National Alliance for Care at Home

At a Crossroads: The Future of Care at Home in a Shifting National Landscape

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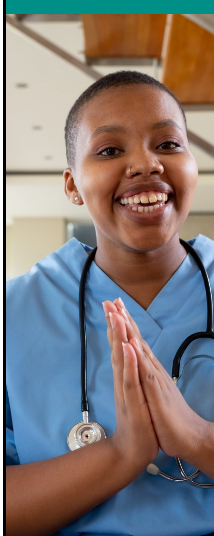

Why Care at Home?

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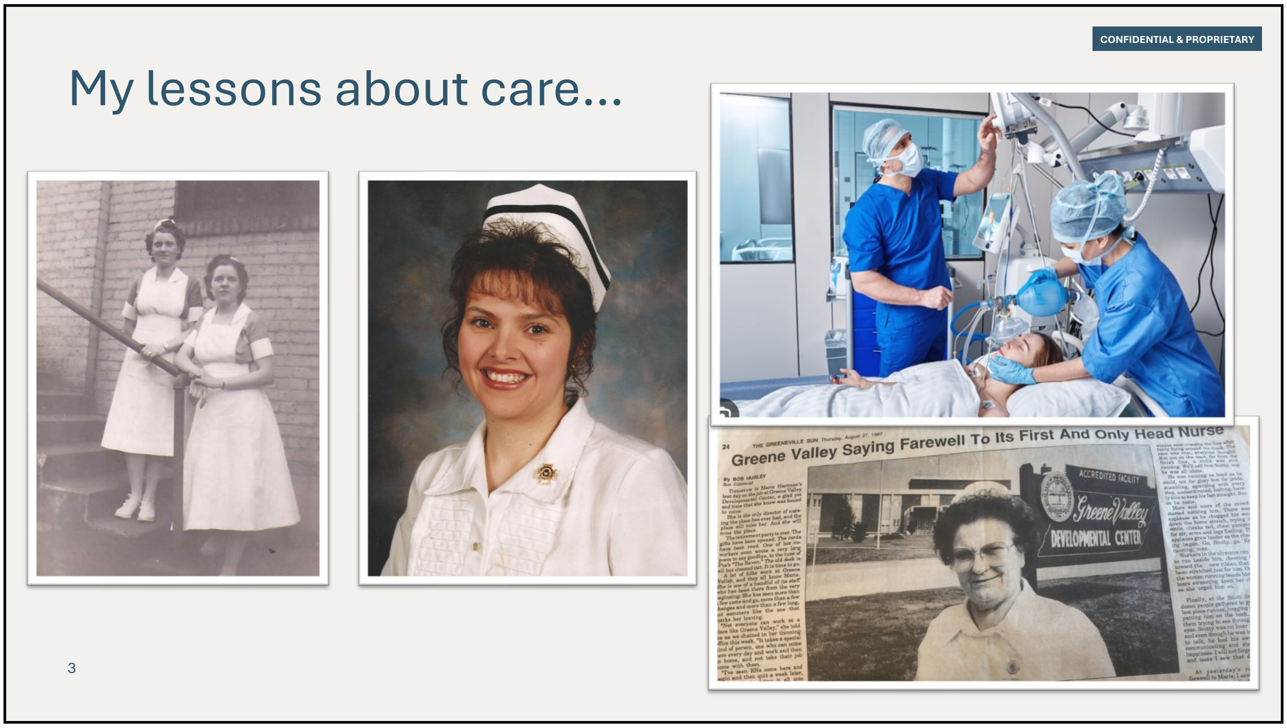
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My lessons about care…
Greene Valley Saying Farewell To Its First And Only Head Nurse
ACCREDITED FACILITY
Greene Valley
DEVELOPMENTAL CENTER
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The Caregiving Crisis

The United States population age **85 and older** is expected to **triple** from 2020-2060 to over 19 million people.

Despite medical advances and healthy lifestyles, only one-third of individuals aged 85+ report being free of disability or free of difficulty with activities of daily living.

Caregiver support ratios are falling across most regions.

