## Suspend the Rules And Pass the Bill, H. R. 1845, with Amendments

(The amendments strike all after the enacting clause and insert a new text and a new title)

112TH CONGRESS 1ST SESSION H. R. 1845

To provide for a study on issues relating to access to intravenous immune globulin (IVIG) for Medicare beneficiaries in all care settings and a demonstration project to examine the benefits of providing coverage and payment for items and services necessary to administer IVIG in the home.

## IN THE HOUSE OF REPRESENTATIVES

May 11, 2011

Mr. Brady of Texas (for himself, Ms. Matsui, Mr. Burgess, Mr. Sarbanes, Mr. Paul, Mr. Van Hollen, Mr. Tiberi, Mr. Ruppersberger, Mrs. Blackburn, Mr. Schiff, Ms. Jenkins, Mr. Kind, Ms. Fudge, Ms. Richardson, and Mr. Rush) 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

## A BILL

To provide for a study on issues relating to access to intravenous immune globulin (IVIG) for Medicare beneficiaries in all care settings and a demonstration project to examine the benefits of providing coverage and payment for items and services necessary to administer IVIG in the home.

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 "Medicare IVIG Access
5	and Strengthening Medicare and Repaying Taxpayers Act
6	of 2012".
7	TITLE I—MEDICARE IVIG
8	ACCESS
9	SEC. 101. MEDICARE PATIENT IVIG ACCESS DEMONSTRA-
10	TION PROJECT.
11	(a) Establishment.—The Secretary shall establish
12	and implement a demonstration project under part B of
13	title XVIII of the Social Security Act to evaluate the bene-
14	fits of providing payment for items and services needed
15	for the in-home administration of intravenous immune
16	globin for the treatment of primary immune deficiency dis-
17	eases.
18	(b) Duration and Scope.—
19	(1) Duration.—Beginning not later than one
20	year after the date of enactment of this Act, the
21	Secretary shall conduct the demonstration project
22	for a period of 3 years.
23	(2) Scope.—The Secretary shall enroll not
24	more than 4,000 Medicare beneficiaries who have
25	been diagnosed with primary immunodeficiency dis-

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ease for participation in the demonstration project.

2	A Medicare beneficiary may participate in the dem-
3	onstration project on a voluntary basis and may ter-
4	minate participation at any time.
5	(c) COVERAGE.—Except as otherwise provided in this
6	section, items and services for which payment may be
7	made under the demonstration program shall be treated
8	and covered under part B of title XVIII of the Social Se-
9	curity Act in the same manner as similar items and serv-
10	ices covered under such part.
11	(d) Payment.—The Secretary shall establish a per
12	visit payment amount for items and services needed for
13	the in-home administration of intravenous immune globin
14	based on the national per visit low-utilization payment
15	amount under the prospective payment system for home
16	health services established under section 1895 of the So-
17	cial Security Act (42 U.S.C. 1395fff).
18	(e) WAIVER AUTHORITY.—The Secretary may waive
19	such requirements of title XVIII of the Social Security Act
20	as may be necessary to carry out the demonstration
21	project.
22	(f) STUDY AND REPORT TO CONGRESS.—
23	(1) Interim evaluation and report.—Not
24	later than three years after the date of enactment of
25	this Act, the Secretary shall submit to Congress a

1	report that contains an interim evaluation of the im-
2	pact of the demonstration project on access for
3	Medicare beneficiaries to items and services needed
4	for the in-home administration of intravenous im-
5	mune globin.
6	(2) Final evaluation and report.—Not
7	later than one year after the date of completion of
8	the demonstration project, the Secretary shall sub-
9	mit to Congress a report that contains the following:
10	(A) A final evaluation of the impact of the
11	demonstration project on access for Medicare
12	beneficiaries to items and services needed for
13	the in-home administration of intravenous im-
14	mune globin.
15	(B) An analysis of the appropriateness of
16	implementing a new methodology for payment
17	for intravenous immune globulins in all care
18	settings under part B of title XVIII of the So-
19	cial Security Act (42 U.S.C. 1395k et seq.).
20	(C) An update to the report entitled
21	"Analysis of Supply, Distribution, Demand, and
22	Access Issues Associated with Immune Globulin
23	Intravenous (IGIV)", issued in February 2007
24	by the Office of the Assistant Secretary for

