



To the Health and Long-Term Care Committee, State Government Affairs & Community Relations Council Directors, and Other Interested Parties:

Thursday was a banner day for health and long-term care issues on Capitol Hill.

For over sixteen years, health providers, professionals, and consumers have grappled with yearly threats to their Medicare reimbursement levels and benefits, particularly around the Physician Sustainable Growth Rate (also known as the “Doc Fix”) as well as the Medicare Therapy Caps (which, if enacted, would have set a limit of \$1900 each year on the amount of physical therapy that a Medicare beneficiary could have). Both of these issues have been front and center for reform since their ill-fated inception in 1997. Yesterday, the House Ways & Means Committee and the Senate Finance Committee voted to move forward with legislation (HR 2810) calling for a permanent repeal to the Medicare’s doc fix and therapy cap provisions. If passed by both chambers and enacted by the President, these long sought reforms by organizations such as JFNA and local federations will become reality and improve finance and delivery of care to our partner agencies and the Medicare beneficiaries that depend on our network of agencies every day.

While these long-term provisions would be historic, the House acted swiftly yesterday with a bipartisan vote of 332-94 to enact a budget deal that included short term patches for Medicare providers, professionals, and consumers known as extenders. These extenders have been commonplace since 1997. Though most providers would receive a modest 0.5 percent update, the budget legislation (HJ Res 59) would provide some breathing space for finishing work on the much heralded replacement measures enumerated above.

In addition, the Senate Finance Committee adopted the Excellence in Mental Health Act (S. 264) pilot demonstration program as part of its amendments to the HR 2810. JFNA and federations/partner agencies have strongly supported the bi-partisan Excellence in Mental Health Act co-sponsored by Senator Debbie Stabenow (D-MI) and Senator Roy Blunt (R-MO). The Act would create a new, voluntary pathway for community mental health centers and addiction providers to become Certified Community Behavioral Health Centers. Many of our Jewish Family & Children’s Agencies would benefit from this new status which would make them eligible for new federal funds under this pilot demonstration project. From a procedural point of view, the Excellence pilot demonstration is remarkable as it was one of only seven amendments out of 137 that was passed out of Committee.

Unfortunately another amendment that we have advocated strongly on over the past few years, the Behavioral Health Information Technology (BHIT) Coordination Act, was withdrawn given funding concerns. However, BHIT picked up considerable steam leading up to the vote and there is hope that bi-partisan language can be added once HR 2810 reaches the Senate floor in the coming weeks.

In sum, we have made significant progress on several long-standing issues but there is more work to be done as we move ahead to floor votes. We will be in touch on additional steps as more information becomes available. In the meantime, please accept our deep appreciation to the many lay and professional leaders who helped bring us to this significant point.

Best,
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