

Hospitals and health systems provide critical care to the patients and communities they serve, while taking on important roles as major employers and trusted sources of information and economic and social stability. Over the last decade, hospitals have faced significant financial and workforce challenges. They are contending with increased costs from labor, drugs, equipment and supplies, workforce shortages, inflation, insufficient government reimbursement, and patient backlogs of necessary-but-deferred medical care. In addition, hospitals and health systems are facing unprecedented attacks from adversaries who do not understand the value of hospitals and care they provide. Lawmakers need to hear and learn from their constituents about the challenges hospitals and health systems face and risk of losing access to care.

The campaign trail leading up to the general election in November 2024 is an opportunity to interact with presidential candidates, members of Congress, and other local candidates; it's a time to share hospitals' and health systems' stories and engage lawmakers on critical issues that will have a significant impact on your ability to serve your patients and communities.

The following sample questions and background information are designed for your use when attending town halls, hosting lawmakers at your hospital or having discussions with candidates on the campaign trail.

Issue: The Need to Stabilize the Financial Health of Hospitals and Health Systems

Background

Hospitals and health systems continue to face unprecedented challenges coming out of COVID-19, including historic workforce shortages, soaring costs of providing care, severe underpayment by Medicare and Medicaid, and overwhelming regulatory burdens. Taken together, these challenges are jeopardizing hospitals' ability to provide their patients with access to care and services.

Question(s):

What actions have you taken to provide support for your hospitals and health systems during these uncertain times?

What actions would you take in the future, such as improving federal funding for Medicare and Medicaid and other federal programs, pursuing a new designation of "metropolitan anchor hospitals" to help struggling safety net hospitals, and protecting not-for-profit hospitals' tax-exempt status, to stabilize the financial health of America's hospitals and health systems?

AHA Position: Reject Site-Neutral Payment Policies

Congress must reject so-called site-neutral payment cuts — cuts that reduce payments to hospitals who treat sicker, more medically complex patients and could force hospital outpatient clinics across the country to reduce critical health care services or cease operations completely, resulting in reduced patient access and job losses, especially in rural and other underserved communities. Hospital outpatient departments should continue to be paid rates that account for the fact that they treat sicker and more complex patients, provide unique benefits to the community (such as 24/7 access to emergency care) and serve in a standby capacity for disaster response – all while also complying with more licensing and regulatory requirements than other health care entities.

Question(s):

What is your position on cutting hospitals through payment policies that don't account for the differences in the care they provide?

AHA Position: The 340B Program Must be Protected

The 340B Program serves as a lifeline for eligible hospitals allowing them to stretch limited federal resources and expand health services to patients and communities. We oppose efforts to scale back, significantly reduce the benefits of, or expand the regulatory burden of the 340B program, including proposals to dramatically expand unnecessary and duplicative reporting requirements on certain 340B hospitals.

Question(s):

What is your position on protecting the 340B Program?

AHA Position: Preserve the Ban on Physician-Owned Hospitals

Self-referral arrangements in health care are the antithesis of fair competition and lead to overutilization and waste. Since 2003, Congress has supported limiting the ability of hospitals owned by physician investors to bill Medicare. Owners of these facilities provide limited or no emergency care and cherry-pick the best insured patients and highest reimbursing cases; in doing so, these facilities jeopardize the viability of community hospitals, which in contrast rely on a mix of services and patients to remain open. We oppose legislation that would weaken current law restrictions on the growth of these arrangements.

Question(s):

What is your position on policies and laws that allow self-referral hospitals to proliferate once again?

Background:

A talented, qualified, engaged and diverse workforce is at the heart of America’s health care system. However, hospitals and health systems now face mounting and critical staffing shortages that could jeopardize access to care in the communities they serve. A 2021 Washington Post-Kaiser Family Foundation survey found that nearly 30% of health care workers are considering leaving the health care profession, and nearly 60% reported negative impacts to their mental health stemming from their work during the COVID-19 pandemic. Rising rates of physical violence and verbal abuse toward hospital staff is yet another challenge hospitals and health systems encounter as they seek to recruit and retain their workers. Not only does such violence cause physical and psychological injury for health care workers, workplace violence and intimidation make it more difficult for nurses, doctors and other clinical staff to provide quality patient care. The AHA supports the Safety from Violence for Healthcare Employees (SAVE) Act (H.R. 2584/S.2768), which is modeled after existing federal statute for the protection of aircraft and airport workers and would make it a federal crime to assault or intimidate a health care worker or other hospital employees.

Question(s):

Can you describe what legislative efforts you support to address the ongoing health care worker shortage?

What are you doing to help protect health care workers from rising rates of physical and verbal abuse?

AHA Position: Hold Consumer Health Plans Accountable for their Actions

Certain practices undertaken by commercial health plans threaten patient access to care, contribute to clinician burnout and drive excessive administrative costs and burden in the health care system. AHA has released a report highlighting numerous commercial health insurer policies that compromise patient safety and raise costs such as prior authorization requirements. Regulators should increase their oversight of health plans and implement a comprehensive simplification agenda, beginning with streamlining prior authorization requirements and processes, and monitoring for abusive payment delays and denials. The AHA supports legislative efforts that seek to address these concerns and protect patients’ health by streamlining and simplifying prior authorization requirements.

Question(s):

Do you support legislation that can help reduce administrative burden and ensure that medical professionals are the ones making key decisions in patient care rather than the insurance industry?

Please describe any additional legislative or regulatory proposals you support that seek to address these concerns.

Background:

Everyone deserves access to affordable health care and insurance. Such coverage is essential for making health care affordable for individuals and families in the same way car insurance enables individual drivers to weather the bad fortune of an unexpected illness. While we have made substantial gains in health coverage over the past decade, we must continue to work to close remaining coverage gaps and to ensure patients do not face financial barriers to using their coverage.

Question(s):

What role do you believe Congress has in ensuring access to quality and affordable health care?

AHA Position: Rural Health Care Must Be Protected and Made Sustainable

Rural hospitals and health systems are the lifeblood of their communities and are committed to preserving local access to health care. At the same time, these hospitals are experiencing unprecedented challenges that jeopardize access and services. Lower patient volumes make it challenging for rural hospitals to maintain fixed-operating costs. Additionally, hospitals and health systems are facing significant financial challenges due to the increased cost of caring for patients. Expenses associated with labor, drugs, purchased services and equipment, including personal protective equipment, have all increased compared to pre-COVID-19 pandemic levels. Rural hospitals' patient mix also makes them more reliant on public programs and, thus, particularly vulnerable to Medicare and Medicaid payment cuts.

Question(s):

What steps would you take to provide relief for small and rural hospitals to ensure they can continue to provide health care services to their communities?

AHA Position: Behavioral Health Care Is a Necessary Service in All Communities

Mental health and physical health are inextricably linked. Unfortunately, the chronic underfunding for behavioral health services intensified hospitals' and health systems' ability to retain critical staff and provide services, especially as the financial pressures of the past several years further eroded hospitals' ability to subsidize these services. As the need for behavioral health services continues to rise, the nation is ill-prepared to respond to these needs due to severe shortages in the behavioral health workforce.

Question(s):

Whether it is expanding access to telehealth services, strengthening the behavioral health workforce, or expanding access to substance use disorder treatments, what legislative proposals do you support to expand access to behavioral health care?