

Congress of the United States
Washington, DC 20515

January 14, 2022

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services (CMS)
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Administrator Brooks-LaSure,

We write to you today to express our deep concern over the Centers for Medicare and Medicaid Services' (CMS) plan to implement the Inpatient Rehabilitation Facility Review Choice Demonstration (IRF RCD) in Alabama, Pennsylvania, Texas, and California. In addition, CMS plans to expand this IRF RCD into other states in the next phase by applying the demonstration to IRFs located in any state that bill to the Medicare Administrative Contractor (MAC) regions in which those four states are located. When fully implemented, CMS estimates that IRF CRD will apply to 526 freestanding rehabilitation hospitals and hospital-based inpatient rehabilitation units across the United States.

America's IRFs provide important medical rehabilitation care and services that improve the quality of life for thousands of Medicare beneficiaries and other patients experiencing life-altering injuries or illnesses. These IRFs also play a critically important role in our states' response to the COVID-19 pandemic.

While CMS's efforts to educate and train healthcare providers about Medicare's coverage requirements for IRF services are important, we are concerned that IRF RCD will substantially increase administrative burdens for rehabilitation physicians, nurses, therapists, and other caregivers in IRFs. It will likely result in a substantial increase in the number of claim denials experienced by IRFs and could reduce or eliminate patients' access to rehabilitation hospital care and services. Like all healthcare providers, IRFs are experiencing unprecedented challenges to identify, hire, and maintain their staffs, which will likely persist into 2022 and perhaps beyond next year. In such an environment, a 100% medical audit of IRFs' entire Medicare fee-for-service patient population will only exacerbate these challenges.

Medicare's IRF coverage regulations require that only a rehabilitation physician can determine whether those regulations' requirements, such as whether a patient meets the intensive therapy "3 Hour Rule" or requires multidisciplinary care, have been met in order to admit the patient. Auditing and reviewing these various medical judgment decisions that are unique to individual patients will be tedious, and should involve personnel who are as skilled and experienced with medical rehabilitation and caring for IRF patients as the rehabilitation

physicians who admitted the patients. CMS should place rehabilitation physicians at the center of medical necessity determinations under the IRF RCD, though we are concerned this will not happen.

Therefore, we respectfully urge CMS to withdraw the IRF RCD and not implement it during 2022. If IRF RCD is implemented thereafter, CMS should be fully transparent in sharing data, details, and information derived from the demonstration with IRFs, Congress, and other IRF stakeholders. Additionally, CMS should ensure that adequate safeguards are incorporated into the demonstration, such as opportunities for IRFs to provide direct feedback to CMS and MACs pertaining to the education, training, and monitoring components of IRF RCD, both prior to the demonstration's development and implementation and throughout its duration. Importantly, CMS should develop and implement IRF RCD in consultation with rehabilitation physicians who care for IRF patients.

We appreciate the work that CMS is pursuing to ensure that Medicare continues to be viable for the tens of millions of beneficiaries who depend upon this important program for their healthcare services and benefits. Thank you for your leadership and we look forward to a timely response.

Sincerely,



David Kustoff
Member of Congress



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Member of Congress



Eric A. "Rick" Crawford
Member of Congress



Lizzie Fletcher
Member of Congress



Bill Posey
Member of Congress



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Member of Congress



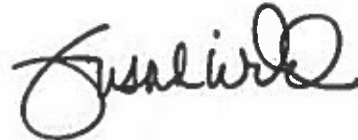
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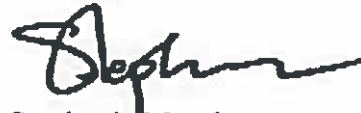
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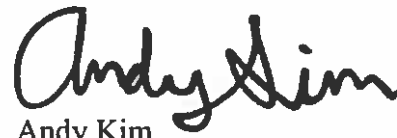
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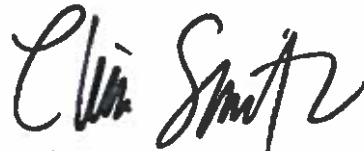
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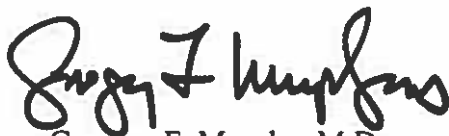
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