1	Planning and Evaluation of the Department of
2	Health and Human Services.
3	(g) Funding.—There shall be made available to the
4	Secretary to carry out the demonstration project not more
5	than \$45,000,000 from the Federal Supplementary Med-
6	ical Insurance Trust Fund under section 1841 of the So-
7	cial Security Act (42 U.S.C. 1395t).
8	(h) DEFINITIONS.—In this section:
9	(1) Demonstration project.—The term
10	"demonstration project" means the demonstration
11	project conducted under this section.
12	(2) Medicare beneficiary.—The term
13	"Medicare beneficiary" means an individual who is
14	enrolled for benefits under part B of title XVIII of
15	the Social Security Act.
16	(3) Secretary.—The term "Secretary" means
17	the Secretary of Health and Human Services.

1	TITLE	II—S7	<b>TRENGTHENING</b>
2	<b>MEDI</b>	CARE	<b>SECONDARY</b>
3	PAYE	R RULES	
4	SEC. 201. DET	ERMINATION OF	REIMBURSEMENT AMOUNT
5	Т	THROUGH CMS W	EBSITE TO IMPROVE PRO-
6	C	RAM EFFICIENC	Υ.
7	Section 1	862(b)(2)(B) of	the Social Security Act (42
8	U.S.C. 1395y	(b)(2)(B)) is amo	ended by adding at the end
9	the following r	new clause:	
10		"(vii) Use	OF WEBSITE TO DETER-
11		MINE FINAL (	CONDITIONAL REIMBURSE-
12		MENT AMOUNT	_
13		"(I) N	NOTICE TO SECRETARY OF
14		EXPECTED	DATE OF A SETTLEMENT,
15		JUDGMENT	, ETC.—In the case of a
16		payment m	ade by the Secretary pur-
17		suant to cla	ause (i) for items and serv-
18		ices provid	led to the claimant, the
19		claimant o	r applicable plan (as de-
20		fined in p	aragraph (8)(F)) may at
21		any time k	peginning 120 days before
22		the reasona	ably expected date of a set-
23		tlement, ju	adgment, award, or other
24		payment, r	notify the Secretary that a

1	payment is reasonably expected and
2	the expected date of such payment.
3	"(II) SECRETARIAL PROVIDING
4	ACCESS TO CLAIMS INFORMATION
5	THROUGH A WEBSITE.—The Sec-
6	retary shall maintain and make avail-
7	able to individuals to whom items and
8	services are furnished under this title
9	(and to authorized family or other
10	representatives recognized under regu-
11	lations and to an applicable plan
12	which has obtained the consent of the
13	individual) access to information on
14	the claims for such items and services
15	(including payment amounts for such
16	claims), including those claims that
17	relate to a potential settlement, judg-
18	ment, award, or other payment . Such
19	access shall be provided to an indi-
20	vidual, representative, or plan through
21	a website that requires a password to
22	gain access to the information. The
23	Secretary shall update the information
24	on claims and payments on such
25	website in as timely a manner as pos-

1	sible but not later than 15 days after
2	the date that payment is made. Infor-
3	mation related to claims and pay-
4	ments subject to the notice under sub-
5	clause (I) shall be maintained and
6	made available consistent with the fol-
7	lowing:
8	"(aa) The information shall
9	be as complete as possible and
10	shall include provider or supplier
11	name, diagnosis codes (if any),
12	dates of service, and conditional
13	payment amounts.
14	"(bb) The information accu-
15	rately identifies those claims and
16	payments that are related to a
17	potential settlement, judgment,
18	award, or other payment to
19	which the provisions of this sub-
20	section apply.
21	"(cc) The website provides a
22	method for the receipt of secure
23	electronic communications with
24	the individual, representative, or
25	plan involved.

