

116TH CONGRESS
1ST SESSION

S. 1240

To amend title XVIII of the Social Security Act to count resident time spent in a critical access hospital as resident time spent in a nonprovider setting for purposes of making Medicare direct and indirect graduate medical education payments.

IN THE SENATE OF THE UNITED STATES

APRIL 30, 2019

Mr. TESTER introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to count resident time spent in a critical access hospital as resident time spent in a nonprovider setting for purposes of making Medicare direct and indirect graduate medical education payments.

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 “Restoring Rural
5 Residencies Act of 2019”.

1 **SEC. 2. COUNTING RESIDENT TIME SPENT IN A CRITICAL**
 2 **ACCESS HOSPITAL AS RESIDENT TIME SPENT**
 3 **IN A NONPROVIDER SETTING FOR PURPOSES**
 4 **OF MAKING MEDICARE DIRECT AND INDI-**
 5 **RECT GRADUATE MEDICAL EDUCATION PAY-**
 6 **MENTS.**

7 (a) GME.—Section 1886(h)(4) of the Social Security
 8 Act (42 U.S.C. 1395ww(h)(4)) is amended—

9 (1) in subparagraph (E), by striking “subpara-
 10 graphs (J) and (K)” and inserting “subparagraphs
 11 (J), (K), and (L)”; and

12 (2) by adding at the end the following new sub-
 13 paragraph:

14 “(L) TREATMENT OF CRITICAL ACCESS
 15 HOSPITALS.—Effective for cost reporting peri-
 16 ods beginning on or after July 1, 2020, such
 17 rules shall provide that a critical access hospital
 18 (as defined in section 1861(mm)(1)) is deemed
 19 to be a nonprovider setting for purposes of de-
 20 termining the hospital’s number of full-time
 21 equivalent residents under this subsection.”.

22 (b) IME.—Section 1886(d)(5)(B)(iv)(II) of the So-
 23 cial Security Act (42 U.S.C. 1395ww(d)(5)(B)(iv)(II)) is
 24 amended by adding at the end the following sentence: “Ef-
 25 fective for discharges occurring on or after July 1, 2020,
 26 for purposes of this subclause, a critical access hospital

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1 (as defined in section 1861(mm)(1)) is deemed to be a
2 nonprovider setting.”.

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