

January 5, 2018

Seema Verma, MPH Administrator, Centers for Medicare & Medicaid Services U.S. Department of Health and Human Services 7500 Security Boulevard Baltimore, MD 21244-1850

Dear Administrator Verma:

On behalf of the American Speech-Language-Hearing Association, I am writing to request that the Centers for Medicare & Medicaid Services (CMS) issue guidance to clinicians on its plans to address the expiration of the therapy cap exceptions process and "extender" policies that affect Medicare payments. In addition to the therapy caps, our members are particularly affected by the elimination of the floor for the geographic practice cost index (GPCI).

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 191,500 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

Historically, if Congress failed to prevent the implementation of a hard therapy cap or significant payment reductions—as called for under the sustainable growth rate formula (SGR)—before January 1 of a given year, CMS issued guidance informing clinicians that they would hold claims for 14 days to allow for a legislative fix. This guidance might also reference an ability to retroactively fix any claims submitted if the legislative fix allowed CMS to do so, which it always has. While we recognize that Congress will likely reinstate the therapy cap exceptions process and address the various extender policies (e.g., the floor for the GPCI), it is important for the provider community to know that CMS has a plan in place in the event that Congress does not act.

CMS issued guidance will ensure that clinicians plan appropriately for payment reductions, similar to those that will be experienced by the reductions to the GPCI. In addition, guidance will assist clinicians, such as speech-language pathologists, on how to inform their patients about their ability to continue to receive therapy services without an exceptions process. Beneficiaries need to plan appropriately for a hard cap by either preparing to pay out-of-pocket to continue services or identify an outpatient hospital department in their community where they can receive treatment.

ASHA has experienced a dramatic increase in inquiries from our members about what they should do in the event that Congress does not act to address Medicare payment policies, which have significant negative implications for them and the patients they treat. ASHA understands that CMS is required to implement the law and we hope that issuing guidance will minimize confusion and ensure all who are affected by Medicare payment policy are prepared.

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Thank you for considering our request for guidance. If you have any questions, please contact Sarah Warren, MA, ASHA's director of health care regulatory advocacy, at swarren@asha.org.

Sincerely,

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Elise Davis-McFarland, PhD, CCC-SLP 2018 ASHA President