# <sup>111TH CONGRESS</sup> 2D SESSION **S. 3315**

To amend title XVIII of the Social Security Act to protect Medicare beneficiaries' access to home health services under the Medicare program.

#### IN THE SENATE OF THE UNITED STATES

MAY 5, 2010

Ms. COLLINS (for herself and Mr. FEINGOLD) 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 protect Medicare beneficiaries' access to home health services 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 "Home Health Care5 Access Protection Act of 2010".

### 6 SEC. 2. PROTECTING ACCESS TO MEDICARE HOME HEALTH

#### 7 SERVICES.

8 Section 1895(b)(3)(B) of the Social Security Act (42
9 U.S.C. 1395fff(b)(3)(B)), as amended by section 3401(e)

1	of the Patient Protection and Affordable Care Act (Public
2	Law 111–148), is amended—
3	(1) in clause (iv), by striking "Insofar as" and
4	inserting "Subject to clause (vii), insofar as"; and
5	(2) by adding at the end the following new
6	clause:
7	"(vii) Special rules for adjust-
8	MENT FOR CASE MIX CHANGES FOR 2011
9	AND SUBSEQUENT YEARS.—
10	"(I) IN GENERAL.—For 2011
11	and each subsequent year, subject to
12	subclause (IV), any adjustment under
13	clause (iv) shall only be made using
14	standards established by the Secretary
15	consistent with the processes de-
16	scribed in subclause (II) and taking
17	into account the considerations de-
18	scribed in subclause (III).
19	"(II) PROCESSES AND CRITERIA
20	FOR EVALUATING CHANGES IN CASE
21	MIX.—For purposes of subclause (I),
22	the processes described in this sub-
23	clause are the following:
24	"(aa) The Secretary shall
25	convene a Technical Advisory

Group to advise the Secretary
concerning the establishment of
standards under subclause (I) in
order to distinguish between real
changes in case mix and changes
in coding or classification of dif-
ferent units of services that do
not reflect real changes in case
mix. The Technical Advisory
Group shall be composed of
stakeholders, including an equal
number of individuals and orga-
nizations representing the inter-
ests of Medicare beneficiaries, the
National Association for Home
Care and Hospice, the Visiting
Nurse Associations of America,
health care academia, and health
care professionals. Members shall
not have an existing contractual
relationship with the Secretary at
the time of their appointment to
the Technical Advisory Group.
The Secretary shall provide the
Technical Advisory Group an op-

1	portunity to review and comment
2	on any proposed rulemaking or
3	final determination of the Sec-
4	retary with respect to such stand-
5	ards prior to the issuance of the
6	proposed rulemaking or making
7	of the final determination.
8	"(bb) If the Secretary en-
9	gages an outside contractor to
10	participate in the evaluation of
11	case mix changes described in
12	item (aa), the Secretary shall
13	only utilize an outside contractor
14	that has not previously partici-
15	pated in the design and establish-
16	ment of the case mix adjustment
17	factors under paragraph (4)(B).
18	"(cc) If the Secretary deter-
19	mines that any increase in case
20	mix relates to changes in the vol-
21	ume or nature of home health
22	services provided, the Secretary

services provided, the Secretary 23 shall evaluate that increase 24 through the actual review of 25 claims and services and shall not

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1	use any proxy or surrogate for
2	determining whether the change
3	in volume or nature of services is
4	reasonable and necessary.
5	"(dd) The Secretary shall
6	establish such standards by regu-
7	lation.
8	"(ee) The Secretary shall
9	make available to the public all
10	data, reports, and supporting
11	materials, including any com-
12	ments by the Technical Advisory
13	Group under item (aa), regarding
14	the establishment of such stand-
15	ards at the time of the publica-
16	tion of the notice of the proposed
17	regulation.
18	"(III) Considerations.—For
19	purposes of subclause (I), the consid-
20	erations described in this subclause
21	are the following:
22	"(aa) The impact of changes
23	in the program under this title
24	that may affect the characteris-

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1	tics of individuals receiving home
2	health services.
3	"(bb) The impact of changes
4	in the provision of home health
5	services by providers of services
6	and suppliers other than home
7	health agencies.
8	"(cc) Distinctions in the
9	characteristics of individuals ini-
10	tiating home health services from
11	community and institutional care
12	settings.
13	"(dd) Whether any changes
14	in coding resulted in a change in
15	aggregate payments under this
16	subsection during the fiscal year
17	or year and disregarding changes
18	in coding that did not result in
19	such a change in aggregate pay-
20	ments.
21	"(ee) Any other factors de-
22	termined appropriate by the Sec-
23	retary, in consultation with the
24	Technical Advisory Group under
25	subclause (II)(aa).

"(IV) EXCEPTION FOR CERTAIN
 ADJUSTMENTS FOR 2011.—This clause
 shall not apply to any adjustment
 under clause (iv) that is scheduled for
 2011 as of January 1, 2010.".