1	"(dd) The website provides
2	that information is transmitted
3	from the website in a form that
4	includes an official time and date
5	that the information is trans-
6	mitted.
7	"(ee) The website shall per-
8	mit the individual, representative,
9	or plan to download a statement
10	of reimbursement amounts (in
11	this clause referred to as a 'state-
12	ment of reimbursement amount')
13	on payments for claims under
14	this title relating to a potential
15	settlement, judgment, award, or
16	other payment.
17	"(III) USE OF TIMELY WEB
18	DOWNLOAD AS BASIS FOR FINAL CON-
19	DITIONAL AMOUNT.—If an individual
20	(or other claimant or applicable plan
21	with the consent of the individual) ob-
22	tains a statement of reimbursement
23	amount from the website during the
24	protected period as defined in sub-
25	clause (V) and the related settlement,

1	judgment, award or other payment is
2	made during such period, then the
3	last statement of reimbursement
4	amount that is downloaded during
5	such period and within 3 business
6	days before the date of the settlement,
7	judgment, award, or other payment
8	shall constitute the final conditional
9	amount subject to recovery under
10	clause (ii) related to such settlement,
11	judgment, award, or other payment.
12	"(IV) RESOLUTION OF DISCREP-
13	ANCIES.—If the individual (or author-
14	ized representative) believes there is a
15	discrepancy with the statement of re-
16	imbursement amount, the Secretary
17	shall provide a timely process to re-
18	solve the discrepancy. Under such
19	process the individual (or representa-
20	tive) must provide documentation ex-
21	plaining the discrepancy and a pro-
22	posal to resolve such discrepancy.
23	Within 11 business days after the
24	date of receipt of such documentation,
25	the Secretary shall determine whether

1	there is a reasonable basis to include
2	or remove claims on the statement of
3	reimbursement. If the Secretary does
4	not make such determination within
5	the 11 business-day period, then the
6	proposal to resolve the discrepancy
7	shall be accepted. If the Secretary de-
8	termines within such period that there
9	is not a reasonable basis to include or
10	remove claims on the statement of re-
11	imbursement, the proposal shall be re-
12	jected. If the Secretary determines
13	within such period that there is a rea-
14	sonable basis to conclude there is a
15	discrepancy, the Secretary must re-
16	spond in a timely manner by agreeing
17	to the proposal to resolve the discrep-
18	ancy or by providing documentation
19	showing with good cause why the Sec-
20	retary is not agreeing to such pro-
21	posal and establishing an alternate
22	discrepancy resolution. In no case
23	shall the process under this subclause
24	be treated as an appeals process or as
25	establishing a right of appeal for a

1	statement of reimbursement amount
2	and there shall be no administrative
3	or judicial review of the Secretary's
4	determinations under this subclause.
5	"(V) PROTECTED PERIOD.—In
6	subclause (III), the term 'protected
7	period' means, with respect to a set-
8	tlement, judgment, award or other
9	payment relating to an injury or inci-
10	dent, the portion (if any) of the period
11	beginning on the date of notice under
12	subclause (I) with respect to such set-
13	tlement, judgment, award, or other
14	payment that is after the end of a
15	Secretarial response period beginning
16	on the date of such notice to the Sec-
17	retary. Such Secretarial response pe-
18	riod shall be a period of 65 days, ex-
19	cept that such period may be extended
20	by the Secretary for a period of an
21	additional 30 days if the Secretary de-
22	termines that additional time is re-
23	quired to address claims for which
24	payment has been made. Such Secre-
25	tarial response period shall be ex-

1	tended and shall not include any days
2	for any part of which the Secretary
3	determines (in accordance with regu-
4	lations) that there was a failure in the
5	claims and payment posting system
6	and the failure was justified due to
7	exceptional circumstances (as defined
8	in such regulations). Such regulations
9	shall define exceptional circumstances
10	in a manner so that not more than 1
11	percent of the repayment obligations
12	under this subclause would qualify as
13	exceptional circumstances.
14	"(VI) EFFECTIVE DATE.—The
15	Secretary shall promulgate final regu-
16	lations to carry out this clause not
17	later than 9 months after the date of
18	the enactment of this clause.
19	"(VII) Website including suc-
20	CESSOR TECHNOLOGY.—In this
21	clause, the term 'website' includes any
22	successor technology.
23	"(viii) Right of Appeal for sec-
24	ONDARY PAYER DETERMINATIONS RELAT-
25	ING TO LIABILITY INSURANCE (INCLUDING

