



## 2026 Advocacy Day: Policy Initiatives FAQs and Suggested Responses

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*This document is designed to help you answer frequently asked questions from Members of Congress and their staff during Advocacy Day meetings. Use this as a quick reference, keep answers brief, tie back to real-world impact, and always reinforce the ask. **If You Don't Know the Answer: "I'm not sure, but I'm happy to follow up with more information from our team."***

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### PROGRAM INTEGRITY AND MEDICAID FRAUD:

#### Things To Consider:

- Lead with your own accountability systems → Talk about audits, compliance checks, payroll verification, documentation requirements, and how closely your business is already monitored.
- Make it clear that you support program integrity → Align with the goal, then explain how to do it right.
- Bring it back to access → Overly broad policies do not just affect providers, they reduce care availability for patients.

#### What is the issue being raised?

CMS and the Administration are exploring new approaches to identify and prevent fraud, waste, and abuse across federal health care programs, including home- and community-based services.

#### What is HCAOA's position?

We strongly support program integrity and efforts to prevent fraud and abuse. Policies should be risk-based, evidence-driven, and tailored to provider types.

#### Is home care a high-risk area for fraud?

No. Available federal data does not support categorizing home care as a high-risk sector.

Most improper payments are driven by documentation errors, not fraud, and tend to be concentrated in more complex billing environments.

#### What safeguards already exist in home care?

Home care already has strong oversight mechanisms, including:

- State licensure and regulatory requirements
- Care plans and visit documentation
- W-2 employment models (verifiable payroll and supervision)
- Electronic Visit Verification (EVV), which tracks time, location, and services delivered in real time.

#### What is the concern with new federal proposals?

A one-size-fits-all approach could add administrative burden without improving program integrity and may reduce provider participation.

#### How could that impact access to care?

Additional regulatory burden could:

- Increase provider costs
- Discourage participation in Medicaid
- Limit access to care for seniors, individuals with disabilities, and veterans

#### What should CMS and Congress do instead?

- Focus on targeted, risk-based enforcement

- Leverage existing tools like EVV
- Improve data sharing across programs
- Invest in provider education to reduce documentation errors

### **What is the ask?**

We are asking policymakers to pursue balanced, risk-calibrated program integrity solutions that protect taxpayer dollars without restricting access to care.

## **CREDIT FOR CARING ACT:**

### **Things To Consider:**

- Lead with a real family caregiver story → A working adult balancing a job and caregiving responsibilities and the financial strain that comes with it.
- Emphasize workforce and economic impact → Caregivers leaving the workforce affects local economies and tax revenue.
- Frame this as cost avoidance → Supporting caregivers helps delay or prevent Medicaid-funded institutional care.

### **What is the Credit for Caring Act?**

A federal tax credit of up to \$5,000 to help offset caregiving expenses for working family caregivers.

### **Why focus on tax credits?**

Refundable tax credits provide direct financial relief, especially for low- and middle-income families, unlike deductions or savings accounts.

### **Is this something that could move through reconciliation or a tax package?**

Yes. This is a strong candidate for inclusion in a tax or reconciliation vehicle because it is structured as a tax credit.

### **Why is this needed?**

53 million Americans provide unpaid care, and many take on debt due to caregiving.

### **How does this help the system overall?**

Supporting caregivers helps individuals remain at home longer and eases pressure on the broader care system.

### **Is this duplicative of other policies?**

No. This complements existing tools and fills gaps for families who cannot benefit from current programs.

### **What is the ask?**

We are asking you to co-sponsor and support the Credit for Caring Act (S. 925 / H.R. 2036) and other policies that help family caregivers cover out-of-pocket costs.

## **CONTINUOUS SKILLED NURSING (CSN) ACT:**

### **Things To Consider:**

- Start with a real-world example → Share a story of a medically complex patient in your community who needs continuous care at home and what happens when it's not available.
- If you provide CSN: Highlight access challenges → Are you turning away cases, facing waitlists, or struggling to fully staff high-acuity patients?

- If you don't provide CSN: Explain why → Workforce shortages, reimbursement challenges, or regulatory barriers that prevent you from offering this level of care.
- Connect to system impact → Lack of CSN affects everyone, patients stay in hospitals longer, families take on clinical care, and providers across the continuum feel the strain.
- Make it local and tangible → What does this look like in your area? Rural gaps, hospital discharge delays, or families without options.

### **What is Continuous Skilled Nursing (CSN)?**

Continuous Skilled Nursing is high-acuity care provided in the home for medically complex individuals, including those who rely on ventilators or other life-sustaining technologies. The bill establishes consistent national standards of care.

### **Why is this needed?**

Current federal standards are designed for intermittent home health, not continuous high-acuity care, creating barriers to access.

### **Who does this impact?**

Medically fragile children and adults who require 4–24 hours of skilled nursing care per day.

### **Won't this increase Medicaid costs?**

No. CSN helps individuals remain at home and avoid more expensive hospital or institutional care.

### **How would this legislation improve access to care?**

It modernizes definitions, reduces uncertainty, and supports provider participation to expand access.

### **What is the ask?**

We are asking you to co-sponsor and support the Continuous Skilled Nursing Act (S.1920/H.R.6592).

## **IMPROVING CARE FOR VETERANS**

### **Things To Consider:**

- Lead with the impact on veterans → This is about ensuring veterans can access care in their homes when they need it.
- Use a real example if possible → A veteran whose hours were reduced, or who lost access due to rate cuts.
- Highlight access issues happening now → Reduced hours, fewer providers participating, or gaps in rural areas.
- If you serve veterans directly → Share what has changed in rates, hours, staffing, or participation.

### **What challenges are providers facing in VA home care?**

Recent VA rate cuts are making it financially unsustainable to provide care.

### **How does this impact veterans?**

Providers are unable to cover the cost of care delivery, leading to reduced participation and decreased access for veterans.

### **What should Congress do?**

- Direct the VA to reassess reimbursement rates
- Ensure a smooth transition to NextGen
- Provide oversight to protect access to care

### **What is the ask?**

We are asking Congress to protect veterans' access to home care.

## **ESTABLISH A HOME CARE VISA:**

### **Things To Consider:**

- Start with the workforce reality → We are turning away patients because we do not have enough caregivers.
- Use real examples → Open shifts, unfilled cases, or geographic areas where you cannot staff care.

### **What is the Home Care Visa proposal?**

A temporary, industry-specific visa designed to address workforce shortages in home care.

### **How would it work?**

- 24-month initial term, renewable once
- Tied to a specific employer
- No path to citizenship
- Includes training and relocation support

### **Why is this needed?**

Providers nationwide are turning away clients due to workforce shortages, limiting access to care.

### **Would this replace U.S. workers?**

No. This would supplement the domestic workforce and address unmet demand.

### **Why not use existing visa programs?**

Current programs are not designed for the home care workforce and do not meet the industry's needs.

### **What is the ask?**

We are asking Congress to support the creation of a home care workforce visa.