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STATEMENT ON FISCAL COMMISSION DSH CUTS

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Washington, D.C. – Earlier this afternoon, Erskine Bowles and Alan Simpson, co-chairs of the National Commission on Fiscal Responsibility and Reform, released a draft proposal describing their plan to reduce the federal budget deficit.

While the National Association of Public Hospitals and Health Systems (NAPH) supports deficit reduction as one component of the nation’s future economic stability, NAPH strongly opposes the proposal in this draft to accelerate cuts in vital Medicare and Medicaid payments to safety net hospitals and health systems.

In particular, the co-chairs’ draft proposal would accelerate cuts to essential Medicare and Medicaid supplemental payments that presently support a wide range of services for the nation’s most vulnerable populations. Under the Affordable Care Act, these payments (known as “Disproportionate Share Hospital” or “DSH” payments) were scheduled to be phased down as expanded coverage was implemented. These payments are an essential lifeline of support for health care providers serving the uninsured and providing community-wide services like trauma care.

During the current economic crisis, these payments are more important than ever. Millions of Americans have lost health coverage as unemployment has risen, and they have turned to our safety net for needed care. Our nation’s safety net hospitals and health systems continue to struggle with this influx of patients and lower payments due to our struggling economy and strained state budgets, all while preparing for health reform. We simply cannot afford to undercut this safety net by eliminating critical funding which ensures access to care for millions of the most vulnerable patients.

NAPH strongly urges commissioners to oppose the inclusion of this proposal in their final report.

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About the National Association of Public Hospitals and Health Systems (NAPH)

NAPH represents the nation’s largest metropolitan hospitals and health systems that fulfill a safety net mission of providing high volumes of care to low income individuals. These facilities provide high-quality health services for all patients, including the uninsured and underinsured, regardless of ability to pay. In addition to functioning as the country’s default national health insurance system, public hospitals provide many essential community-wide services, such as primary care, trauma care, and neonatal intensive care. Public hospitals also train many of America’s doctors, nurses, and other health care providers. Since its inception in 1980, NAPH has cultivated a strong presence on Capitol Hill, with the executive branch, and in many state capitols. NAPH advocates on behalf of its members on such issues as Medicaid, Medicare, and access to health care services for vulnerable populations. For more information, visit our website at http://www.naph.org/.