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The Role of Care at Home

Care at Home is the Solution

Research has consistently shown that individuals and caregivers strongly prefer high-quality, home-based care.

Care at home aligns with patient preference, improves outcomes, and saves the system money.

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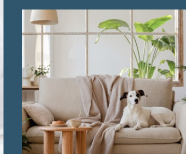

About the Alliance

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The Alliance is the largest organization representing, advocating for, educating, and connecting providers of care in the home for millions across the US who depend on that care.

Membership:

- 10,000 organizations
- A workforce of 2 million
- 4 million patients and clients

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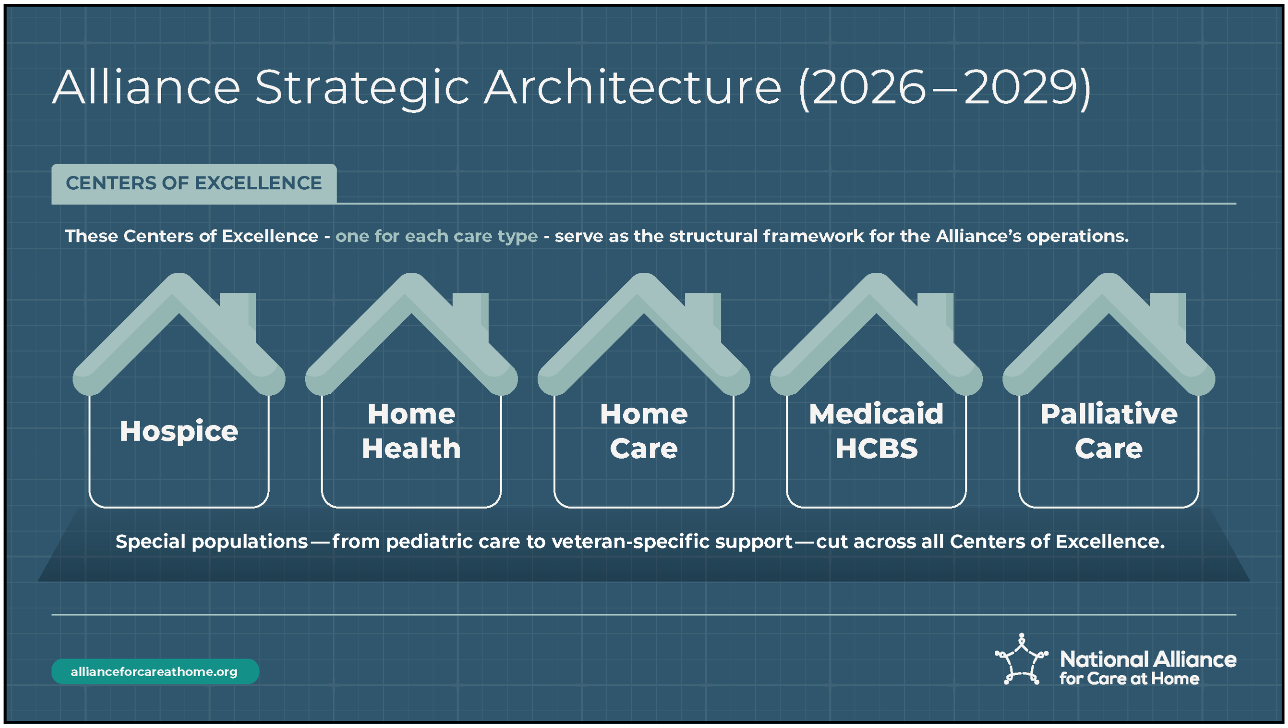
Alliance Strategic Architecture (2026–2029)
CENTERS OF EXCELLENCE
These Centers of Excellence - one for each care type - serve as the structural framework for the Alliance's operations.
Hospice
Home Health
Home Care
Medicaid HCBS
Palliative Care
Special populations—from pediatric care to veteran-specific support—cut across all Centers of Excellence.
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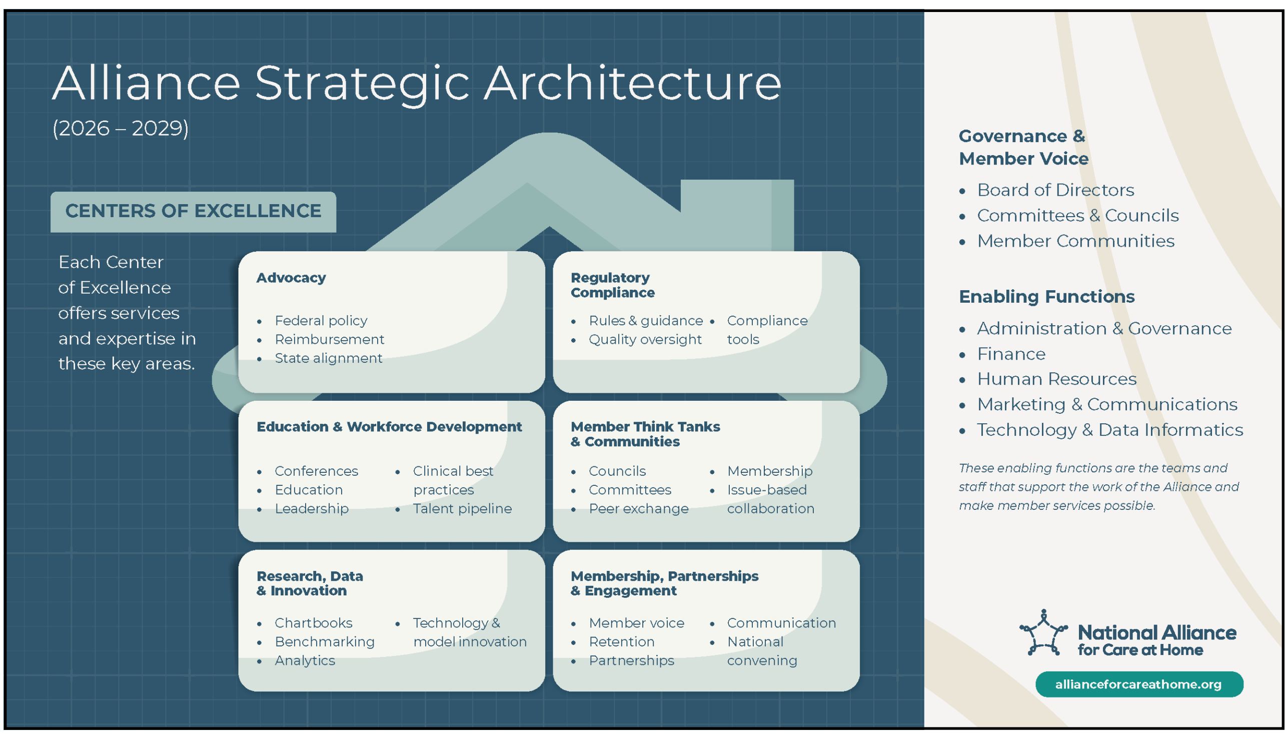
Alliance Strategic Architecture
(2026 – 2029)
CENTERS OF EXCELLENCE
Each Center of Excellence offers services and expertise in these key areas.
Advocacy
Federal policy
Reimbursement
State alignment
Regulatory Compliance
Rules & guidance
Quality oversight
Compliance tools
Education & Workforce Development
Conferences
Education
Leadership
Clinical best practices
Talent pipeline
Member Think Tanks & Communities
Councils
Committees
Peer exchange
Membership
Issue-based collaboration
Research, Data & Innovation
Chartbooks
Benchmarking
Analytics
Technology & model innovation
Membership, Partnerships & Engagement
Member voice
Retention
Partnerships
Communication
National convening
Governance & Member Voice
Board of Directors
Committees & Councils
Member Communities
Enabling Functions
Administration & Governance
Finance
Human Resources
Marketing & Communications
Technology & Data Informatics
These enabling functions are the teams and staff that support the work of the Alliance and make member services possible.
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Current State of Play

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Policy Shifts

Partisan division & volatility around enforcement priorities, payment rates, & coverage rules

