



1 rity Act (42 U.S.C. 1395w–27(h)) is amended by adding  
2 at the end the following new paragraph:

3           “(3) DELAY IN CONTRACT TERMINATION AU-  
4 THORITY FOR PLANS FAILING TO ACHIEVE MINIMUM  
5 QUALITY RATING.—The Secretary may not termi-  
6 nate a contract under this section with respect to  
7 the offering of an MA plan by a Medicare Advantage  
8 organization solely because the MA plan has failed  
9 to achieve a minimum quality rating under the 5-  
10 star rating system used for purposes of section  
11 1853(o) during the period beginning on the date of  
12 the enactment of this paragraph and through the  
13 end of plan year 2019.”.

14 **SEC. 5. REQUIREMENT FOR ENROLLMENT DATA REPORT-**  
15 **ING FOR MEDICARE.**

16           Section 1874 of the Social Security Act (42 U.S.C.  
17 1395kk) is amended by adding at the end the following  
18 new subsection:

19           “(g) REQUIREMENT FOR ENROLLMENT DATA RE-  
20 PORTING.—

21           “(1) IN GENERAL.—Not later than May 1 of  
22 each year (beginning with 2016), the Secretary shall  
23 submit to the Committees on Ways and Means and  
24 Energy and Commerce of the House of Representa-  
25 tives and the Committee on Finance of the Senate

1 a report on enrollment data (and, in the case of part  
2 A, on data on individuals receiving benefits under  
3 such part) for the plan year or, in the case of part  
4 A and part B, for the fiscal year or year (as applica-  
5 ble) ending before January 1 of such plan year, fis-  
6 cal year, or year. Such enrollment data shall be pre-  
7 sented—

8 “(A) by zip code, congressional district,  
9 and State;

10 “(B) in a manner that provides for such  
11 data based on enrollment (including receipt of  
12 benefits other than through enrollment) under  
13 part A, enrollment under part B, enrollment  
14 under an MA plan under part C, and enroll-  
15 ment under part D; and

16 “(C) in the case of enrollment data de-  
17 scribed in subparagraph (B) relating to MA  
18 plans, presented in a manner that provides for  
19 such data for each MA–PD plan and for each  
20 MA plan that is not an MA–PD plan.

21 “(2) DELAY OF DEADLINE.—If the Secretary is  
22 unable to submit a report under paragraph (1) by  
23 May 1 of a year for data of the plan year, fiscal  
24 year, or year (as applicable) ending before January  
25 1 of such year, the Secretary shall, not later than

1 April 30 of such year, notify the committees de-  
2 scribed in such paragraph of—

3 “(A) such inability, including an expla-  
4 nation for such inability; and

5 “(B) the date by which the Secretary will  
6 provide such report, which shall be not later  
7 than June 1 of such year.”.

8 **SEC. 6. NON-APPLICATION OF MEDICARE FEE SCHEDULE**  
9 **ADJUSTMENTS FOR WHEELCHAIR ACCES-**  
10 **SORIES AND SEAT AND BACK CUSHIONS**  
11 **WHEN FURNISHED IN CONNECTION WITH**  
12 **COMPLEX REHABILITATIVE POWER WHEEL-**  
13 **CHAIRS.**

14 (a) NON-APPLICATION.—

15 (1) IN GENERAL.—Notwithstanding any other  
16 provision of law, the Secretary of Health and  
17 Human Services shall not, prior to January 1, 2017,  
18 use information on the payment determined under  
19 the competitive acquisition programs under section  
20 1847 of the Social Security Act (42 U.S.C. 1395w–  
21 3)) to adjust the payment amount that would other-  
22 wise be recognized under section 1834(a)(1)(B)(ii)  
23 of such Act (42 U.S.C. 1395m(a)(1)(B)(ii)) for  
24 wheelchair accessories (including seating systems)  
25 and seat and back cushions when furnished in con-

1           nection with Group 3 complex rehabilitative power  
2           wheelchairs.

3           (2) IMPLEMENTATION.—Notwithstanding any  
4           other provision of law, the Secretary may implement  
5           this subsection by program instruction or otherwise.

6           (b) GAO STUDY AND REPORT.—

7           (1) STUDY.—

8           (A) IN GENERAL.—The Comptroller Gen-  
9           eral of the United States shall conduct a study  
10           on wheelchair accessories (including seating sys-  
11           tems) and seat and back cushions furnished in  
12           connection with Group 3 complex rehabilitative  
13           power wheelchairs. Such study shall include an  
14           analysis of the following with respect to such  
15           wheelchair accessories and seat and back cush-  
16           ions in each of the groups described in clauses  
17           (i) through (iii) of subparagraph (B):

18           (i) The item descriptions and associ-  
19           ated HCPCS codes for such wheelchair ac-  
20           cessories and seat and back cushions.

21           (ii) A breakdown of utilization and ex-  
22           penditures for such wheelchair accessories  
23           and seat and back cushions under title  
24           XVIII of the Social Security Act.

