

117<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. R. 9658

To amend title XVIII of the Social Security Act to establish a new criterion for the nonapplication of site-neutral payments to long-term care hospitals under the Medicare program.

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## IN THE HOUSE OF REPRESENTATIVES

DECEMBER 21, 2022

Mr. HERN introduced the following bill; which was referred to the Committee on Ways and Means

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## A BILL

To amend title XVIII of the Social Security Act to establish a new criterion for the nonapplication of site-neutral payments to long-term care hospitals under the Medicare program.

1        *Be it enacted by the Senate and House of Representa-*  
2        *tives of the United States of America in Congress assembled,*

3        **SECTION 1. SHORT TITLE.**

4        This Act may be cited as the “Securing Access to  
5        Care for Seniors in Critical Condition Act of 2022”.

1 **SEC. 2. ESTABLISHING A NEW CRITERION FOR THE NON-**  
2 **APPLICATION OF SITE-NEUTRAL PAYMENTS**  
3 **TO LONG-TERM CARE HOSPITALS UNDER**  
4 **THE MEDICARE PROGRAM.**

5 Section 1886(m)(6)(A) of the Social Security Act (42  
6 U.S.C. 1395ww(m)(6)(A)) is amended—

7 (1) by striking “or the ventilator criterion  
8 under clause (iv)” and inserting “, the ventilator cri-  
9 terion under clause (iv), or the high acuity criterion  
10 described in clause (v)”;

11 (2) by adding at the end the following new  
12 clause:

13 “(v) HIGH ACUITY CRITERION.—

14 “(I) IN GENERAL.—The criterion  
15 specified in this clause (in this para-  
16 graph referred to as the ‘high acuity  
17 criterion’) for a discharge from a  
18 long-term care hospital in a fiscal year  
19 is that—

20 “(aa) the individual dis-  
21 charged had a primary diagnosis  
22 assigned to a Medicare-Severity-  
23 Long-Term-Care-Diagnosis-Re-  
24 lated-Group (MS-LTC-DRG)  
25 with a relative weight for such  
26 fiscal year that was equal to or

1 greater than the specified  
2 amount for such fiscal year; and

3 “(bb) the discharge occurred  
4 on or after October 1, 2025.

5 “(II) SPECIFIED AMOUNT DE-  
6 FINED.—For purposes of subclause  
7 (I), the term ‘specified amount’  
8 means, with respect to a fiscal year,  
9 an amount equal to the 80th per-  
10 centile of the relative weights for  
11 Medicare-Severity-Long-Term-Care-  
12 Diagnosis-Related-Groups that were  
13 assigned to primary diagnoses for all  
14 discharges occurring in the preceding  
15 fiscal year.”.

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