

FEDERAL LEGISLATIVE UPDATE

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AGENDA

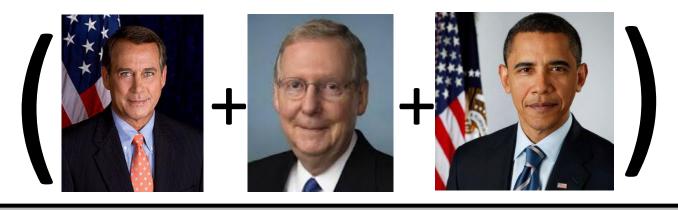
- 2015: Mid-Year Review
- King v. Burwell
- 2016 Election (yes...already)
- Policy Advisory Committee
- Key Priorities for Essential Hospitals
- Our Advocacy Vision



2015: MID-YEAR REVIEW



THE POLITICAL MATH







THE POLITICAL MATH

= BIPARTISANSHIP?!?

114th Congress marks major bipartisan milestones:

- » SGR repeal passes by overwhelming bipartisan majority including big wins for both parties
- » Medical innovation enjoys strong bipartisan spirit in 21st Century Cures proposals
- » Congressional committee leaders generally following regular order to move legislation to House and Senate floors







SGR - MEDICAID DSH CUT DELAY

- SGR repeal signed into law on April 16
- Included Medicaid DSH cut delay for one additional year—until FY 2018
 - » Cuts now delayed by 4 years (2014-2018)
 - » Deleted \$8 billion in cuts between 2014 and 2020
- Extended CHIP funding and ACA funding for FQHCs for two years—through the end of FY 2017
- End of Annual SGR package means need for new DSH delay vehicle in the future





21ST CENTURY CURES

- Bipartisan support passed unanimously through Committee
 - » 340B provisions considered and dropped
- One of the few health care vehicles this year
- House hoping to pass in July
 - » Senate still working on package
 - » Less enthusiasm in Upper Chamber



Source: upton.house.gov



FY 2016 CONGRESSIONAL BUDGET PROCESS



Final Budget Resolution Calls For:

- » Block Granting Medicaid
- » Use of Budget Reconciliation Procedures



50TH ANNIVERSARY OF MEDICARE & MEDICAID

2015 marks the 50th anniversary of Medicare and Medicaid

- » Focus on federal health care programs of the past, present and future
- » Opportunity for lawmakers and stakeholders to highlight benefits of Medicare and Medicaid
- » Some lawmakers propose worrisome Medicaid reforms







Roberts Decision:

"...the words of a statute must be read in their context and with a view to their place on the overall statutory scheme..."

"[The law] contains more than a few examples of inartful drafting."

"Congress passed the Affordable Care Act to improve health insurance markets, not to destroy them."



Scalia Dissent:

"The Court holds that when the (ACA) says "Exchange established by the state' it means "exchange established by the 'state or the Federal Government' That is, of course, quite absurd."

"The Court's next bit of interpretive jiggery-pokery..."

"Pure applesauce..."

"We should start calling this law 'SCOTUSCare"





The Court decided that the "Chevron Analysis" does not apply. Effectively, Congress clearly did not delegate the interpretation of a "question of deep economic and political significance" to the IRS.

Upshot: A future administration cannot ask the IRS to reinterpret the statute to strike federal subsidies.





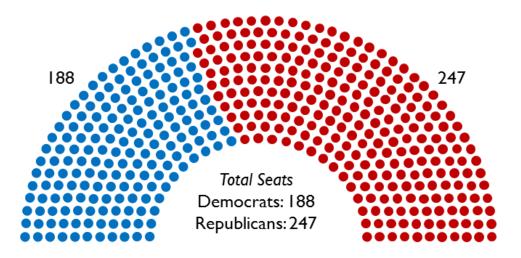
ELECTION 2016



THE 2016 OUTLOOK - HOUSE OF REPRESENTATIVES

House likely to remain in hands of Republicans

Control of the 114th House (2014-2016)



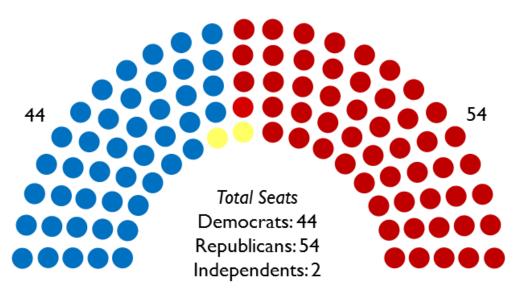
Source: National Journal Research; CNN Election Center; New York Times.



