March 25, 2020

The Honorable Seema Verma
Administrator
Centers for Medicare & Medicaid Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Administrator Verma:

The undersigned organizations request that the Centers for Medicare & Medicaid Services (CMS) provide a waiver to modify the certification and recertification requirements for Home Use of Oxygen (NCD 240.2) during the current COVID-19 emergency, at least through July 15, 2020. Additionally, we request that CMS modify the requirement of proof of delivery for billing purposes, at least through July 15, 2020. We appreciate the flexibility that CMS has already instated during President Trump’s emergency declaration. Patients with underlying medical conditions that require supplemental oxygen are extremely vulnerable during the COVID-19 pandemic. Temporarily modifying the certification requirements for Home Use of Oxygen would further help to protect populations who are at high-risk and reduce the burden on the healthcare system.

It is critical that patients who need oxygen at home receive this benefit without disruption. Patients with conditions requiring home oxygen, such as lung disease and cardiovascular disease, are at high-risk of complications from the virus that causes COVID-19. These patients need to remain as isolated as possible and avoid unnecessary visits to healthcare facilities where they have a higher risk of being exposed to the virus that causes COVID-19. In addition to protecting the health of individuals who are at high-risk for complications from the virus that causes COVID-19, it is important to avoid vulnerable patients being unnecessarily exposed to the virus because this would further tax our healthcare system.

We are requesting that CMS waive the requirement for an oxygen titration study and in-person visit for the initial certification, recertification (currently required every 12 months), and revised certification of patients for Home Use of Oxygen. It is not possible to complete an oxygen titration test remotely. Most patients do not have the necessary equipment, such as a pulse oximeter, because the equipment is not a covered benefit for individuals. Additionally, the test must be completed by a trained healthcare provider to ensure accurate administration of the test and the safety of the patient. People who are not trained healthcare providers will likely have a high rate of error in measurement while trying to self-administer a study. Patients could also be at risk from factors such as dangerous oxygen desaturation while completing the exercise testing portion of the study if not monitored by a trained healthcare professional. We ask that during this crisis, the healthcare professional’s prescription serve as the necessary documentation for certification for Home Use of Oxygen.
We are also requesting that CMS advise suppliers that they should not be obtaining recipients’ signatures as proof of delivery during the COVID-19 crisis. Requiring a signature from a patient or a patient’s household member introduces unnecessary contact and risk for spreading of the virus causing COVID-19. We ask that CMS accept suppliers’ attestation of delivery of billed items as fulfillment of the proof of delivery requirement.

We urge CMS to continue their efforts to protect patients by providing a waiver for oxygen titration study and in-person visit requirements for certification, recertification, and revised certification for the Home Use of Oxygen. Further, we urge CMS to modify the requirement for proof of delivery for billing purposes.

Thank you for your work to protect vulnerable populations and keep the community healthy.

Sincerely,

American Association for Respiratory Care
American Lung Association
American Thoracic Society
COPD Foundation
LAM Foundation
National Association for the Medical Direction of Respiratory Care
Pulmonary Fibrosis Foundation
Pulmonary Hypertension Association
Three Lakes Foundation