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House Passes CR with Health Care Extenders Through September

Senate must act by March 14 to avoid government shutdown

On March 11, the U.S. House of Representatives passed a continuing resolution (CR) to fund the government through September 30, the end of the federal fiscal year. Importantly, the legislation included critical extensions of health care programs slated to end at the end of March, including:

- **Telehealth waivers** Prior to the COVID-19 pandemic, Medicare did not reimburse for telehealth delivered to a patient's home. The patient was required to be seen at a health care facility, and even then, Medicare would only reimburse if that facility was in a rural, health professional shortage area. Without an extension of these waivers, Medicare would revert to that policy. WHA recently joined a coalition of more than 350 organizations in sending a letter to congressional leadership urging them to permanently extend the telehealth waivers.
- Hospital at Home CMS authorized the Acute Hospital Care at Home program to expand
 access to care during the COVID-19 pandemic. The program allows people with low acuity
 conditions to receive a hospital level of care equivalent to an inpatient stay in the comfort of
 their own home along with daily visits by nurses and telehealth visits from physicians. It has
 been an important tool for hospitals to increase capacity given the continued challenges of
 finding post-acute care placements which are continuing to create bottlenecks in the health
 care system.
- Medicare-Dependent (MDH) and Low-Volume Adjustment Hospitals (LVH) Wisconsin
 has approximately 16 "tweener" hospitals that are too large to be considered critical access
 hospitals but also too small to have the volumes necessary to offset Medicare and Medicaid
 losses. These MDH and LVH hospitals receive slightly enhanced Medicare reimbursement
 rates to help offset their Medicare losses. Losing these programs would amount to nearly
 \$230 million in cuts to these hospitals over the next ten years.

As covered in a recent edition of *The Valued Voice*, WHA was in Washington, DC with a group of rural health care leaders in mid-February advocating for the importance of extending these critical federal health care programs.

While continuing resolutions are typically approved on a bipartisan basis, the House passed this legislation on a largely party-line vote of 217-213, with all but one Republican voting yes and all

but one Democrat voting no. It remains to be seen if the U.S. Senate will have the 60 votes needed to pass this legislation in the Senate. If the Senate fails to act by the end of Friday, March 14, it will trigger a federal government shutdown. However, because the current continuing resolution funds the health care extensions for telehealth, the Hospital-at-Home program and the MDH/LVH programs through the end of March, those programs would not be impacted if Congress can pass a resolution to fund the government by the end of the month.

Contact WHA Vice President of federal and State Relations Jon Hoelter with questions.