THE 2016 OUTLOOK - SENATE

Democrats could take back the Senate

Control of the 114th Senate (2014-2016)



Source: National Journal Research; CNN Election Center; Associated Press; NBC News



THE 2016 OUTLOOK - SENATE

Democrats | 10 Held Seats

34 Senate seats up for grabs in 2016 –

10 Democrat-held

24 Republicanheld

Source: Cook Political Report, June 11, 2015 -Senators in parentheses are retiring.

Solid D	Likely D	Lean D	Toss Up	Lean R	Likely R	Solid R
Blumenthal (CT)	CA (Boxer)	Bennet (CO)	NV (Reid)			
Schatz (HI)						
MD (Mikulski)						
Schumer (NY)						
Wyden (OR)						
Leahy (VT)						
Murray (WA)						

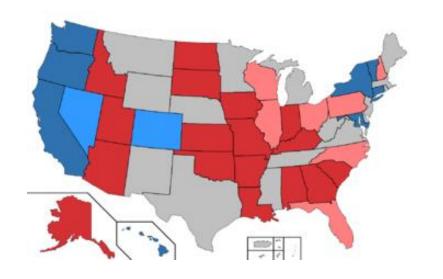
Republicans | 24 Held Seats

Solid D	Likely D	Lean D	Toss Up	Lean R	Likely R	Solid R
			FL (Rubio)	Ayotte (NH)	Murkowski (AK)	Shelby (AL)
			Kirk (IL)	Burr (NC)	McCain (AZ)	Boozman (AR)*
			Johnson (WI)	Portman (OH)	Isakson (GA)	Crapo (ID)
				Toomey (PA)	IN (Coats)	Grassley (IA)
					Blunt (MO)	Moran (KS)
						Paul (KY)
						Vitter (LA)
						Hoeven (ND)
						Lankford (OK)
						Scott (SC)
						Thune (SD)
						Lee (UT)

^{* =} potential retirement



THE 2016 OUTLOOK - SENATE



- A "bad map" for Republicans all but one competitive seat in an "Obama state" (North Carolina)
- Opposite of 2014
- Still, Dems need to net +5 to win majority

Source: National Journal Research; CNN Election Center; Associated Press; NBC News



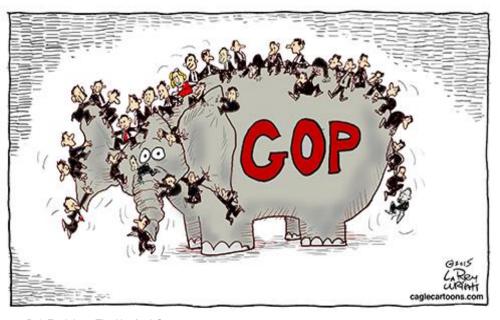
THE 2016 OUTLOOK - THE RACE FOR THE WHITE HOUSE











Bob Englehart, The Hartford ${\it Courant}$



THE 2016 OUTLOOK - THE RACE FOR THE WHITE HOUSE

Shawn's Completely Subjective Ranking of the official Republican Field:

Tier 1 – Serious Contenders

- Bush Wishes he could change his last name
- Rubio Wishes Bush was from Texas

Tier 2 – Might Make It Interesting

- Cruz Wishes Rubio wasn't Hispanic
- Huckabee Wishes it was 1976
- Paul Wishes foreign policy was not a thing
- Perry Wishes people would forget 2012
- Santorum Wishes people agreed with him on gay marriage

