

Long-term and Post-acute Care Providers



The American Hospital Association's (AHA) nearly 5,000 member hospitals, health systems and other health organizations – includes 3,300 executives from general and free-standing specialty hospitals that provide acute and post-acute care services. Post-acute care settings include long-term care hospitals (LTCHs), inpatient rehabilitation facilities (IRFs), skilled nursing facilities (SNFs) and home health agencies. AHA supports enhanced coordination between general acute-care hospitals and post-acute providers to improve overall quality of care and reduce total health spending.

Working for Post-Acute Care Providers

As the Trump administration and the 115th U.S. Congress take shape, AHA will continue to advocate on behalf of all health care providers, including long-term care and post-acute providers, for high-quality, affordable and accessible health care for all Americans. Key post-acute advocacy and policy initiatives AHA worked on in 2016 are highlighted below.

- **Opposing Cuts to Post-acute Care Payment.** AHA opposed payment reductions in the president's fiscal year (FY) 2017 budget, as well as in proposals from the Medicare Payment Advisory Commission (MedPAC) and Centers for Medicare & Medicaid Services (CMS) that would threaten patient access to post-acute care services. AHA stressed, in repeated communications to Congress and the administration, the importance of adequate payment for this growing post-acute care segment.
- **Addressing ALJ Appeals Backlog.** A federal judge ordered the Department of Health and Human Services (HHS) to eliminate the backlog of Medicare claims appeals pending at the administrative law judge (ALJ) level within four years, granting summary judgement to AHA and three member hospitals in their case challenging HHS for failing to meet statutory deadlines for processing Medicare claims appeals.
- **Providing Relief to LTCHs.** The 21st Century Cures Act provides one full year of relief from the Long-term Care Hospital (LTCH) 25% Rule. The original policy arbitrarily penalized LTCH admissions based on the origin of an LTCH referral, disregarding the patient's medical necessity for LTCH services.
- **Monitoring Unified Payment System for Post-acute Care.** In its June 2016 report to Congress, MedPAC proposed a prototype payment system that could replace the current payment systems for home health, SNF, IRF and LTC services. AHA has engaged with MedPAC on the new prototype which is being recommended for accelerated implementation and has met with and submitted letters to CMS and ASPE with policy principles for a PAC PPS.
- **Making Recommendations on the Medicare Post-acute Care Transformation (IMPACT) Act.** The IMPACT Act of 2014 expands the reporting requirements for post-acute care providers, requiring LTCHs, IRFs, SNFs and home health agencies to report standardized patient assessment data, in addition to quality and resource measures. AHA weighed in on CMS's rulemaking on new IMPACT Act-mandated reporting requirements.
- **Monitoring New Care Models.** AHA worked with the Centers for Medicare and Medicaid Services (CMS) to shape the mandatory bundling program for hips and knees and the cardiac care model.

AHA is actively monitoring both models to ensure their success and that providers are not overloaded with too many demonstrations brought on too quickly.

- **Providing Consumers with Meaningful Quality Information.** AHA continues to promote a streamlined approach to quality measurement and is leading efforts to define measures that matter. AHA is collaborating with other national hospital associations to get to a smaller number of measures that have a real opportunity to drive quality and safety forward for patients.
- **Fighting Escalating Drug Prices.** As a member of the steering committee of the Campaign for Sustainable Rx Pricing, AHA has raised awareness with legislators, policymakers and the media of how rising prescription drug prices are putting a strain on the entire health care system. These efforts have included briefings on Capitol Hill and for the media.
- **Collaborating with National Organizations.** AHA maintains dialogues with other related national organizations to lay the foundation for aligned positions on behalf of post-acute care providers across the continuum of care.

Engaging Post-Acute Care Leaders

AHA fosters dialogue among long-term care and post-acute care leaders and offers many opportunities to take an active role in shaping AHA policies and setting direction for the association and the field. They may have a formal role in association governance and/or policy formation by serving on AHA's Board of Trustees, Committee on Health Strategy and Innovation, Regional Policy Boards, or Councils and Committees. In addition, long-term and post-acute care health leaders can participate on:

- **AHA Long-Term Care and Rehabilitation Council** that leads the Section for Long Term Care and Rehabilitation and advises AHA on policy and advocacy activities of great importance to long term care and post-acute care providers and the field as a whole.
- **Post-acute Care Systems Strategic Leadership Group**, composed of a small group of health care system members with a majority ownership of post-acute care services that meets with AHA's executive team to provide their guidance on broad legislative and policy issues related to the continuum of care with a focus on post-acute care.
- **Advocacy Alliances** including the [Advocacy Alliance for Coordinated Care](#).
- **Leadership Briefings** for small groups of executives to discuss long term and post-acute care approaches, pilots, demonstrations and initiatives. In addition, CEOs are individually contacted to share their views several times a year.

Providing Key Resources for Post-Acute Care Providers

Based on member input, AHA, often in partnership with others, develops and offers resources to support long-term care and post-acute care providers. Examples include:

- **Medicare's Bundled Payment Initiatives: Consideration for Providers.** This 2016 AHA Issue Brief describes the evolution of bundling within the Medicare program, the opportunities bundling creates for hospitals and post-acute care providers, the challenges providers have encountered in recent initiatives, and issues providers should consider when participating in a bundled payment program.
- **Next Generation of Community Health.** The American Hospital Association 2016 Committee on Research was charged with exploring what the next generation of community health may look like as hospitals redefine themselves to keep pace with the changing health care landscape.

For information about the overall value of membership at AHA, please see

*<http://www.aha.org/about/membership/value.shtml>. AHA long-term care and post-acute care resources can be found at <http://www.aha.org/about/membership/constituency/ltrc/index.shtml>. **3.27.17***