



March 30, 2022

Welcome to America's Physician Groups' "Healthcare on the Hill," where you can get the latest on healthcare happenings in our nation's capital--and with a special focus on the value-based care movement.

As our nation continues to face many challenges, we are working to ensure you have the very latest information on our rapidly changing healthcare landscape.

Think someone else may enjoy "Healthcare on the Hill?" [Forward this email and have them click here to be added to our subscription list.](#) And remember, you can always visit our [website](#) for more news and resources.

***Garrett Eberhardt
Director of Federal Affairs
America's Physician Groups***

President Biden Releases FY2023 Budget Request

On Monday, President Joe Biden officially released his \$5.8 trillion [fiscal year \(FY\) 2023 budget request](#) to Congress. Democratic House leadership has already announced their intentions to pass each FY2023 appropriations bill by August, with Member appropriations requests due near the end of next month and individual committee markups likely to follow in May and June. Department of Health and Human Services (HHS) Secretary Xavier Becerra is set to appear at a hearing before the House Committee on Appropriations on Thursday to discuss his agency's section of the President's budget proposal.

HHS' [2023 Budget-in-Brief](#) includes a proposal to simplify the Medicare physician payment system by allowing five percent bonus payments for clinicians in alternative payment models (APM) to expire after this year but moving up by one year the higher pay rates that clinicians receive in APMs in comparison to Merit-based Incentive Payment System (MIPS) to avoid a gap in incentives. The expiration of the five percent bonus has been a policy focus of APG's advocacy strategy in recent weeks.

Congress Continues to Negotiate COVID-19 Relief as One Program Expires

Senator Mitt Romney (R-UT) announced that work on additional COVID-19 pandemic relief is continuing in Congress among both parties. His public pronouncement comes after the COVID-19 Uninsured Program from the Department of Health and Human Services (HHS) stopped accepting claims for testing and treating uninsured individuals for COVID-19 due to a lack of funds. The \$1.5 trillion Omnibus bill for federal government had its \$15 billion in COVID-19 relief funds removed at the end of negotiations due to Republicans and Democrats being unable to come to an agreement over their inclusion. Senate Democratic leadership and the Republican caucus continue to negotiate over a potential package for relief funding with payfors for the legislation being the major sticking point. APG and other stakeholders are also advocating before Congress on finding a solution to providing additional COVID-19 relief funding as healthcare organizations and providers continue to deal with the fallout from the pandemic.

CMS Releases Post-Public Health Emergency Guidance for States on Medicaid and CHIP

Yesterday, the Centers for Medicare and Medicaid Services (CMS) unveiled new resources for healthcare stakeholders to prepare for the eventual end of the Public Health Emergency (PHE). When the PHE eventually ends, states will be required to gradually redetermine eligibility for all Medicaid and Children's Health Insurance Program (CHIP) enrollees. The agency elected to release guidance that will assist states in keeping consumers connected to coverage by either renewing individuals' Medicaid or CHIP eligibility or transferring them to other health insurance options. The new resources include a new [Unwinding homepage](#) with the new [Communications Toolkit](#) and [graphics](#) to help partners begin reaching out to Medicaid and CHIP enrollees so that they are prepared for the upcoming renewal, along with several other unwinding resources.

CMS also suggests that providers and organizations help prepare for the renewal process by educating people with Medicaid and CHIP coverage about the upcoming changes. People with Medicaid & CHIP enrollees should update their contact information with their State Medicaid or CHIP program and anticipate a letter in the mail from their state about completing a renewal form. Enrollees should make sure their State Medicaid or CHIP program has their current mailing address, phone number, email, or other contact information and complete their renewal form, if sent one, and return it. This way, they'll be able to contact you about your Medicaid or CHIP coverage.

#