

America's Home Respiratory Patients Can't Afford to Lose Access to Care

Since January 2020, HHS has rightly extended the COVID-19 Public Health Emergency nearly a dozen times, allowing for the continuation of critical regulatory flexibilities. The flexibilities have been especially important for millions of patients living with debilitating diseases—such as ALS, COPD, cystic fibrosis, and long COVID—and require home respiratory therapies to help them breathe.

The end of the Public Health Emergency on May 11 could wreak havoc on the already stressed health care system, as well as the roughly one million individuals who began receiving home respiratory therapy during the pandemic.

Flexibilities were Vital for this Exceptionally Vulnerable Population

The importance of these flexibilities cannot be overstated. Consider Barb, a fictional patient who illustrates the typical patient experience. When COVID-19 struck, the Centers for Medicare & Medicaid Services (CMS) took bold steps to ensure patient access by:



Extending home respiratory care access to patients diagnosed with acute medical conditions, including COVID-19



Eliminating proof of delivery signatures and other time-intensive paperwork requirements



Suspending certain qualification requirements



All of this was critical to patients like Barb maintaining independence, enhancing their quality of life, and staying out of the hospital.

End of Flexibilities Would Threaten Patient Access and Overwhelm Providers



When the PHE ends, patients like Barb must be assured that they will not lose access to the home respiratory supplies and equipment. Without clear expectations about what will happen after the PHE, patients fear they will need to requalify for the treatments they have already used safely and effectively in some cases for years.

Not only would this disrupt patient access, but it would also overwhelm the country's already overburdened physicians, who would be forced to re-examine all of these patients and meticulously fill out a growing mountain of paperwork.

CMS: Protect Patient Access to Home Respiratory Therapies without Requiring Requalification and Implement Balanced Audit Requirements for Patients Who Started Therapy during the Public Health Emergency!