

## AHA Sends Letter to Capitol Hill Including Key WHA Priorities

On Oct. 24, The American Hospital Association (AHA) sent a [letter](#) to U.S. Senate Majority Leader Chuck Schumer, House Speaker Nancy Pelosi, and Senate and House minority leaders Mitch McConnell and Kevin McCarthy requesting support for the many challenges hospitals are facing during a very difficult 2022. The letter includes requests for many of the priorities WHA has been advocating for during recent visits to Washington, D.C.

Citing a [September report from health care consulting firm Kaufman Hall](#), the letter highlighted the fact that many hospitals are facing their most financially difficult year since the start of the pandemic, and yet there are no pandemic dollars coming thus far from Congress. While hospitals are facing labor cost increases alone that near 20% compared to the start of the pandemic, they are not seeing comparable revenue increases to make up for that increase. This is because the vast majority of the patients they serve on an inpatient basis are Medicare or Medicaid patients, and those government programs have not increased payments to hospitals anywhere near the level of cost increases hospitals are facing.

AHA asks leaders on Capitol Hill to make it a priority to help hospitals address workforce shortages and provide targeted relief to hospitals. On the workforce side, AHA is requesting Congress establish a temporary per diem payment to hospitals to assist them with their patient discharge backlogs that have occurred with the closure of many long-term-care beds. The goal of this program would be to create a Medicare payment [similar to one WHA has helped create under Wisconsin's Medicaid program](#). AHA is also requesting an increase in graduate medical education slots [and making the flexibilities gained during the public health emergency permanent](#) – a specific priority WHA took up during [its recent visit to Capitol Hill in September](#).

The letter also requests targeted relief to hospitals, the top request of which is another priority WHA has been advocating for in recent trips to Washington, DC, an [extension of the Medicare-Dependent and Low-volume hospital designations](#). Estimates suggest losing these programs would cost 16 Wisconsin hospitals around \$19 million annually based on fee-for-service alone, and likely more when also taking into consideration the Medicare Advantage population. The programs are currently funded through Dec. 16.

AHA is also calling on the Senate to take up the Improving Senior Timely Access to Care Act, [another priority of WHA](#). This legislation passed the House in September and would streamline the prior authorization process for health care providers and patients in the Medicare Advantage program.

Lastly, the letter calls for Congress to stop sequestration cuts to hospitals and to create a new hospital designation called the "Metropolitan Anchor Hospital," which would include certain hospitals seen as lifelines to communities with a high concentration of low-income patients who have challenges in accessing care.

WHA is continuing to press for these priorities with members of Wisconsin's Congressional delegation. It's possible many of them could be considered in an upcoming "lame duck" package that will need to be passed to continue federal funding for the government by Dec. 16. Alternatively, these priorities may continue to be under consideration for future legislative packages in the next session of Congress that starts January 2023.

Contact WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

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