Congress of the United States
Washington, DC 20515

February 27, 2015

The Honorable Sylvia Mathews Burwell
Secretary of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Secretary Burwell:

We write to express our disappointment with a proposal included in the Department of Health and Human Services' (HHS) Fiscal Year 2016 Budget, despite concerns raised previously by this delegation, which would drastically and unreasonably cut Medicare payments on behalf of seniors who are unable to meet their cost-sharing obligations to hospitals. These payments, often referred to as "bad debt" payments, remain critically important to hospitals in our districts and across the country.

Unfortunately, seniors in South Florida are continuing to struggle in this economy. When they are unable to meet their cost sharing obligations, established by the Medicare program, Medicare will then step in to cover a portion of these "bad debts" so that the burden does not fall onto the hospital alone. Unlike in agreements with private health insurance providers, hospitals do not have the ability to negotiate with Medicare to cover the costs of their patients who are unable to fulfill their cost-sharing obligation. Without these payments, hospitals will be put in an untenable position.

Currently, Medicare provides a 65 percent partial payment for the care received by a beneficiary after the hospital has exhausted every reasonable effort to collect the cost-sharing obligation, which can often take years to complete. This cost-sharing component is considered a core payment for the services provided by the hospital and relied on by hospitals to help make ends meet. Further, there is a growing amount of bad debt that hospitals are prevented, by law, from even trying to collect, including those from low-income Medicare beneficiaries who are dually eligible for Medicaid. Hospitals that serve this low-income population are already operating on very narrow margins. Further payment cuts could result in reduced access to vital services.

We must work together to sustain the current positive momentum of slowing growth in health care costs. However, the path ahead necessitates sensible and sustainable solutions. To date, the Medicare Payment Advisory Commission has not recommended reductions to these payments, and no recent hearings have been conducted focusing on Medicare bad debt payment policy. Cutting these payments is not a solution to the long-term fiscal sustainability of the Medicare program.

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As HHS and Congress look for Medicare savings, it is our view that we should only look to policies that have been fully vetted so that we may understand the impact these decisions will have on Medicare beneficiaries and the providers who serve them. Therefore, we urge you to not include the current proposal to cut Medicare "bad debt" payments in the next year's FY 2017 HHS budget.

We look forward to working with you to address the drivers of growth in health care costs and the challenges of ensuring the sustainability of a robust Medicare program for all of our nation's current and future seniors. We appreciate your consideration of our thoughts on this important issue.

Sincerely,

Lois Frankel
Member of Congress

Ileana Ros-Lehtinen
Member of Congress

Alcee L. Hastings
Member of Congress

Mario Diaz-Balart
Member of Congress

Debbie Wasserman Schultz
Member of Congress

Thomas J. Rooney
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Theodore E. Deutch
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Carlos Curbelo
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Frederica S. Wilson
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Patrick E. Murphy
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