Care at Home Is Unique

Home-based care brings common ground

High value for trust funds. Preferred by voters

Bipartisan Alignment

Care at home is preferred and effective

That's where every conversation starts

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Home Health

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Home Health Landscape

- State of Play in Recent Years | 2018 "Budget Neutral" Home Health Payment Reform Legislation / 2020-Present Implementation
  - Declining Real Dollar Outlays
  - Declining Visits
  - Price Stagnation in Face of Inflation
  - Agency Closures
  - Delays in Care
  - Increased Non-Admits

- 2026 Proposed Rule
  - Payment Policy
    - CMS proposes an overall increase of 2.4% or $420 million in payments to HHAs
    - Application of a 3.0% temporary adjustment continues to be of concern
  - Other Key Provisions
    - New provider enrollment and revocation authorities
    - RFI for home health-specific wage index
    - Home health quality reporting program updates to submission deadlines and a shift to calendar-year OASIS and HHCAHPS reporting
    - Consideration of the role of palliative care in home health

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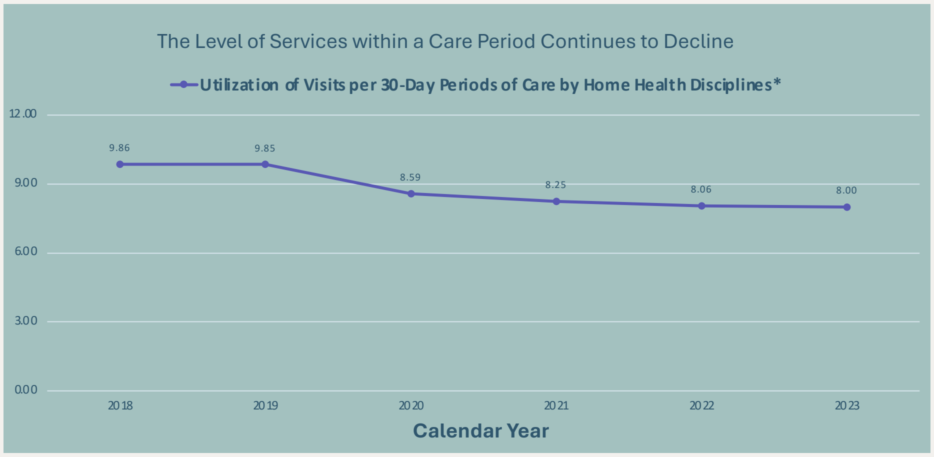
Home Health Utilization



Data Source: CY 2025 Home Health PPS Proposed Rule, Table 3
* Includes skilled nursing, physical therapy, occupational therapy, speech therapy, home health aide, and social work.

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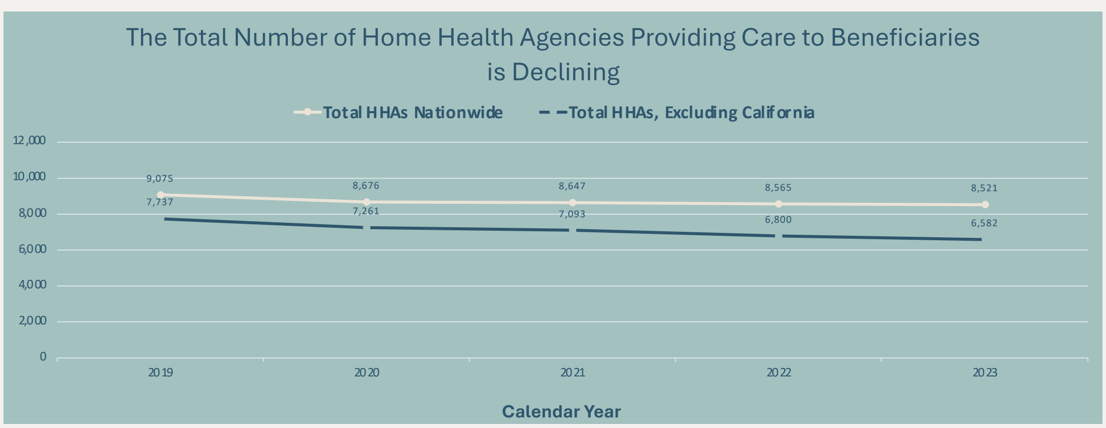
Overall Access to Home Health Services



Data Source: CMS, Market Saturation & Utilization State-County Dataset, January 1, 2019 – December 31, 2023
Certain methodological differences in the CMS Market Saturation & Utilization dataset may result in variability relative to other datasets.

