

In his remarks today at the annual meeting, AHA Executive Vice President Rick Pollack said hospital advocacy on Capitol Hill comes down to four messages: opposing Medicare and Medicaid cuts, stopping the Centers for Medicare & Medicaid Services from imposing payment cuts through regulation, expanding coverage to uninsured children and pressing for action on a number of key Medicare provisions that include keeping the rehabilitation rule threshold at 60%, permanently banning new physician-owned limited service hospitals and extending several other provisions designed to help rural hospitals. While hospital advocacy helped persuade the House and Senate to adopt budget resolutions that reject the president's proposed Medicare and Medicaid cuts, Pollack emphasized that hospital funding remains vulnerable due to "pay/go" provisions. Those provisions require Congress to pay for any proposal to cut taxes or increase spending by raising taxes or cutting spending elsewhere in the budget. "We need to make sure that cuts to hospital services are not used for this purpose," he told hospital leaders. And he criticized CMS regulations aimed at cutting nearly \$4 billion from Medicaid and \$25 billion from Medicare over five years. "We need to sensitize legislators that it's not just the federal budget that threatens their local hospitals * it's also these wrong-headed regulatory proposals from CMS," he said.