

Site-Neutral Payment Policies Jeopardize Patients' Access to Care

Background

- Congress is considering legislation that would reduce payments to hospitals for certain procedures provided in hospital outpatient departments (HOPDs), making them equivalent to payments made for services provided in physician offices.
- Proponents of these “site-neutral” proposals suggest that the care provided is the same, regardless of setting, and therefore the price should be the same.

Key Messages

- HOPD services are more expensive for important and legitimate reasons.
 - HOPDs have more comprehensive licensing, accreditation, and regulatory requirements than independent physician offices and ambulatory surgery centers.
 - Hospitals treat all who walk through their doors, regardless of coverage.
 - Patients who receive care in HOPDs typically have more complex medical needs and benefit from the additional clinical services available in these settings.
 - This is especially true at [HOSPITAL NAME]. Our patients are [XX%] Medicare beneficiaries and [XX%] Medi-Cal beneficiaries — and many are dually eligible. They need the additional support and care we provide.
- HOPDs provide critical services, like [INSERT EXAMPLE(S) OF SERVICES PROVIDED AT YOUR FACILITY], that may not be readily available in other community settings. Preserving access to care for the vulnerable populations served by Medicare and Medi-Cal must be paramount.

Resources

- [AHA Chart](#)
- [AHA Myth Fact Sheet](#)
- [CHA Letter](#)
- [AHA 2024 Advocacy Messages](#)