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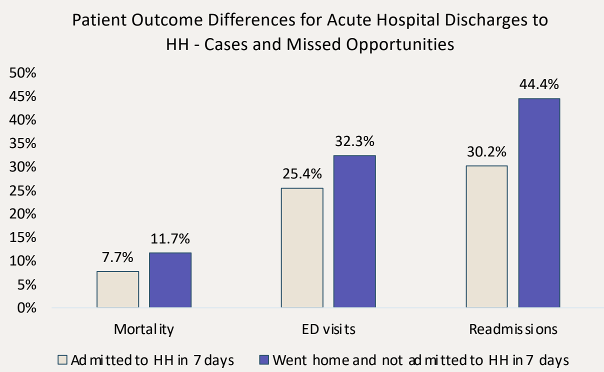
Better Patient Outcomes on Home Health

Analysis compared outcomes for post-acute discharges to home health that did and did not start a service



- Analysis found 520,115 acute hospital discharges referred to HH in Q1-2 2025.
- Compared outcomes for those who started home health within 7 days (58.4%) compared to those who had no subsequent services (34.5%).
- If these patients had made it to home health, the authors infer it would have prevented over 7,000 deaths and 25,000 rehospitalizations.

Data Source: CareJourney analysis of Q1-2 2025 CMS Home Health Claims

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HH PPS CY 2027 Proposed Rule | Payment

- For CY 2027, CMS proposes to increase payments to HHAs by 2.4%, or $420 million
- This reflects the impact of a 2.1% update in payments due to the statutorily-required annual payment update and a 0.3% increase in payments related to a proposed update to the Fixed-Dollar Loss (FDL) ratio used for outlier payments
- CMS is proposing to implement a -3% temporary adjustment – the same as what was applied last year
- Because these adjustments are “temporary,” CMS must first remove the -3% adjustment from the rate update last year before updating the payment rate by the statutorily-required payment update of 2.1% and then reapply the -3% adjustment
- This process results in a payment rate increase of 2.1% compared to last year’s rate

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HH PPS CY 2027 Proposed Rule | Key Provisions

- **Proposed provider enrollment changes aimed at addressing fraud, waste, and abuse**
- Discussion regarding the provision of palliative care under the Medicare home health benefit and future sub-regulatory guidance
- Proposed policy changes to better align the HH Quality Reporting Program (QRP) and the HH Value-Based Purchasing Model (VBP), including revisions to the data submission and correction timeframes
- A request for information on the construction of a home health specific wage index
- A request for information on future measure concepts under the HH QRP, specifically on advance care planning
- The Alliance is in conversation with its members and will submit comment ahead of the August 31 deadline.

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Medicaid HCBS

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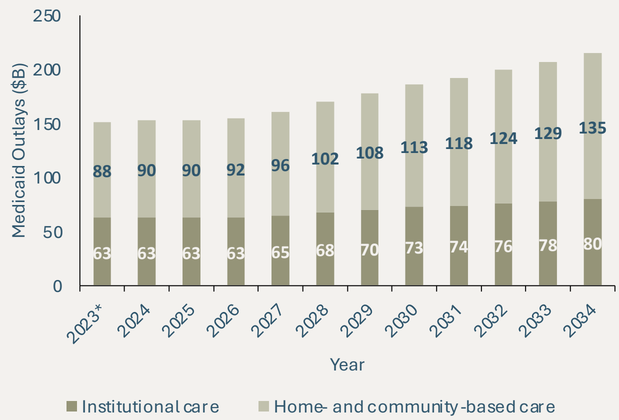
Medicaid Funding Threats

