



## ISSUE PAPER

# American Association for Homecare Continues its Strong Support of Efforts to Prevent Medicare Fraud and Abuse

**The American Association for Homecare remains committed to rooting out fraud and abuse** and is eager to continue its work with the Centers for Medicare and Medicaid Services (CMS) to improve program integrity for Medicare. The Association and its members support the provision of reliable, and effective homecare products and services appropriate to each individual's needs, health and safety as well as compliance with applicable federal, state, and local laws and regulations.

**AAHomecare refuses to tolerate the theft of taxpayers' dollars set aside for the care of Medicare beneficiaries.** We advocate zero tolerance for Medicare fraud and abuse of any kind. AAHomecare will continue to assist Congress, CMS and federal law enforcement agencies in efforts to ensure the integrity of the Medicare program.

**We caution against any overgeneralizations about the durable medical equipment sector.** The vast majority of home medical equipment providers are operated by hard-working Americans, in many cases family operations involving multiple generations, who are dedicated to providing the best possible therapies and medical equipment to treat and improve medical conditions.

We offer the following several suggestions for addressing fraud and abuse:

- The guiding principle should be to provide Medicare beneficiaries with medical equipment technology and therapies that are medically necessary and appropriate to give the patient a healthier and more satisfying life.
- Medicare coverage, coding, reimbursement, and documentation policies as well as standards for quality, should be unambiguous. AAHomecare has worked with CMS and its contractors to revise coding for power wheelchair products to improve Medicare coding and coverage practices. The Association also has embraced the federal quality standards and accreditation requirements for durable medical equipment required by the Medicare Modernization Act of 2003 (MMA). We recommended that CMS adopt standards that were far more stringent than what the agency adopted in its final standards issued in November 2006.
- The Medicare program has numerous anti-fraud and abuse safeguards in place that must be more effectively enforced. Currently, the Medicare program requires that suppliers adhere to specific supplier standards (42 CFR 424.57) along with mandatory accreditation requirements in order to obtain and maintain billing privileges.
- The Association recommends that CMS hold accountable Medicare contractors charged with enforcing Medicare program integrity and enrollment requirements along with mandatory accreditation requirements. These standards are in addition to the multiple pre- and post-payment tools at CMS' disposal.

*This is an excerpt from a statement by the American Association for Homecare to the Committee on Ways and Means Subcommittee on Health and Subcommittee on Oversight, U.S. House of Representatives on Medicare Program Integrity, March 8, 2007.*