

July 18, 2016

The Honorable Ed Markey  
255 Dirksen Senate Office Building  
Washington, D.C. 20510

The Honorable Michael Bennet  
261 Russell Senate Office Building  
Washington, D.C. 20510

The Honorable John Cornyn  
517 Hart Senate Office Building  
Washington, D.C. 20510

The Honorable Rob Portman  
448 Russell Senate Office Building  
Washington, D.C. 20510

Dear Senators Markey, Cornyn, Bennet, and Portman:

The undersigned organizations write to express our strong support for S. 3130, the “Independence at Home Act of 2016” introduced by Senator Edward J. Markey (D-MA), John Cornyn (R-TX), Michael Bennett (D-CO) and Rob Portman (D-OH). This bipartisan legislation expands the highly successful Independence at Home (IAH) demonstration project (1866E of the Medicare Act) that has been providing home-based primary medical care to nearly 10,000 elders with severe chronic illness and disability over the last four years.

The IAH model uses interdisciplinary teams to coordinate all medical and social services in eligible patients’ homes, providing high quality clinical care and excellent patient experience while reducing total Medicare costs. Several key components make it successful:

- IAH is designed to provide appropriate levels of care for a carefully targeted group of the most complex, high cost beneficiaries.
- IAH requires an interdisciplinary team to provide access to care 24 hours a day, 7 days a week and to offer in-home visits within 48 hours of hospital or ER discharge, including medication reconciliation.
- IAH prevents unnecessary hospitalizations and misuse of medications, and discourages overuse of services with shared savings incentives.
- IAH participation is voluntary for elders and family members and other caregivers who play an important role in care for patients.
- IAH has rigorous quality standards that assure better patient and family experience and high quality of clinical outcomes.
- IAH is backed by a large body of evidence showing that Home-Based Primary Care (HBPC), as applied in the IAH demo, enhances quality of care & reduces cost for seriously ill elders.
- After only one year, the IAH Medicare demonstration program showed savings of \$3,070 per beneficiary, reducing total costs by over \$25 million, and providing the Centers for Medicare and Medicaid Services with \$13 million in savings.

Over the next two decades, the number of people aged 65 and older will nearly double to more than 72 million, or one in five Americans. Over two million seniors are living with disability and multiple chronic illnesses such as heart disease, stroke, cancer, diabetes, and Alzheimer's disease.

The "Independence at Home Act of 2016" expands a targeted, proven, bipartisan elder care model so that it can benefit more Medicare beneficiaries with severe chronic illness and disability through coordinated, home-based primary care. Over two million seniors who are living with disability and multiple chronic illnesses such as heart disease, stroke, cancer, diabetes, and Alzheimer's disease would meet the eligibility criteria for IAH. Most importantly, the Act would enhance the dignity and independence of these seniors by allowing them to stay where they are most comfortable, at home.

We applaud this legislation and look forward to continued collaboration to improve access to care for this high-needs population.

Sincerely,

AARP  
Academy of Spinal Cord Injury Professionals  
Alliance for Aging Research  
Allscripts  
Alzheimer's Foundation of America  
American Academy of Home Care Medicine  
American Academy of Hospice and Palliative Medicine (AAHPM)  
American Academy of PAs  
American Academy of Physical Medicine and Rehabilitation  
American Association of Nurse Practitioners  
American Association on Health and Disability  
American Congress of Rehabilitation Medicine (ACRM)  
American Foundation for the Blind  
American Geriatrics Society  
American Occupational Therapy Association  
American Osteopathic Association  
American Psychological Association  
Aspire Health  
Association for Ambulatory Behavioral Healthcare  
Association of Assistive Technology Act Programs (ATAP)  
Banner Home Care and Hospice  
Blue Shield of California  
Brain Injury Association of America  
Campaign to End Unwanted Medical Treatment  
Capital Caring  
Caregiver Action Network  
Centene Corporation

Center to Advance Palliative Care (CAPC)  
Cerner  
Coalition to Transform Advanced Care (C-TAC)  
Compassion & Choices  
Corporation for Supportive Housing  
Easterseals  
Enterprise Community Partners  
Family Caregiver Alliance, National Center on Caregiving  
Gerontological Advanced Practice Nurses Association (GAPNA)  
Home Centered Care Institute  
Hospirus Health  
Kindred Healthcare  
Lakeshore Foundation  
Landmark Health  
LeadingAge  
LeadingAge Ohio  
Maryland-National Capital Homecare Association  
MedStar Health  
Mental Health America  
Mount Sinai  
National Alliance for Caregiving  
National Association for Home Care and Hospice  
National Association for the Advancement of Orthotics and Prosthetics  
National Association of Social Workers (NASW)  
National Association of State Head Injury Administrators  
National Association of States United for Aging and Disabilities  
National Coalition on Health Care  
National Committee to Preserve Social Security and Medicare  
National Council on Aging  
National Partnership for Hospice Innovation  
National Partnership for Women & Families  
Northwell Health  
Penn Medicine  
Schizophrenia and Related Disorders Alliance of America  
Society of General Internal Medicine  
The ARC of the United States  
The Jewish Federations of North America  
The Retirement Research Foundation  
Trinity Health, Livonia Michigan  
U.S. Medical Management  
United Spinal Association  
Visiting Nurse Associations of America – VNAA  
VNA Health Group  
West Health