

## COMMITTEE PRINT

[SHOWING THE TEXT OF H.R. 3821 AS FORWARDED BY THE SUBCOMMITTEE  
ON HEALTH ON NOVEMBER 4, 2015]

114TH CONGRESS  
1ST SESSION

# H. R. 3821

To amend title XIX of the Social Security Act to require the publication of a provider directory in the case of States providing for medical assistance on a fee-for-service basis or through a primary care case-management system, and for other purposes.

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### IN THE HOUSE OF REPRESENTATIVES

Mr. COLLINS of New York (for himself and Mr. TONKO) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend title XIX of the Social Security Act to require the publication of a provider directory in the case of States providing for medical assistance on a fee-for-service basis or through a primary care case-management 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,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Medicaid Directory of  
5 Caregivers Act” or the “Medicaid DOC Act”.

1 **SEC. 2. REQUIRING PUBLICATION OF FEE-FOR-SERVICE**  
2 **PROVIDER DIRECTORY.**

3 (a) IN GENERAL.—Section 1902(a) of the Social Se-  
4 curity Act (42 U.S.C. 1396a(a)) is amended by inserting  
5 after paragraph (77) the following new paragraph:

6 “(78) provide that, not later than 180 days  
7 after the date of the enactment of this paragraph,  
8 in the case of a State plan that provides medical as-  
9 sistance on a fee-for-service basis or through a pri-  
10 mary care case-management system described in sec-  
11 tion 1915(b)(1) (other than a primary care case  
12 management entity (as defined by the Secretary)),  
13 the State shall publish (and update on at least an  
14 annual basis) on the public Website of the State  
15 agency administering the State plan, a directory of  
16 the providers (including, at a minimum, primary and  
17 specialty care physicians) described in subsection (II)  
18 that includes—

19 “(A) with respect to each such provider—

20 “(i) the name of the provider;

21 “(ii) the specialty of the provider;

22 “(iii) the address of the provider; and

23 “(iv) the telephone number of the pro-  
24 vider; and

1           “(B) with respect to any such provider  
2 participating in such a primary care case-man-  
3 agement system, information regarding—

4                   “(i) whether the provider is accepting  
5 as new patients individuals who receive  
6 medical assistance under this title; and

7                   “(ii) the provider’s cultural and lin-  
8 guistic capabilities, including the languages  
9 spoken by the provider or by the skilled  
10 medical interpreter providing interpreta-  
11 tion services at the provider’s office.”.

12       (b) **DIRECTORY PROVIDERS DESCRIBED.**—Section  
13 1902 of the Social Security Act (42 U.S.C. 1396a) is  
14 amended by adding at the end the following new sub-  
15 section:

16       “(ll) **DIRECTORY PROVIDERS DESCRIBED.**—A pro-  
17 vider described in this subsection is—

18                   “(1) in the case of a provider of a provider type  
19 for which the State agency, as a condition on receiv-  
20 ing payment for items and services furnished by the  
21 provider to individuals eligible to receive medical as-  
22 sistance under the State plan, requires the enroll-  
23 ment of the provider with the State agency, a pro-  
24 vider that—

1           “(A) is enrolled with the agency as of the  
2           date on which the directory is published under  
3           subsection (a)(78); and

4           “(B) received payment under the State  
5           plan in the 12-month period preceding such  
6           date; and

7           “(2) in the case of a provider of a provider type  
8           for which the State agency does not require such en-  
9           rollment, a provider that received payment under the  
10          State plan in the 12-month period preceding the  
11          date on which the directory is published under sub-  
12          section (a)(78).”.

13          (c) RULE OF CONSTRUCTION.—

14           (1) IN GENERAL.—The amendment made by  
15           subsection (a) shall not be construed to apply in the  
16           case of a State in which all the individuals enrolled  
17           in the State plan under title XIX of the Social Secu-  
18           rity Act (or under a waiver of such plan), other than  
19           individuals described in paragraph (2), are enrolled  
20           with a medicaid managed care organization (as de-  
21           fined in section 1903(m)(1)(A) of such Act (42  
22           U.S.C. 1396b(m)(1)(A))), including prepaid inpa-  
23           tient health plans and prepaid ambulatory health  
24           plans (as defined by the Secretary).

1           (2) INDIVIDUALS DESCRIBED.—An individual  
2           described in this paragraph is an individual who is  
3           an Indian (as defined in section 4 of the Indian  
4           Health Care Improvement Act (25 U.S.C. 1603)) or  
5           an Alaska Native.

6           (d) EXCEPTION FOR STATE LEGISLATION.—In the  
7           case of a State plan under title XIX of the Social Security  
8           Act (42 U.S.C. 1396 et seq.), which the Secretary deter-  
9           mines requires State legislation in order for the respective  
10          plan to meet one or more additional requirements imposed  
11          by amendments made by this section, the respective plan  
12          shall not be regarded as failing to comply with the require-  
13          ments of such title solely on the basis of its failure to meet  
14          such an additional requirement before the first day of the  
15          first calendar quarter beginning after the close of the first  
16          regular session of the State legislature that begins after  
17          the date of enactment of this section. For purposes of the  
18          previous sentence, in the case of a State that has a 2-  
19          year legislative session, each year of the session shall be  
20          considered to be a separate regular session of the State  
21          legislature.