



American Hospital
Association

HIGHLIGHTS COUNCIL MEETING

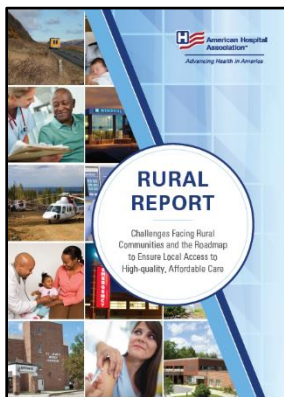
AHA Section for Small or Rural Hospitals
February 21-22, 2019 ★ Chicago, IL

Representatives from the Council of the AHA Section for Small or Rural Hospitals met February 21-22, 2019 in Chicago. Agenda items included presentations on surprise billing, interoperability, combining hospital incentive programs, and building on the Affordable Care Act (ACA). Members were updated on AHA Board activities and were briefed on the political environment, legislative advocacy and regulatory policy for the Administration and Congress. They also discussed new models of delivery and payment. A [roster of the Section's council](#) is available www.aha.org.



Washington Legislative Update: We have a new Congress with new leadership in the House and Senate for committees of jurisdiction on Medicare and Medicaid health policy. In the 2018 mid-term elections, voters made it clear that health care is an important issue to them. The [AHA's 2019 Public Policy Advocacy Agenda](#) seeks to continue to positively influence the public policy environment for patients, communities and the health care field. Members were briefed on the [2019 AHA Rural Advocacy Agenda](#) and our priorities for this Congress. Members endorsed the importance of the **AHAPAC**.

Washington Regulatory and Policy Update: The AHA is working to ensure federal policies and regulations are updated for 21st century innovation and care delivery, and new resources are invested in rural communities to protect access. Priorities include fair and adequate reimbursement, supporting new models of care, removing red tape, supporting health information technology, bolstering the workforce and reining in prescription drug costs. To learn more and view the full [2019 Rural Advocacy Agenda](#), visit www.aha.org/rural-advocacy-agenda.



AHA Rural Report: In light of the persistent, recent and emergent challenges of providing care in rural areas, as well as the ongoing transformation of the health care system, federal policies need to be updated for the 21st century. New investments of resources that protect access to care also are needed to provide the tools to ensure local access to high-quality, affordable, efficient health care. Members received the newly released report and reviewed a *Roadmap for Action: Updating Federal Policies and Investing in Rural Communities* such as new models of care, reimbursement, easing regulatory burden, telehealth, cutting Rx drug costs, and addressing workforce maldistribution.

Surprise Billing: One of the top issues for federal policymakers in 2019 is addressing surprise medical billing. Surprise billing typically occurs when a patient receives an unexpected bill for care they thought was covered by their health plan, or when they receive a bill for out-of-network emergency services. With input from members of the AHA councils, committees and regional policy boards, AHA's Price Transparency Task Force developed eight principles to guide policymakers in developing legislative and regulatory solutions.



Interoperability: AHA recently worked with six other national hospital associations to develop [Sharing Data, Saving Lives: The Hospital Agenda for Interoperability](#). The report highlights progress that the field has made in promoting interoperability and highlight where action is still needed. Leaders provided input on two specific policies that Office of National Coordinator and CMS recently released proposed rules on – information blocking and conditions of participation.

CMS Hospital Quality Incentive Programs: CMS runs three different incentive programs related to hospital quality performance – the Hospital Readmissions Reduction Program, Hospital-Acquired Condition Reduction Program and Hospital Value-based Purchasing (VBP) program. Much of the debate about these programs has revolved around two fundamental issues – measures and performance incentive design. Members were asked to recommend between technical fixes or full consolidation of hospital incentive programs.

Building on the Affordable Care Act Framework: Last fall, leaders explored increased interest in legislative proposals to achieve universal coverage that would fundamentally alter our current system. These proposals included Medicare and Medicaid “buy-in” options, as well as single-payer, government-run models such as “Medicare for All.” The AHA has deep concerns about these approaches. Members commented on several policy options for protecting and expanding coverage building on the existing ACA framework.

New Models of Delivery and Payment: Leaders in the field are adapting to new models of delivery and payment to rural communities and members were asked to share strategies to manage population health and care coordination while practice patterns move from inpatient to outpatient services. Also, a global budget strategy can provide financial certainty through fair payments and incentives that contain cost growth and improve quality and may provide the flexibility needed for hospitals in vulnerable communities to provide care in a manner that best fits their communities’ needs. Members discussed the feasibility of global budgets.



AHA Annual Membership Meeting Leadership Breakfast: Join your colleagues April 7-10 at the AHA Annual Membership Meeting in Washington, DC. On Monday, April 8 special guest **Chuck Todd**, moderator of NBC's *Meet the Press* and political director for NBC News, previews how the 116th Congress will impact politics and policy at our annual leadership breakfast. [Register on-line](#).

For more information about the topics covered in these highlights or on the [AHA Section for Small or Rural Hospitals](#), contact John T. Supplitt, senior director, at 312-425-6306 or jsupplitt@aha.org.