

Priorities for the 119th Congress

The **Federation of American Hospitals (FAH)** is committed to patient access to 24/7 care and working closely with lawmakers to ensure a strong, prosperous, and healthy America. Pro-growth policies – coupled with protecting American families, seniors, and children from losses in health coverage or steep increases in health care costs – will help Americans continue to access quality, affordable care and keep communities healthy.

Priorities At-A-Glance

- Lower Health Care Costs and Maintain Choice and Competition for Millions of Americans
- Prevent Patient Care Delays and Denials
- Protect Patient Access to Care
- Help Businesses Compete and Grow with a Strong Workforce
- Strengthen Rural Health Care



OVER HEALTH CARE COSTS AND MAINTAIN CHOICE AND COMPETITION FOR MILLIONS OF AMERICANS

- **Prevent Medicaid cuts** and preserve public/private partnerships in Medicaid that keep hospital doors open and serve community members in the deepest need.
- Extend enhanced tax credits for health coverage that will maintain private sector insurance options and protect nearly 24 million Americans including small business owners, entrepreneurs, and families with children from seeing their health care costs skyrocket.

PREVENT PATIENT CARE DELAYS AND DENIALS

- **Modernize Medicare Advantage (MA) prior authorization,** crack down on denials and other abuses, and streamline prior authorization requests in the MA program so seniors enrolled in MA receive the same coverage levels as those in Traditional Medicare.
- **Protect seniors' access to the full range of high-quality, post-acute services** by requiring CMS to establish a network adequacy standard for inpatient rehabilitation facilities (IRFs).
- Hold MA plans accountable with consistent, clear, and enforceable rules for the prompt payment of clean claims after providing patient care.



PROTECT PATIENT ACCESS TO CARE

- Eliminate Medicaid Disproportionate Share Hospitals (DSH) cuts and support hospitals serving high numbers of Medicaid and uninsured patients.
- Reject Medicare cuts, including "site neutral payments," that threaten access to the critical, 24/7 services that only hospitals provide.
- Allow patients to benefit from integrated hospital systems, which offer increased care coordination, investments in technology, and reduced costs, by eliminating regulatory barriers.
- Preserve the prohibition on physician-owned hospitals to protect against "cherry-picking" patients that puts nearby full-service community hospitals at risk.
- **Reform the physician payment system** to prevent cuts to Medicare payments and develop a long-term approach to ensuring adequate reimbursement for physician care.



HELP BUSINESSES COMPETE AND GROW WITH A STRONG WORKFORCE

- Enact a pro-growth tax agenda and prevent tax increases on American families and businesses and continue building a robust economy that serves hard-working Americans.
- Ease regulatory burdens that create costly administrative hurdles and lead to less time at the bedside caring for patients.
- Provide federal protections for health care workers who are the victims of violence in the workplace.
- Extend and expand the Conrad 30 program, allowing international doctors trained in the U.S. to remain in the country if they practice in underserved areas.
- **Reinstate disaster-related tax policies** that incentivize businesses to rebuild in the wake of natural disasters, allowing the private sector to repair facilities, replace equipment, and maintain a full workforce with a tax advantage.

STRENGTHEN RURAL HEALTH CARE

- Support rural hospital patients by making permanent Medicare payment adjustments that ensure the stability of Low-Volume Hospitals (LVH) and Medicare Dependent Hospitals (MDH) serving older, sicker patients in rural communities.
- Ensure access to telehealth by permanently removing geographic and originating site restrictions.
- Protect access to inpatient care in rural communities by opposing any expansion of the Rural Emergency Hospital (REH) designation that would undermine the viability of full-service hospitals in rural service areas.

