UNITED STATES SENATOR

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NEWS RELEASE

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FOR IMMEDIATE RELEASE:

October 12, 2011

Senators Roberts and Barrasso Introduce Bill to Improve Rural Health Care

WASHINGTON, DC -- U.S. Senator Pat Roberts (R-Kan.), co-chairman of the Senate Rural Health Care Caucus, and U.S. Senator John Barrasso (R-Wyo.) today said their legislation to improve rural health care will strengthen the rural health delivery system and provide relief to hospitals and other providers serving rural Americans.

Sen. Roberts, Sen. Barrasso, Sen. Kent Conrad (D-N.D.) and Sen. Tom Harkin (D-Iowa) introduced this week the Craig Thomas Rural Hospital and Provider Equity Act (R-HoPE) to honor the service of the late Sen. Craig Thomas (R-Wyo.).

"The R-HoPE Act recognizes that rural health care providers have very different needs than their urban counterparts and that health care is not one size fits all," Roberts said.

“In Wyoming, we understand the challenges rural providers must overcome in delivering quality care to families in remote areas with limited resources,” said Barrasso. “Washington must remember that when it comes to Medicare, a one-size payment system does not fit all. Our legislation helps rural providers by changing unfair Medicare payment policies. We honor Craig Thomas’ legacy by continuing his fight to ensure that rural patients have access to medical care as close to home as possible.”

The bill makes changes to Medicare regulations for rural hospitals and providers, recognizing the difficulty in achieving the same economies of scale as large urban facilities. It also equalizes Medicare’s disproportionate share of hospital payments to bring rural hospitals in line with urban facilities and provides additional assistance for small, rural hospitals that have a low-volume of patients. Often, these hospitals have trouble making ends meet under the Medicare payment system.

The legislation provides a Capital Infrastructure Loan Program to make loans available to help rural facilities improve crumbling buildings and infrastructure. In addition, rural providers can apply to receive planning grants to help assess capital and infrastructure needs.

The bill extends to January 1, 2013, two incentive programs aimed at improving the quality of care by attracting health care providers to Health Professional Shortage Areas. The first is the Medicare Incentive Payment Program, which provides 10 percent bonus payments to physicians practicing in shortage areas. The second is the Physician Fee Schedule Work Geographic Adjustment, which brings rural doctors' Medicare fee schedules for wages more in line with those of urban doctors'.

Recognizing that other providers play a great role in the rural health delivery system the bill increases the payment cap for Rural Health Clinics to keep them in line with Community Health Centers, provides a five percent add-on payment for rural home health services and provides a five percent add-on payment for ground ambulance services in rural areas.

The bill improves planning for home health patients. Under existing Medicare policy, physician assistants, nurse practitioners, and clinical nurse specialists are not allowed to directly prescribe home health services. These restrictions limit these provider groups’ ability to offer needed services to patients, especially those living in rural and frontier areas. The bill also removes those restrictions for physician assistants, nurse practitioners, and clinical nurse specialists who have no financial relationship with a home health agency and are legally authorized to perform the services.

Currently, the Medicare program only permits psychiatrists, psychologists, social workers, and clinical nurse specialists to bill Medicare for mental health services provided to seniors. However, most rural counties do not have a psychiatrist or a psychologist. Marriage and family therapists and licensed professional counselors are much more likely to practice in a rural setting and are often the only mental health professionals available.

"One of the provisions in our bill that Senator Thomas particularly championed is a provision to allow marriage and family therapists and licensed professional counselors to bill Medicare for their services and be paid the rate of social workers," Roberts said. “This would level the playing field and bring them up to par with their mental health counterparts.”

Finally, this bill uses technology to improve home health services and quality for care by creating a pilot program providing incentives for home health agencies to purchase and utilize home monitoring and communications technologies and to facilitate telehealth services across state lines.

"I am proud and honored to introduce this bill on behalf of Senator Thomas," Roberts said. "We all miss him greatly as a personal friend, confidant and colleague.”

Sen. Roberts is honored to follow Sen. Thomas as Co-Chairman of the Senate Rural Health Caucus. Roberts is a member of the Senate Health, Education, Labor and Pensions Committee and is a member of the Senate Committee on Finance which has jurisdiction on Medicare.