NEWS RELEASE

HOSPITALS SUPPORT THE TWO-MIDNIGHT RULE COORDINATION AND IMPROVEMENT ACT

WASHINGTON (March 6, 2014) – The American Hospital Association today announced its support for S. 2082, the Two-Midnight Rule Coordination and Improvement Act of 2014. Introduced today by Senators Robert Menendez (D-NJ) and Deb Fischer (R-NE), the legislation would delay enforcement of the Medicare inpatient admission and review criteria known as the two-midnight policy.

The Centers for Medicare & Medicaid Services (CMS) developed the two-midnight policy which arbitrarily determines whether a patient will be billed as an inpatient or outpatient. At the same time, CMS has issued only minimal guidance on this policy which lacks clarity and makes it difficult for hospitals and physicians to come into compliance.

“The AHA strongly supports this important legislation,” said Rick Pollack, executive vice president of the American Hospital Association. “The current CMS policy is bad news for seniors because it undermines the medical judgment of physicians. The bill also rightly calls on the agency to develop an acceptable long-term payment solution.”

The legislation directs CMS to take a more thoughtful approach by developing a new standard that will provide clarity on whether a patient should be billed as inpatient or outpatient. The bill

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also requires CMS to adequately provide for the intense, inpatient-level services currently provided by hospitals to Medicare beneficiaries, services that are reasonable and necessary, but do not appear on the inpatient-only list and are not expected to span two midnights.

“I appreciate the AHA’s continued leadership in educating their member hospitals in New Jersey and throughout the country on this important issue,” said Senator Menendez, the lead sponsor of the legislation. “I look forward to continuing our work together on issues such as this, which are vitally important to both hospitals and the beneficiaries they serve.”

“The two midnight rule creates administrative and financial challenges for too many hospitals in Nebraska,” said Senator Fischer. “The result is wasted time and resources to comply with this misguided regulation. The red tape is especially burdensome for rural hospitals, which are key to providing critical care and job opportunities for countless communities across Nebraska. I’m pleased to work with Senator Menendez to offer this reasonable, bipartisan measure to help prevent another instance of the federal government coming in between patients and their doctors. Importantly, our bill also provides CMS with needed time to develop an alternative system that helps, and doesn’t hinder, the ability of these hospitals to provide care to the patients they treat.”

“America’s hospitals applaud Senators Menendez and Fischer for their leadership on this issue,” said Pollack. “The AHA looks forward to the enactment of this important bill.”

**About the AHA**

The AHA is a not-for-profit association of health care provider organizations and individuals that are committed to the improvement of health in their communities. The AHA is the national advocate for its members, which include nearly 5,000 hospitals, health care systems, networks and other providers of care. Founded in 1898, the AHA provides education for health care leaders and is a source of information on health care issues and trends. For more information visit the website at www.aha.org.