1	SELF-INSURANCE), NO FAULT INSURANCE,
2	AND WORKERS' COMPENSATION LAWS AND
3	PLANS.—The Secretary shall promulgate
4	regulations establishing a right of appeal
5	and appeals process, with respect to any
6	determination under this subsection for a
7	payment made under this title for an item
8	or service for which the Secretary is seek-
9	ing to recover conditional payments from
10	an applicable plan (as defined in para-
11	graph (8)(F)) that is a primary plan under
12	subsection (A)(ii), under which the applica-
13	ble plan involved, or an attorney, agent, or
14	third party administrator on behalf of such
15	plan, may appeal such determination. The
16	individual furnished such an item or serv-
17	ice shall be notified of the plan's intent to
18	appeal such determination".
19	SEC. 202. FISCAL EFFICIENCY AND REVENUE NEUTRALITY.
20	(a) In General.—Section 1862(b) of the Social Se-
21	curity Act (42 U.S.C. 1395y(b)) is amended—
22	(1) in paragraph (2)(B)(ii), by striking "A pri-
23	mary plan" and inserting "Subject to paragraph (9),
24	a primary plan"; and

1	(2) by adding at the end the following new
2	paragraph:
3	"(9) Exception.—
4	"(A) In general.—Clause (ii) of para-
5	graph (2)(B) and any reporting required by
6	paragraph (8) shall not apply with respect to
7	any settlement, judgment, award, or other pay-
8	ment by an applicable plan arising from liability
9	insurance (including self-insurance) and from
10	alleged physical trauma-based incidents (exclud-
11	ing alleged ingestion, implantation, or exposure
12	cases) constituting a total payment obligation
13	to a claimant of not more than the single
14	threshold amount calculated by the Secretary
15	under subparagraph (B) for the year involved.
16	"(B) Annual computation of thresh-
17	OLD.—
18	"(i) In general.—Not later than
19	November 15 before each year, the Sec-
20	retary shall calculate and publish a single
21	threshold amount for settlements, judg-
22	ments, awards, or other payments for obli-
23	gations arising from liability insurance (in-
24	cluding self-insurance) and for alleged
25	physical trauma-based incidents (excluding

1	alleged ingestion, implantation, or exposure
2	cases) subject to this section for that year.
3	The annual single threshold amount for a
4	year shall be set such that the estimated
5	average amount to be credited to the Medi-
6	care trust funds of collections of condi-
7	tional payments from such settlements,
8	judgments, awards, or other payments
9	arising from liability insurance (including
10	self-insurance) and for such alleged inci-
11	dents subject to this section shall equal the
12	estimated cost of collection incurred by the
13	United States (including payments made
14	to contractors) for a conditional payment
15	arising from liability insurance (including
16	self-insurance) and for such alleged inci-
17	dents subject to this section for the year.
18	At the time of calculating, but before pub-
19	lishing, the single threshold amount for a
20	year, the Secretary shall inform, and seek
21	review of, the Comptroller General of the
22	United States with regard to such amount.
23	"(ii) Publication.— The Secretary
24	shall include, as part of such publication
25	for a year—

1	"(I) the estimated cost of collec-
2	tion incurred by the United States
3	(including payments made to contrac-
4	tors) for a conditional payment aris-
5	ing from liability insurance (including
6	self-insurance) and for such alleged
7	incidents; and
8	"(II) a summary of the method-
9	ology and data used by the Secretary
10	in computing such threshold amount
11	and such cost of collection.
12	"(C) Exclusion of ongoing ex-
13	PENSES.—For purposes of this paragraph and
14	with respect to a settlement, judgment, award,
15	or other payment not otherwise addressed in
16	clause (ii) of paragraph (2)(B) that includes on-
17	going responsibility for medical payments (ex-
18	cluding settlements, judgments, awards, or
19	other payments made by a workers' compensa-
20	tion law or plan or no fault insurance), the
21	amount utilized for calculation of the threshold
22	described in subparagraph (A) shall include
23	only the cumulative value of the medical pay-
24	ments made under this title.