Existential Funding Threat Stemming from Medicaid Cuts under OBBBA

- Medicaid Home and Community-Based Services – *$88B in Federal Medicaid spending* – programs are experiencing existential funding uncertainties stemming from OBBBA.
- HCBS have taken on the 83% (5.9M) individuals receiving LTSS in Medicaid
- In 2025, OBBBA has made changes to reduce Medicaid spending and enrollment

CBO 2024 (Pre-OBBA) Medicaid Baseline LTSS Component - HCBS and Institutional LTSS, 2023-2023



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Sources: Chart derived from CBO Medicaid Baseline; ATI analysis of T-MSIS files

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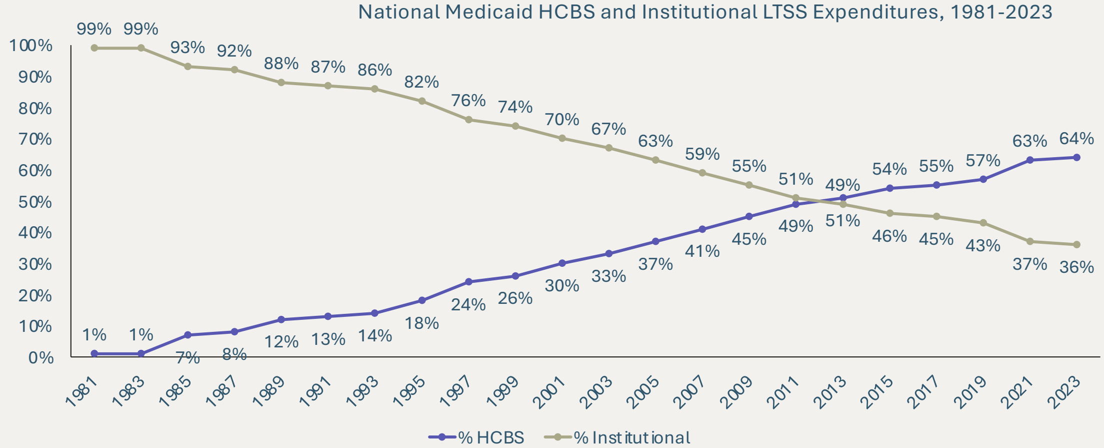
A Shift Toward the Home

National Medicaid HCBS and Institutional LTSS Expenditures, 1981-2023



Data Source: Mathematica analysis of the 2023 TAF Release 1

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Medicaid Key Issue Areas

- Program Integrity
  - We supports efforts to strengthen program integrity.
  - Fraud, waste, and abuse can be effectively prevented and addressed while reducing burden on legitimate providers.
- 80/20 Rule
  - The Alliance has led efforts to repeal, including:
    - One of the primary sponsors of legislation to repeal (introduced but not enacted);
    - Numerous engagements with the CMS, OMB, ACL and other parts of the Federal government;
    - Coordinating with state Medicaid programs to encourage similar advocacy
  - We believe, based on our advocacy efforts, that we will see a repeal of the 80/20 rule

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Home Care

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Top Home Care Considerations

- Workforce investment – Trade schools to expand our careforce
  - Credentialing
  - Address access barriers with evening, weekend, and hybrid options + wraparound supports
  - Employer partnerships
- Department of Labor Fair Labor Standards Act Home Care Worker Exemption
- VA Elizabeth Dole Act Implementation
- VA Community Care RFP
  - Increasing competition
  - Expanded quality
  - More intensive oversight

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Industry Headwinds

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Workforce

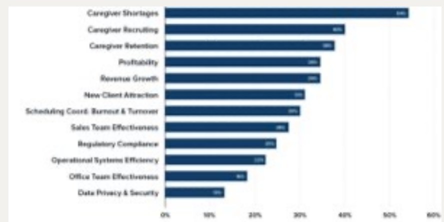
The U.S. will need 8.2 million more direct care workers by 2031 to meet demand, yet the industry struggles to recruit and retain workers. — *PHI National, 2023*

Home health and personal care aides are among the fastest-growing occupations in the U.S., projected to grow **by 25% from 2021 to 2031**—much faster than average. — *U.S. Bureau of Labor Statistics*

In 2023, **more than 70% of home care agencies turned away new clients** due to staffing shortages. — *National Association for Home Care & Hospice*

Industry Poll: Largest response categories workforce-related

- Demand is rising faster than workforce supply
- Workforce shortages
- Staffing challenges
- Labor costs / recruitment / retention



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Fraud Prevention and Oversight

Fraudulent activity jeopardizes legitimate providers and the integrity of care at home.

