

The Site Isn't Neutral



CHILDREN'S HOSPITAL ASSOCIATION

Children's Hospitals Extend Pediatric Care Close to Home

OPPOSE site neutral policies, including eliminating “facility fees” or other policies, that reduce support for and would have a negative impact on pediatric care.

Site neutral policies refer to policies that keep payments for services the same regardless of the care setting where that service was provided. Children's hospitals care for kids with some of the most complex and challenging conditions in pediatrics. **As regional care providers, hospital-based clinics extend the critical care, urgent care, emergency services, and specialized pediatric services found at a hospital to a location closer to home for patients.**

One type of site neutral policy is **reducing or eliminating facility fees.**

TYPES OF FEES



Facility Fee: These fees pay for every other aspect of care for the patient, besides the doctor or advanced practice provider.



Professional Fee: These fees pay for the time spent by the doctor or advanced practice provider with the patient.

At pediatric outpatient care centers, **facility fees may pay for:**



- Nurses
- Nursing assistants



- Medical Interpreters
- Housekeeping & environmental



- Social Workers
- Child life specialists



- Security guards
- Front desk and check-in staff



- Case managers
- Care coordinators



- Integrated electronic medical record
- Furniture (e.g., exam tables, waiting room chairs)



- Dietitians



- Maintenance of buildings & utilities

If these policies are adopted:

- It will negatively impact children's hospital's ability to expand and open outpatient facilities farther from the hospital, discouraging the promotion of community-based care.
- Patient access to timely care could be restricted, especially for children with medically with medically complex conditions who are sicker and are cared for more frequently in ambulatory, outpatient settings.
- Rural communities may lose access to outpatient facilities that provide services like consultations, infusions, outpatient procedures, urgent care and pediatric diagnostic and therapies, resulting in worse outcomes and farther travel and burden for children with medical complexity who need coordinated care that continues outside the hospital setting.