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## AHA STATEMENT ON CMS PROPOSED FY2015 INPATIENT RULE

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Today's proposal implements a number of statutory requirements that would put further stress on vital care for seniors. Hospitals are undergoing an unprecedented amount of change. At the same time, they are struggling to manage reduced payments for hospital services that patients and communities depend on. While we continue to be concerned about excessive coding cuts, today's proposal to continue to phase in the coding cuts mandated by the American Taxpayer Relief Act of 2012 will help provide hospitals with additional time to manage the payment reductions.

The Medicare Disproportionate Share Hospital (DSH) program provides vital financial support to hospitals that serve the most vulnerable populations. The promise of coverage envisioned by the Affordable Care Act has not been realized, so further reducing the DSH program as this rule proposes presents further challenges threatening access to patient care. We urge Congress to pass the DSH Reduction Relief Act of 2013 to help hospitals and the patients they serve by delaying the Medicare DSH funding cuts for two years.

We appreciate that CMS has begun a discussion of how it plans to implement sweeping changes to long-term care hospitals (LTCH) and has asked for feedback from stakeholders about transitioning to the new LTCH criteria.

The AHA plans to offer its views on the design of an alternative payment methodology for short inpatient hospital stays. We look forward to working with CMS to reach more clarity on the implementation to ICD-10. We will continue to analyze the proposed rule and will work with CMS to make improvements.