The Alliance is taking action.

Protecting integrity protects care.

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Changing the Narrative- Image Campaign

The Challenge

- A "fraud, waste, and abuse" narrative has taken hold in the press, and among lawmakers, conflating bad actors with the entire industry record.
- Left unchecked, this distorts public understanding of what care at home is.

The Solution

- Tell the truth, at scale: the Alliance launched an integrated paid and earned media campaign built on authentic stories from the patients and families care at home has actually served.
- Phase 1 is underway now, focusing on building our foundation, with paid ads reaching key demographics. On the earned media side, we've already secured media placements in outlets like The Washington Post, CNN, NPR, Axios, Modern Healthcare, and more.

How You Can Help

- To submit stories or express interest in contributing: email communications@allianceforcareathome.org.

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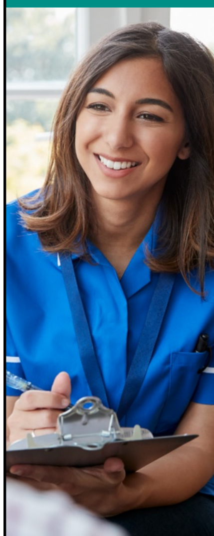

Tailwinds: Innovation & Transformation

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New Care Models

Select Initiatives / Areas

- Acute Hospital Care at Home
- Advancing Chronic Care with Effective, Scalable Solutions (ACCESS Model)
- Guiding an Improved Dementia Experience (GUIDE)
- Transforming Episode Accountability Model (TEAM)
- Home-Based Primary Care
- Home Hemodialysis
- Home Infusion
- Medicare Advantage Supplemental Home Care

Comprehensive Risk-Based / Value- Based Models

- ACO REACH / Long-term Enhanced ACO Design (LEAD)
- Medicare Advantage / Special Needs Plans / Medicaid Plan Alignment
- Program of All Inclusive Care for the Elderly (PACE)

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Technology Enabling Care in the Home

Technology is expanding care in the home capacity

- Telehealth
- Remote monitoring
- AI usage (scheduling, documentation support, etc.)

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How do we meet the moment?

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The Caregiving Crisis

- **Patient-Preferred:** Patients who received home health care reported higher satisfaction scores across five measures compared to those who did not. Greater utilization of hospice during the last six months of life is associated with improved patient experience and clinical outcomes.
- **Savings Generating:** Earlier hospice election and expand home health benefits could save Medicare billions annually.
- **Demonstrated Need:** By 2050, nearly 82 million Americans will be 65 or older — almost double today's 57.8 million.

The United States population age 85 and older is expected to triple from 2020-2060 to over 19 million people.

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91% OF VOTERS BELIEVE HOME HEALTH SERVICES SHOULD BE AVAILABLE.

Voters agree: Medicare patients should always have access to home health. **Home care, not cuts.**

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Key Advocacy Priorities

Protect the Integrity of Care at Home

Eliminate fraud, waste, and abuse and advocate for targeted risk-based enforcement of bad actors with appropriate oversight

Ensure Payment Adequacy

Push back against home health cuts and ensure reimbursement exceeds operating costs

Modernize Benefits to Increase Access

Hospice CARE Act and Home Health benefit reform

Keep Hospice Out of MA

Protect the Medicare Hospice FFS benefit and oppose efforts to carve hospice into Medicare Advantage

Reduce Audit Burden

Work with CMS and MACs to reduce audit burden on legitimate providers operating in good faith

Expand Palliative Care

Work with CMS to expand community-based palliative care

Promote Medicaid HCBS Access

Repeal 80-20, reduce regulatory barriers, and ensure appropriate access to home and community-based services

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Join or get involved with the Alliance.

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This work is about how people live.

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