

# Working for You

Highlights from AHA's recent advocacy efforts on behalf of America's hospitals and health systems | 2024

## Supporting the Field on Cybersecurity

**The AHA response to the Change Healthcare cyberattack, the most significant cyber breach in health care history, made a real difference for our members.**

- Early action by the AHA informed members, the FBI, HHS and CISA to the severity of the issue, which originated from a third party.
- Continued pressure and information sharing with CMS helped secure an accelerated payment program for the field.
- Congressional testimony by the AHA highlighted the severity of the incident and the need for member support.
- Grassroots lobbying brought the member voice to the forefront at a subsequent hearing with UnitedHealth Group CEO. Members of Congress are holding UnitedHealth Group accountable and long overdue questions about its outsized power and influence are being raised.
- Our public pressure and behind-the-scenes work ensured that UnitedHealth Group -- not hospitals and health systems -- would make all breach notifications to affected patients.
- In June, AHA worked with Microsoft, Google and the White House to provide free and discounted cybersecurity resources to assist rural hospitals; discussions continue about expanding enhanced cybersecurity support for all hospitals.

## Protecting Key Programs

**A Congressional package passed in the first quarter included provisions that addressed key provisions for AHA members:**

- Eliminating Medicaid disproportionate share hospital cuts for FY 2024 and delaying FY 2025 DSH cuts to Jan. 1, 2025;
- Extending the Medicare-dependent hospital and enhanced low-volume hospital programs through December 2024; reducing a 3.34% physician payment cut that began Jan. 1;
- Extending the Community Health Centers, National Health Service Corps, and Teaching Health Centers Graduate Medical Education programs through December;
- Preventing Congress from enacting harmful site-neutral cuts.
- Due to our advocacy, MedPAC recommended the highest update ever for hospital inpatient and outpatient payments at market basket + 1.5%.
- The AHA and our allied hospital association partners made sure that certain payment arrangements that sustain Medicaid State Directed Payments were not in immediate jeopardy.

## Protecting the Workforce

**Advancing bipartisan legislation:**

- The AHA has been successful in advancing support for the Safety from Violence for Healthcare Employees (SAVE) Act (H.R.2584/S.2768), bipartisan legislation that would provide federal protections for health care workers similar to those that apply to aircraft and airport workers.

## In the Courts

### Successful outcomes on several fronts:

- In March a federal appeals court upheld an Arkansas law, ruling that drugmakers cannot restrict 340B program offerings from community and specialty pharmacies.
- In June a United States District Court Judge in Texas ruled in favor of the AHA, Texas Hospital Association, and hospital plaintiffs, agreeing that Department of Health and Human Services “bulletins” that restrict health care providers from using standard third-party web technologies that capture IP addresses on portions of their public-facing webpages were unlawful final rules.
- AHA’s amicus brief played an important role in convincing the Supreme Court to take a case for the next term that could bring in more than \$1 billion annually for DSH hospitals.

## Holding Commercial Insurers Accountable

### Addressing prior authorization issues:

- In January, CMS finalized a rule that requires commercial insurers to act faster on prior authorization requests, give a reason for denials, and update electronic systems to facilitate prior authorization.
- In June, the AHA working with other stakeholders pushed for the reintroduction of a bipartisan bill -- Improving Seniors' Timely Access to Care Act -- in the Senate to codify and expand on parts of this rule.

## Achieving Regulatory Relief

### An important extension:

- Thanks to AHA feedback, the EPA extended the compliance window from 18 months to two to three years on a rule that will reduce ethylene oxide emissions from commercial sterilization facilities.