

August 15, 2023

Submitted electronically via: <http://www.regulations.gov>

Alison Barkoff
Acting Administrator & Assistant Secretary for Aging
Administration for Community Living
Department of Health and Human Services
330 C Street SW
Washington, DC 20201

RE: Older Americans Act: Grants to State and Community Programs on Aging, Indian Tribes for Support and Nutrition Services, Supportive and Nutritional Services to Older Hawaiian Natives, and Allotments for Vulnerable Elder Rights Protection Activities (ACL-AA17-P)

Dear Administrator Barkoff,

Thank you for the opportunity to submit feedback on the notice of proposed rulemaking (NPRM) to modernize the implementing regulations of the Older Americans Act of 1965 (OAA).

[Moving Health Home \(MHH\)](#) is a coalition of health care organizations with a bold vision to make the home a site of clinical service. Our members share in the belief that experience during the pandemic has accelerated the day when care in the home is an option for patients. We look forward to working to ensure that home is part of the health care options for patients in the future.

For our members, clinical care in the home refers to a spectrum of health services provided in the home or place of dwelling outside of a facility, such as hospital-level or acute care, primary care office, skilled nursing and therapy services, and hospice. Services may include routine physician visits, chronic disease management, laboratory and diagnostic services, home infusion, in-home dialysis, and other care provided in the home setting rather than a facility, and regardless of age and health conditions.

At the core, we want to remove regulatory barriers to ensure all patients may choose to receive clinical care in the home and take advantage of the convenient, high-quality care that comes when patients receive home-based care. Importantly, we believe that care in the home contributes to health equity by giving historically disenfranchised populations the option to receive care on their own terms. Providers will be guests in the homes of patients with the institutional aspects of the health care “system” taken away, which will promote trust and communication.

Patients have indicated that they want to receive care at home, with the demand for services provided in the safety of a patient’s home soaring during the pandemic. In fact, according to a [recent survey](#), 85 percent of adults say it should be a high priority for the federal government to expand Medicare coverage for at-home health care. At the same time, an [overwhelming majority](#) of people who have received care in the home were satisfied (88 percent) and would be likely to recommend to family and friends (85 percent). We believe older adults should have the opportunity to choose the best site of care for their medical needs and preference, whether that be in the home or the facility.

In this response, we would like to take the opportunity to ask that the Administration for Community Living (ACL) to consider home as a clinical site of care when medically appropriate and preferred by the patient. In addition, we applaud ACL for addressing at-home nutrition and updating its definitions of a caregiver.

A. Home as a Clinical Site of Care

Older adults overwhelmingly want to continue to live independently. According to a [survey](#) conducted by the American Association of Retired Persons (AARP), 77 percent of adults 50 and older want to remain in their homes. A [survey from NORC](#) found 88 percent of Americans would prefer to receive any ongoing care in their home or with loved ones. Although [more than 10,000](#) baby boomers turn 65 every day, only about 12 percent of the nation's two million home-limited patients currently receive home-based health care.

Home-based health care spans an array of medical services delivered to a patient in their homes, including caregiving and personal care services, wellness and safety assessments, assistance with activities of daily living, medication management, care coordination, management of chronic conditions, skilled nursing or therapy services, home-based primary care, hospital-at-home, transition care, and hospice care.

The level of services provided depends on a patient's acuity; some patients may only need informal caregiving from family members or personal caregivers. Others who are post-discharge or with acute needs may require skilled home care or therapy from nurses or physical therapists. Patients with chronic conditions who choose to remain in their homes may benefit from more regular medical care often provided through team-based care using physicians, nurse practitioners and physician assistants alongside social service providers.

As the ACL considers updates to the OAA, it is important to consider older Americans' common concerns about aging, [including](#) losing independence with age (67 percent), being without family or friends (60 percent), and having unmet social needs (57 percent). About 53 percent of older adults are concerned about leaving their home and moving into a nursing home, and 54 percent are concerned about experiencing health and safety issues in a retirement community or nursing home.

We urge ACL, in partnership with the Department of Health and Human Services (HHS), to consider the full spectrum of home-based health care as an option for older adults to receive care in the home.

B. Clarification on Home-Delivered Meals Eligibility

During the COVID-19 pandemic, ACL provided guidance on innovative service delivery options that provided meals to older adults. MHH was supportive of ACL's guidance on innovative service delivery options that provided meals to older adults. We must meet patients where they are, whether that is in the community or their homes. Efforts to incentive care in the home are welcomed changes to dismantle the biases that care can only be delivered in a facility-based environment.

In the proposed rule, ACL is proposing to clarify that home-delivered meals may be provided via home delivery, pick-up, carry-out, or drive-through and that eligibility for home-delivered meals is not limited to those who many by identified as "homebound." MHH applauds ACL for clarifying the eligibility for home-delivered meals. We applaud ACL for its interest in prioritizing the availability of home-delivered

meals for older Americans, and we urge ACL to continue to encourage delivery of care within the home by incentivizing primary care, dialysis, infusion, and other services in the home.

C. Proposal to Update Definitions of Significant Terms

Family Caregiver & Older Relative Caregiver

Moving Health Home applauds ACL for its proposal to align the definitions of family caregiver and older relative caregiver as specified by the Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act of 2017 ([42 U.S.C. 3030s](#)). Data collection efforts have not captured the full range of caregiving, which have often been limited to specific caregiving situations. The care provided is diverse and intentionally tailored. MHH appreciates ACL's effort to align these definitions as part of its 2022 National Strategy to Support Family Caregivers.

Consideration of Definition Home-Based Health Care

Currently, there is no universal definition of home-based health care. ACL should consider a definition of home-based health care to ensure that older adults have the option to receive care from their own home. Home-based care is an imperative alternative to facility-based care for many older adults. Home-based health care [improves](#) health outcomes while reducing costs. As home-based health care become a more prominent option for care, defining this term is essential to fully incorporate home-based health care as a feasible option in the health care system.

Thank you for considering our comments. We look forward to working with ACL and welcome the opportunity to provide further feedback on how to achieve our shared goals. Please do not hesitate to reach out to Elizabeth Simpson at esimpson@movinghealthhome.org with any questions regarding our comments or if we can be a resource to you in any way.

Sincerely,



Krista Drobac
Moving Health Home