Sharon Kneebone

From: Charlotte Pineda <cpineda@neurosurgery.org>
Sent: Monday, June 30, 2025 12:42 PM
To: Charlotte Pineda
Cc: Manuel Bonilla; Shoaf, Lori; Walther, Cara; n.matus@asahq.org; Heyman, Jordan
Subject: STAT Recognizes Our Unity in Key Advocacy Win

Categories: 2: FYI

Dear Colleagues:

I wanted to share *STAT News* is reporting that the 75-member coalition letter is one of the chief reasons a Medicare payment provision was reinserted into the Senate's budget reconciliation package.

This progress would not have been possible without the unified (and short-noticed) effort of 75 clinician groups coming together to provide our legislative champions with the support they needed to approach Senate leadership and the Finance Committee. Deep thanks to US Senators Roger Marshall, MD (KS), and Dr. Bill Cassidy, MD (LA) — who fought hard for us with that letter in hand. While the final provision reflects the Senate's prior agreement from December and does not go as far as the House-passed version, the 75 should all take pride in knowing that this unity made a real difference. Without it, I've been told this policy would have likely remained on the cutting room floor.

We continue to engage on multiple fronts. Like many of you, the AANS and CNS are lobbying on a range of provisions through separate advocacy efforts to help shape what appears to be an inevitable legislative vehicle, ensuring it protects both our members and the patients they serve. Thanks to the Senate Parliamentarian, several harmful Medicaid provisions affecting trauma centers were blocked from moving forward. I'm also closely tracking – and grateful for – the momentum on the federal student loan cap, thanks to the leadership of the **American Association of Oral and Maxillofacial Surgeons**, the **American Academy of Family Physicians**, and the **American Association of Orthopaedic Surgeons**. And a big kudos to the **American Dental Association** for uniting many of us around the PTET fix and securing a best-case outcome. Each of your organizations is leading on critical issues, and I'm proud of the strength and coordination we've shown throughout this process.

The STAT article is provided below in case you'd like to share it with your leadership to showcase your organization's impact. Thank you again for your partnership.

Warm regards,
Charlotte

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Senate GOP tweaks health care measures in tax bill to win holdouts, please parliamentarian

The new version of the bill pairs Medicaid cuts with $25 billion rural hospital fund

Late Friday, Senate GOP unveiled changes to health care policies in tax legislation in a bid to win over Republican holdouts and pass muster with budget rules. *Samuel By John Wilkerson and Daniel Payne*
June 28, 2025

Senate Republicans unveiled late Friday changes to health care policies in tax legislation that they made to win over holdouts in their party and pass muster with budget rules.

The changes were made public around midnight, and the long voting process for the bill could start on Saturday. Republicans are using a budget process called reconciliation that allows them to pass the bill without Democratic support. But there is a special process for voting on budget reconciliation bills that can take days to get through.

Lawmakers' votes and amendments over the coming days could change the landscape for patients and health care providers who rely on Medicaid, with millions expected to lose coverage and huge cuts to federal funding that otherwise would have gone to hospitals and other providers, according to CBO estimates.

Arcane rules govern the budget reconciliation process, and the Senate parliamentarian is in charge of enforcing them. It had looked like Republicans had lost some key Medicaid policies that they were counting on to help pay for President Trump's tax cuts in the One Big Beautiful Bill Act. Technical changes may clear up those issues, though the parliamentarian could still reject them.

A state provider tax policy is among the measures that Republicans are trying to salvage after the parliamentarian's initial review. States use provider taxes to boost how much the federal government pays them, a funding strategy that is legal but has recently been characterized by conservative lawmakers and Centers for Medicare and Medicaid Services Administrator Mehmet Oz as "money laundering." The bill would ban new or increased provider taxes in all states.

Hospitals would be hit hardest by Medicaid cuts in GOP tax bill, report finds

For states that have expanded Medicaid to cover adults without dependents, the bill would lower the current 6% cap on provider tax rates to 3.5%, phased in 0.5% annually. It also would limit how much states can raise Medicaid payment rates for providers, though states that have not expanded Medicaid would be allowed to set higher rates than those that have expanded Medicaid.

Those policies do not sit well with some Republicans in states that have expanded Medicaid. They worry it would run rural hospitals out of business. To assuage those concerns, a $25 billion fund was added to the bill to help rural hospitals stay open in the face of Medicaid cuts. Hospital groups met the new text with calls for Republicans to again rethink their plan, arguing the cuts would be devastating to patients and providers alike.

Many so-called Medicaid moderates in the GOP have expressed serious concerns about the Senate's previous versions of the bill, though the Friday version seems to have softened some of their opposition. Still, some lawmakers told reporters they wanted changes before final passage.

Those cuts include work requirements and more frequent eligibility checks for people on Medicaid. However, those policies have near unanimous support from Republicans and were untouched by the parliamentarian.

The House's tax bill would cut more than $1 trillion from federal spending on health coverage over a decade. The Senate bill includes deeper cuts, but the Congressional Budget Office has not yet estimated its budget impact. That CBO score, and parliamentarian rulings on the updated measures, will come out as the Senate proceeds with the reconciliation voting process.

Republicans are giving up on a couple of key policies that the parliamentarian ruled out of order with budget reconciliation rules.

The bill no longer includes a policy, worth about $30 billion in savings, that would have funded federal subsidies to health insurers that help pay out-of-pocket costs for low-income people who get coverage through the ACA marketplaces. Paying the subsidies would actually lower costs for the federal government.

A ban on the drug middleman practice of spread pricing in Medicaid also was dropped from the bill.

But they tweaked several other health care measures in an effort to preserve them. Among them are multiple measures that would cut federal funding for Medicaid and other health care programs from states that provide coverage to certain immigrants.

Lawmakers lobby doctors to keep quiet — or speak up — on Medicaid cuts in Trump's tax bill

Undocumented immigrants are generally not eligible for federal health insurance and not allowed to participate in the Affordable Care Act marketplaces. But some states offer health insurance to immigrants using their own funds. Some states also provide coverage for foreign citizens who are in the United States legally.

In states that cover certain undocumented immigrants, the bill would cut federal funding by 10% for Medicaid enrollees who became eligible for the program under the ACA's expansion. It also would limit Medicaid eligibility based on immigration status, and prohibit refugees and asylees from receiving Medicare.

Republicans also are trying to preserve a ban on Medicaid and Children's Health Insurance Program funds from going to gender-affirming care. A separate measure that would ban federal funding to organizations like Planned Parenthood that provide abortions remains in the bill. It's still awaiting a review by the parliamentarian.

The new bill text also sets doctors up to get a pay bump in 2026 when treating Medicare beneficiaries. Doctors would get a 2.5% pay bump next year, should the bill pass in its current version. The change comes after the House version of the bill included a provision that would tie doctors' pay to inflation, a provision many doctors groups have been chasing for years. The Senate left that policy — and any pay bump for doctors — out of earlier versions of their bill but included a single-year boost in the Friday night version after new lobbying efforts from physician and other clinician groups.

The latest Senate draft also includes a provision that would exempt more drugs from Medicare price negotiation under the Inflation Reduction Act, a law President Biden championed. The ORPHAN Cures Act, which was left out of earlier versions of the Senate's bill but included in last night's text, would exclude drugs that treat more than one rare disease from price negotiation. Should it pass, the provision would be a win for pharmaceutical companies and Republicans who have sought to weaken parts of the government's fledgling negotiation program.