

September 7, 2023

The Honorable Chiquita Brooks-LaSure, Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1784-P

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

RE: CMS-1784-P: Medicare and Medicaid Programs; CY 2024 Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment and Coverage Policies

Dear Administrator Brooks-LaSure:

The Wisconsin Aging Advocacy Network ([WAAN](#)) is a collaboration of organizations and individuals working with and for Wisconsin's older adults to shape public policy and improve the quality of life for older people. WAAN views the CMS-1784-P proposed change as a positive major impact on family caregivers in our state.

Wisconsin is one of the few states that has not yet adopted the [CARE Act](#). The proposed change to allow practitioners to be compensated for time spent training family caregivers could provide the solution we need to clear a hurdle that has been standing between families, providers, and Wisconsin state legislators for years.

Comments:

- While we at WAAN applaud that the proposed rule would provide payment for services provided in clinic settings, it is important to recognize that many caregivers are employed and working during regular clinic hours, which means they may not always be able to attend clinic appointments. It is essential to include virtual methods for caregiver training and involving caregivers.
- It is important for the new billing code to be available to practitioners in hospital and home settings, in addition to healthcare clinics. Training and involving caregivers during times of patient transitions (hospital to home, nursing home to home, etc.) is critical.

- Registered Nurses (including home health nurses), social workers and other licensed professionals are often the staff spending the most time with patients and caregivers and should also be included in the non-physician practitioners list.
- Amend language or better define the definition of "certain caregivers." We propose that the rule broaden the definition of caregiver in the Caregiver Training Services proposal to include all those listed in the [RAISE Family Caregivers Act](#) definition of family caregiver – "an adult family member or other individual who has a significant relationship with, and who provides a broad range of assistance to, an individual with a chronic or other health condition, disability or functional limitation," as well as "unpaid individuals of all ages" providing assistance (added by the RAISE Advisory Council) and individuals designated as supporters on supported decision-making (SDM) agreements related to assistance with health and long-term care decisions.
 - The definition of "certain diseases or illnesses" must be broadened to reflect the variety of acute and chronic diseases of the patients served by family caregivers, including dementia.

Conclusion

Thank you for your consideration of the Wisconsin Aging Advocacy Network's comments. We appreciate CMS's commitment to supporting and expanding access to critical caregiver training and to advancing coordinated home and community-based care available to all family caregivers and every group of individuals across the lifespan.

Sincerely,



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