at 410.767.6481 or at webster.ye@maryland.gov.

Sincerely,

Robert R. Neall
Secretary



MARYLAND Department of Health

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

October 24, 2018

Mr. Barry P. Ronan
President & CEO
Western Maryland Health System
12400 Willowbrook Road
P.O. Box 539
Cumberland, Maryland 21501-0539

Re: Nurse Practitioners – Order Writing for Home Health Services

Dear Mr. Ronan:

Thank you for your letter regarding the challenges associated with nurse practitioners not being permitted to write orders for Home Care services.

As you have noted, the Centers for Medicare and Medicaid Services (CMS) existing restriction against nurse practitioners being able to write orders for home health services is a practical barrier towards ensuring responsible and timely care for patients, especially in Maryland's rural regions. My staff advise me that payment changes for Medicare services typically require either a federal statutory change or the granting of a waiver by CMS. There are two potential solutions: one is to request that our Federal Delegation explore the first approach; and the second is to explore the feasibility of applying for a waiver modification under the current Total Cost of Care Model. I would suggest that the Western Maryland Health System reach out to Maryland's Federal Delegation to explore the first approach.

With respect to the second approach, the Health Services Cost Review Commission (HSCRC), in partnership with the Health Department, successfully obtained federal approval for the Maryland Total Cost of Care Model State Agreement and signed the agreement on July 9, 2018. Section 5 "Medicare Waivers" of the Agreement broadly authorizes the HSCRC to request Medicare payment, fraud and abuse, or other waivers from the national Medicare program that are not already listed in Appendix G "Medicare Payment Waivers" of the Agreement.

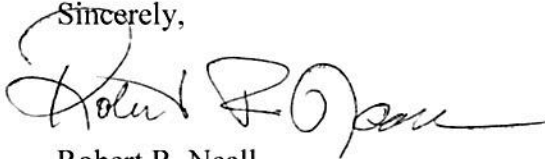
As part of the State's governance structure to implement the Total Cost of Care Model, the Stakeholder Innovation Group (SIG) is the best forum to discuss and recommend next steps forward on this issue. The SIG is a broad group of health care industry representatives including hospitals, physicians, skilled nursing and long-term care facilities, and payers. The group is industry-led and staffed, but is also attended by the principal state agencies involved. Its charge is to discuss ongoing healthcare delivery and payment innovations that may be leveraged or scaled, as well as to identify and develop any additional tools or programs needed to realize the goals of the Total Cost of Care Model.

As the SIG reconvenes this fall, I will recommend that the group add the issue of nurse practitioners and home health services order writing as a topic for discussion. I have every confidence that the SIG will discuss this important topic and make the appropriate recommendations to the HSCRC on next steps forward. The Health Department will then work with the HSCRC and other state agency partners to make the regulatory or statutory changes necessary to implement the Total Cost of Care Model beginning on January 1, 2019 and onwards.

Accordingly, I am forwarding your inquiry to me to Nicole Stallings, Chair of the Maryland Stakeholder Innovation Group, for the SIG's further consideration with a copy to Katie Wunderlich, Executive Director of the HSCRC.

Should you have any questions, please do not hesitate to contact me at 410.767.4639 or my Deputy Chief of Staff, Webster Ye, at 410.767.6481 or at webster.ye@maryland.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert R. Neall", with a long horizontal flourish extending to the right.

Robert R. Neall
Secretary