Tier 3 – Will Not Make it Interesting

- Carson Wishes his staff would stop quitting
- Fiorina Wishes she was only female running
- Graham Wishes domestic policy wasn't a thing
- Jindal Wishes his state approval rating was better than 30%
- Pataki Wishes he ran sooner

Tier 4 - Will Definitely Make it "Interesting"

 Trump – Wishes he didn't have to hire people to attend his rallies



THE 2016 ELECTIONS AND OUR ADVOCACY STRATEGY

- If it is going to happen this Congress, it has to happen in 2015
- Focus on vulnerable Members of Congress
 - » Blue State Republicans
- If he or she is running for president, forget about it...
 - » Current Senators running for President:
 - Cruz (R-TX)
 - Graham (R-SC)
 - Paul (R-KY)
 - Sanders (D-VT)





- 2015 committee focus
 - » Price transparency
 - » Cost comparison of essential hospitals to other hospitals
 - » Principles submitted to Board of Directors
- Looking ahead
 - » Telehealth policy



- Created in 2012, comprised of member hospital executives
- Committee annually holds one in-person meeting and quarterly teleconferences
- Committee guides development of association's policy positions
- Committee prepares principles, policy positions for approval by Board of Directors



- Past committee focus
 - » Entitlement reform, 2012
 - » Mental health services and violence prevention, 2013
 - » Immigration reform, 2013
 - » Essential hospital designation, 2013
 - » Medicaid alternative payment models, 2014
 - » Equity of care, 2014





KEY PRIORITIES FOR ESSENTIAL HOSPITALS



340B DRUG PRICING PROGRAM



- 340B provisions nearly included in 21st Century Cures Mark-up
- Expect continued congressional interest in oversight and accountability
- Upcoming guidance from HRSA
 scope remains unclear



RISK ADJUSTMENT FOR SOCIO-ECONOMIC STATUS







Sen. Manchin (D-WV)



Rep. Engel (D-NY)



Sen. Portman (R-OH)

- Unified legislation introduced March 10, 2015: Establishing Beneficiary Equity in the Hospital Readmission Program Act
 - H.R. 1343 / S. 688
- Bipartisan, bicameral support
- Little/no federal cost
- Seeking cosponsors and legislative vehicles



ADDRESSING HEALTH CARE DISPARITIES

- As leaders in the field, investigating opportunities for federal support for disparities work at essential hospitals
- "Companion" to SES risk adjustment legislation









Source: UM, The New Jewish Home, CEPro, Healthcare Informatics



MEDICARE DSH CUTS



Source: healthcarefinancenews.com

- Cuts enacted under the Affordable Care Act
- New payment formula redistributes Medicare DSH payments between hospitals
- Aggregate cuts in 2015 are
 35 percent below pre-ACA payments
- Seeking opportunities to stop or reduce overall cuts



THREATS ON THE HORIZON



Source: Texas Tribune

- Medicaid "reform"
- Medicare "site neutral" payments
- GME "reform"
- Enhanced interest in "non-DSH supplemental payments" (UPL)
 - Major reforms may not be enacted this year, but could be starting point for next Congress

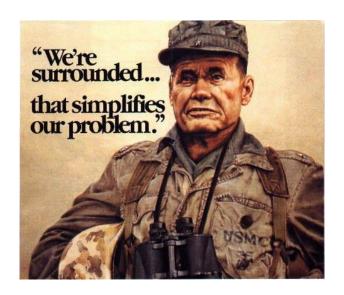


OUR ADVOCACY VISION



OPERATIONALIZING THE 1+4

- With funding threats coming from all directions, we need a comprehensive strategy.
- Seeking a way to defend all essential funding sources based on our multiple missions
- Operationalizing the 1+4 to allow us to stand apart from other providers
 - ✓ Step 1: Create essential hospital definition
 - ✓ Step 2: Insert definition into federal law. Continue to reference definition whenever possible.
 - ☐ Step 3: Defend defined set of hospitals from threats based on federal designation





QUESTIONS