1 (iii) A comparison of the payment  
2 amount under the competitive acquisition  
3 program under section 1847 of such Act  
4 (42 U.S.C. 1395w-3) with the payment  
5 amount that would otherwise be recognized  
6 under section 1834 of such Act (42 U.S.C.  
7 1395m), including beneficiary cost sharing,  
8 for such wheelchair accessories and seat  
9 and back cushions.

10 (iv) The aggregate distribution of  
11 such wheelchair accessories and seat and  
12 back cushions furnished under such title  
13 XVIII within each of the groups described  
14 in subparagraph (B).

15 (v) Other areas determined appro-  
16 priate by the Comptroller General.

17 (B) GROUPS DESCRIBED.—The following  
18 groups are described in this subparagraph:

19 (i) Wheelchair accessories and seat  
20 and back cushions furnished predominantly  
21 with Group 3 complex rehabilitative power  
22 wheelchairs.

23 (ii) Wheelchair accessories and seat  
24 and back cushions furnished predominantly

1 with power wheelchairs that are not de-  
2 scribed in clause (i).

3 (iii) Other wheelchair accessories and  
4 seat and back cushions furnished with ei-  
5 ther power wheelchairs described in clause  
6 (i) or (ii).

7 (2) REPORT.—Not later than June 1, 2016, the  
8 Comptroller General of the United States shall sub-  
9 mit to Congress a report containing the results of  
10 the study conducted under paragraph (1), together  
11 with recommendations for such legislation and ad-  
12 ministrative as the Comptroller General determines  
13 to be appropriate.

14 **SEC. 7. AUTHORIZING A BLANKET MEANINGFUL USE SIG-**  
15 **NIFICANT HARDSHIP EXCEPTION.**

16 (a) PHYSICIANS' SERVICES.—Section 1848(a)(7)(B)  
17 of the Social Security Act (42 U.S.C. 1395w-4(a)(7)(B))  
18 is amended by inserting “(or through a blanket exception  
19 with respect to the payment adjustment for 2017, but only  
20 if a request for such exception is filed no later than April  
21 1, 2016)” after “on a case-by-case basis”.

22 (b) HOSPITAL SERVICES.—Section  
23 1886(b)(3)(B)(ix)(II) of the Social Security Act (42  
24 U.S.C. 1395ww(b)(3)(B)(ix)(II)) is amended by inserting  
25 “(or through a blanket exception with respect to the pay-

1 ment adjustment for fiscal year 2017, but only if a request  
2 for such exception is filed no later than April 1, 2016)”  
3 after “on a case-by-case basis”.

4 (c) IMPLEMENTATION AUTHORITY.—The Secretary  
5 of Health and Human Services may implement the amend-  
6 ments made by this section by interim final rule with com-  
7 ment period.

8 **SEC. 8. TRANSITIONAL PAYMENT RULES FOR CERTAIN RA-**  
9 **DATION THERAPY SERVICES UNDER THE**  
10 **MEDICARE PHYSICIAN FEE SCHEDULE.**

11 (a) IN GENERAL.—Section 1848 of the Social Secu-  
12 rity Act (42 U.S.C. 1395w-4) is amended—

13 (1) in subsection (b), by adding at the end the  
14 following new paragraph:

15 “(9) SPECIAL RULE FOR CERTAIN RADIATION  
16 THERAPY SERVICES.—The code definitions, the work  
17 relative value units under subsection (c)(2)(C)(i),  
18 and the direct inputs for the practice expense rel-  
19 ative value units under subsection (c)(2)(C)(ii) for  
20 radiation treatment delivery and related imaging  
21 services (identified in 2016 by HCPCS G-codes  
22 G6001 through G6015) for the fee schedule estab-  
23 lished under this subsection for services furnished in  
24 2017 and 2018 shall be the same as such defini-  
25 tions, units, and inputs for such services for the fee



1 schedule established for services furnished in 2016.”;  
2 and

3 (2) in subsection (c)(2)(K), by adding at the  
4 end the following new clause:

5 “(iv) TREATMENT OF CERTAIN RADI-  
6 ATION THERAPY SERVICES.—Radiation  
7 treatment delivery and related imaging  
8 services identified under subsection (b)(9)  
9 shall not be considered as potentially  
10 misvalued services for purposes of this sub-  
11 paragraph and subparagraph (O) for 2017  
12 and 2018.”.

13 (b) REPORT TO CONGRESS ON ALTERNATIVE PAY-  
14 MENT MODEL.—Not later than 18 months after the date  
15 of the enactment of this Act, the Secretary of Health and  
16 Human Services shall submit to Congress a report on the  
17 development of an episodic alternative payment model for  
18 payment under the Medicare program under title XVIII  
19 of the Social Security Act for radiation therapy services  
20 furnished in nonfacility settings.

21 **SEC. 9. DEPOSIT INTO MEDICARE IMPROVEMENT FUND.**

22 Section 1898(b)(1) of the Social Security Act (42  
23 U.S.C. 1395iii(b)(1)) is amended by striking  
24 “\$205,000,000” and inserting “\$208,000,000”.

