

116TH CONGRESS  
1ST SESSION

# H. R. 2573

To amend title XVIII of the Social Security Act to improve home health payment reforms under the Medicare program.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 8, 2019

Ms. SEWELL of Alabama (for herself, Mr. BUCHANAN, Mr. ABRAHAM, Ms. KUSTER of New Hampshire, Mr. LARSON of Connecticut, Mr. MARCHANT, Mr. GRAVES of Louisiana, Mr. ARRINGTON, Mr. THORNBERRY, Mr. PANETTA, and Mr. DESJARLAIS) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to improve home health payment reforms 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 Payment  
5       Innovation Act of 2019”.

1     **SEC. 2. IMPROVEMENTS TO MEDICARE INNOVATIONS AND**  
2                 **MANAGED CARE RELATED TO HOME HEALTH**  
3                 **SERVICES.**

4         (a) EXPANDED WAIVERS IN SHARED SAVINGS PRO-  
5         GRAMS.—Section 1899(f) of the Social Security Act (42  
6         U.S.C. 395jjj(f)), is amended by adding at the end the  
7         following: “Beginning not later than January 1, 2020, the  
8         Secretary shall include a waiver of the ‘confined to his  
9         home’ requirement under sections 1814(a)(2)(C) and  
10         1835(a)(2)(A) in one or more programs under this sec-  
11         tion.”.

12         (b) FLEXIBILITY IN MEDICARE ADVANTAGE  
13         PLANS.—Section 1852 of the Social Security Act (42  
14         U.S.C. 1395ww–2) is amended by adding at the end the  
15         following:

16         “(o) FLEXIBILITY IF PROVIDING HOME HEALTH  
17         SERVICES.—Notwithstanding any other provision of law,  
18         any MA organization shall be permitted to waive the ‘con-  
19         fined to his home’ requirement in the home health services  
20         benefit when the organization determines it is in the best  
21         interest of the enrollee.”.

22     **SEC. 3. IMPROVEMENTS TO HOME HEALTH PAYMENT RE-**  
23                 **FORMS UNDER MEDICARE.**

24         (a) APPLICATION OF BUDGET NEUTRALITY.—Sec-  
25         tion 1895(b)(3) of the Social Security Act (42 U.S.C.  
26         1395fff(b)(3)), as amended by section 51001(a)(2) of the

1 Bipartisan Budget Act of 2018 (Public Law 115–123),

2 is amended—

3 (1) in subparagraph (A)(iv), in the fourth sen-  
4 tence—

5 (A) by striking “shall make” and inserting  
6 “shall not make”; and

7 (B) by striking “and shall provide a de-  
8 scription” and all that follows through the pe-  
9 riod and inserting a period; and

10 (2) in subparagraph (D)—

11 (A) in the subparagraph heading, by strik-  
12 ing “ASSUMPTIONS” and inserting “EVIDENCE”;

13 (B) in clause (i)—

14 (i) by striking “differences between  
15 assumed” and all that follows through  
16 “and actual”;

17 (ii) by inserting “attributable to the  
18 implementation of paragraphs (2)(B) and  
19 (4)(B)” after “behavior changes”; and

20 (iii) by adding at the end the fol-  
21 lowing: “The Secretary shall publish the  
22 determination under this clause with re-  
23 spect to an applicable year, including a de-  
24 scription of the evidence used to make such  
25 determination, in the notice and comment

rulemaking to update the prospective payment system under this subsection for such year. For purposes of the preceding sentence, the term ‘evidence’ means the most recent data after January 1, 2020, that reflects the difference between real changes in case mix and behavioral changes relating to implementation of the provisions of and amendments made by section 51001 of the Bipartisan Budget Act of 2018 (Public Law 115–123).”;

(C) in clause (ii), by inserting “attributable to the implementation of paragraphs (2)(B) and (4)(B)” after “expenditures”; and

(D) in clause (iii)—

(i) by adding “attributable to the implementation of paragraphs (2)(B) and (4)(B)” after “expenditures”; and

(ii) by adding at the end the following: “If such a temporary increase or decrease does not exceed 2.00 percent in any given year, the Secretary shall apply the entire increase or decrease in the next calendar year payment update. In the case where such a temporary increase or de-

1           crease exceeds 2.00 percent, the Secretary  
2           shall phase in the temporary increase or  
3           decrease in equal amounts not to exceed  
4           2.00 percent in any given year through the  
5           respective calendar year payment updates.  
6           Notwithstanding the preceding sentence,  
7           the Secretary shall complete any such  
8           phase-in adjustment no later than 2029  
9           and shall have the authority, after 2025, to  
10          waive the phase-in requirement as nec-  
11          essary to achieve budget neutrality by  
12          2029. Prior to implementing such phase-in  
13          adjustments after 2025, the Secretary  
14          shall first receive certification from the Of-  
15          fice of the Actuary of the Centers for  
16          Medicare & Medicaid Services that any  
17          such adjustments are appropriate.”.

18        (b) EFFECTIVE DATE.—The amendments made by  
19        this section shall take effect as if included in the enact-  
20        ment of such section 51001(a)(2).

