

AMENDMENT TO S. 1347
OFFERED BY M____.

Add at the end the following:

1 **SEC. 4. DELAY IN AUTHORITY TO TERMINATE CONTRACTS**
2 **FOR MEDICARE ADVANTAGE PLANS FAILING**
3 **TO ACHIEVE MINIMUM QUALITY RATINGS.**

4 (a) FINDINGS.—Consistent with the studies provided
5 under the IMPACT Act of 2014 (Public Law 113–185),
6 it is the intent of Congress—

7 (1) to continue to study and request input on
8 the effects of socioeconomic status and dual-eligible
9 populations on the Medicare Advantage STARS rat-
10 ing system before reforming such system with the
11 input of stakeholders; and

12 (2) pending the results of such studies and
13 input, to provide for a temporary delay in authority
14 of the Centers for Medicare & Medicaid Services
15 (CMS) to terminate Medicare Advantage plan con-
16 tracts solely on the basis of performance of plans
17 under the STARS rating system.

18 (b) DELAY IN MA CONTRACT TERMINATION AU-
19 THORITY FOR PLANS FAILING TO ACHIEVE MINIMUM
20 QUALITY RATINGS.—Section 1857(h) of the Social Secu-

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 established under section 1853(o)
11 during the period beginning on the date of the en-
12 actment of this paragraph and through the end of
13 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 **DIATION 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”.

