Suspend the Rules and Pass the Bill, HR. 6042, with An Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

^{115TH CONGRESS} 2D SESSION H.R.6042

To amend title XIX of the Social Security Act to delay the reduction in Federal medical assistance percentage for Medicaid personal care services furnished without an electronic visit verification system, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 7, 2018

Mr. GUTHRIE introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

- To amend title XIX of the Social Security Act to delay the reduction in Federal medical assistance percentage for Medicaid personal care services furnished without an electronic visit verification system, and for other purposes.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,

1	SECTION 1. DELAY IN REDUCTION OF FMAP FOR MEDICAID
2	PERSONAL CARE SERVICES FURNISHED
3	WITHOUT AN ELECTRONIC VISIT
4	VERIFICATION SYSTEM.
5	(a) IN GENERAL.—Section 1903(l) of the Social Se-
6	curity Act (42 U.S.C. 1396b(l)) is amended—
7	(1) in paragraph (1) —
8	(A) by striking "January 1, 2019" and in-
9	serting "January 1, 2020"; and
10	(B) in subparagraph (A)(i), by striking
11	"2019 and"; and
12	(2) in paragraph (4)(A)(i), by striking "cal-
13	endar quarters in 2019" and inserting "calendar
14	quarters in 2020".
15	(b) Sense of Congress on Stakeholder Input
16	REGARDING ELECTRONIC VISIT VERIFICATION SYS-
17	TEMS.—It is the sense of Congress that—
18	(1) the Centers for Medicare & Medicaid Serv-
19	ices should—
20	(A) convene at least one public meeting in
21	2018 for the purpose of soliciting ongoing feed-
22	back from Medicaid stakeholders on guidance
23	issued by the Centers for Medicare & Medicaid
24	Services on May 16, 2018, regarding electronic
25	visit verification; and

3

(B) communicate with such stakeholders
 regularly and throughout the implementation
 process in a clear and transparent manner to
 monitor beneficiary protections;

5 (2) such stakeholders should include State Med-6 icaid directors, beneficiaries, family caregivers, indi-7 viduals and entities who provide personal care serv-8 ices or home health care services, Medicaid managed 9 care organizations, electronic visit verification ven-10 dors, and other stakeholders, as determined by the 11 Centers for Medicare & Medicaid Services; and

(3) taking into account stakeholder input on the
implementation of the electronic visit verification requirement under the Medicaid program is vital in
order to ensure that the Centers for Medicare &
Medicaid Services is aware and able to mitigate any
adverse outcomes with the implementation of this
policy.