1	"(D) Report to congress.—Not later
2	than November 15 before each year, the Sec-
3	retary shall submit to the Congress a report on
4	the single threshold amount for settlements,
5	judgments, awards, or other payments for con-
6	ditional payment obligations arising from liabil-
7	ity insurance (including self-insurance) and al-
8	leged incidents described in subparagraph (A)
9	for that year and on the establishment and ap-
10	plication of similar thresholds for such pay-
11	ments for conditional payment obligations aris-
12	ing from worker compensation cases and from
13	no fault insurance cases subject to this section
14	for the year. For each such report, the Sec-
15	retary shall—
16	"(i) calculate the threshold amount by
17	using the methodology applicable to certain
18	liability claims described in subparagraph
19	(B); and
20	"(ii) include a summary of the meth-
21	odology and data used in calculating each
22	threshold amount and the amount of esti-
23	mated savings under this title achieved by
24	the Secretary implementing each such
25	threshold.".

1	(b) Effective Date.—The amendments made by
2	subsection (a) shall apply to years beginning with 2014.
3	SEC. 203. REPORTING REQUIREMENT.
4	Section 1862(b)(8) of the Social Security Act (42
5	U.S.C. 1395y(b)(8)) is amended—
6	(1) in the first sentence of subparagraph (E)(i),
7	by striking "shall be subject" and all that follows
8	through the end of the sentence and inserting the
9	following: "may be subject to a civil money penalty
10	of up to \$1,000 for each day of noncompliance with
11	respect to each claimant."; and
12	(2) by adding at the end the following new sub-
13	paragraph:
14	"(I) REGULATIONS.—Not later than 60
15	days after the date of the enactment of this
16	subparagraph, the Secretary shall publish a no-
17	tice in the Federal Register soliciting proposals,
18	which will be accepted during a 60-day period,
19	for the specification of practices for which sanc-
20	tions will and will not be imposed under sub-
21	paragraph (E), including not imposing sanc-
22	tions for good faith efforts to identify a bene-
23	ficiary pursuant to this paragraph under an ap-
24	plicable entity responsible for reporting infor-
25	mation. After considering the proposals so sub-

1	mitted, the Secretary, in consultation with the
2	Attorney General, shall publish in the Federal
3	Register, including a 60-day period for com-
4	ment, proposed specified practices for which
5	such sanctions will and will not be imposed.
6	After considering any public comments received
7	during such period, the Secretary shall issue
8	final rules specifying such practices.".
9	SEC. 204. USE OF SOCIAL SECURITY NUMBERS AND OTHER
10	IDENTIFYING INFORMATION IN REPORTING.
11	Section 1862(b)(8)(B) of the Social Security Act (42
12	U.S.C. 1395y(b)(8)(B)) is amended by adding at the end
13	(after and below clause (ii)) the following:
14	"Not later than 18 months after the date of en-
15	actment of this sentence, the Secretary shall
16	modify the reporting requirements under this
17	paragraph so that an applicable plan in com-
18	plying with such requirements is permitted but
19	not required to access or report to the Sec-
20	retary beneficiary social security account num-
21	bers or health identification claim numbers, ex-
22	cept that the deadline for such modification
23	shall be extended by one or more periods (speci-
24	fied by the Secretary) of up to 1 year each if
25	the Secretary notifies the committees of juris-

1 diction of the House of Representatives and of 2 the Senate that the prior deadline for such 3 modification, without such extension, threatens 4 patient privacy or the integrity of the secondary 5 payer program under this subsection. Any such 6 deadline extension notice shall include informa-7 tion on the progress being made in imple-8 menting such modification and the anticipated 9 implementation date for such modification.".

## 10 SEC. 205. STATUTE OF LIMITATIONS.

- 11 (a) IN GENERAL.—Section 1862(b)(2)(B)(iii) of the
- 12 Social Security Act (42 U.S.C. 1395y(b)(2)(B)(iii)) is
- 13 amended by adding at the end the following new sentence:
- 14 "An action may not be brought by the United States
- 15 under this clause with respect to payment owed unless the
- 16 complaint is filed not later than 3 years after the date
- 17 of the receipt of notice of a settlement, judgment, award,
- 18 or other payment made pursuant to paragraph (8) relating
- 19 to such payment owed.".
- 20 (b) Effective Date.—The amendment made by
- 21 subsection (a) shall apply with respect to actions brought
- 22 and penalties sought on or after 6 months after the date
- 23 of the enactment of this Act.

Amend the title so as to read: "A bill to provide a demonstration project providing Medicare coverage for inhome administration of intravenous immune globulin (IVIG) and to amend title XVIII of the Social Security Act with respect to the application of Medicare secondary payer rules for certain claims.".