

W&M Hospital Bill Could Lay Foundation For Combining Part A And Part B

The “crosswalk bill” that the House Ways & Means Committee is working on over recess could set the stage for combining Medicare Part A and Part B, hospital lobbyists said. However, it’s not clear whether that’s the goal of the legislation, and AARP, which has opposed past proposals to combine inpatient and outpatient insurance, plans to contact the committee staff about the policy rationale. AARP is not taking a position on the bill until AARP lobbyists understand its purpose.

H.R. 3291 would require CMS to pay similar rates for inpatient and outpatient services for 10 DRGs on

surgeries. The bill and related legislation have been discussed in terms of site-neutral payments or as a reform to hospital short-stay policy.

Before August recess, Ways & Means Health Subcommittee Chair Kevin Brady (R-TX) said in the near-term he wants to change how Medicare pays for graduate medical education, smooth out rural disparities and apply similar pay-for-performance approaches from the physician-pay reform law to other providers. Long-term, he wants to tackle larger changes to Medicare, including combining Part A and Part B.