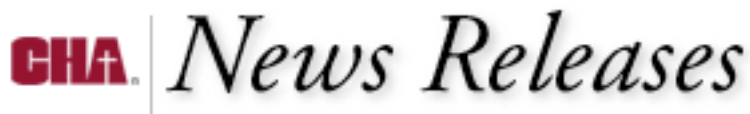


CMS Rescinds Undocumented Immigrant Regulation

The Centers for Medicare & Medicaid Services (CMS) has announced it no longer will seek to require hospitals to ask about the immigration status of patients in order to qualify for funds to reimburse providers for the cost of care for undocumented immigrants. The funds are provided under Section 1011 of the Medicare Modernization Act.

The Catholic health ministry vigorously opposed the provision and submitted comments to CMS saying its implementation would be a burdensome requirement that would adversely affect the health of this vulnerable population. In response to comments critical of the proposal, CMS Administrator Mark McClellan, MD, said the agency took particular note of the negative impact of the requirements on public health and acknowledged concerns that the policy would impair the provider-patient relationship.

In a statement released following the CMS decision, CHA President and Chief Executive Officer Fr. Michael D. Place welcomed the decision as one that would “not impair the relationship of trust that hospitals enjoy with all patients.” The statement also noted the increasing financial burden on providers for providing emergency services to undocumented immigrants and called for members of Congress and the administration to review funding issues to ensure access to critical care. CHA awaits a final guidance from CMS on the implementation of Section 1011 and may make additional comments at that time.



Catholic Health Association Welcomes CMS Decision Regarding Emergency Health Services Provided To Undocumented Immigrants

Catholic Health Ministry had Expressed Opposition to Proposed Regulations

WASHINGTON, DC (October 5, 2004)—Rev. Michael D. Place, STD, president and chief executive officer of the Catholic Health Association of the United States (CHA), issued the following statement in response to the Centers for Medicare and Medicaid Services (CMS) rescinding implementation of regulations regarding emergency health services provided to undocumented immigrants.

The Catholic health ministry welcomes the news that the Centers for Medicare & Medicaid Services (CMS) has reconsidered its earlier guidance that would have required hospitals to ask detailed questions about the immigration status of individual patients in order to apply for funds to reimburse hospitals for the costs of caring for the undocumented. Section 1011 of the Medicare Modernization Act of 2003 (MMA) provides \$250 million per year over the next five years to reimburse eligible health care providers for certain health services utilized to treat undocumented immigrants.

As the Catholic health ministry underscored in comments to CMS, the proposed regulations imposed a burdensome requirement that may have deterred undocumented immigrants from seeking timely and appropriate medical care. The consequences not only could have adversely affected the health of those individuals, but the wider community as well, through greater risks to the public health. As a ministry committed to social justice and the care of vulnerable persons, we are pleased that CMS has indicated its intention to publish a final policy that will not impair the relationship of trust that hospitals enjoy with all patients.

Catholic hospitals will continue to provide life-saving emergency care to anyone coming to their doors, including undocumented immigrants. However, the costs of providing such emergency services to undocumented immigrants is imposing an increasing financial burden on providers. As a result, the Catholic health ministry looks forward to working with CMS, members of Congress, and others to review appropriate funding issues to ensure that access to critical health care is not hindered. We look forward to receiving further guidance from CMS.

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The St. Louis-based Catholic Health Association of the United States (CHA) is the national leadership organization of the Catholic health ministry, engaged in strategic directions of mission, ethics, and advocacy. CHA's more than 2,000 members form the nation's largest group of not-for-profit health care sponsors, systems, facilities, health plans, and related organizations.

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