

**AMENDMENT**

**OFFERED BY M**\_\_\_\_.

Add at the end the following:

1 **SEC. \_\_\_\_.** **RENEWAL OF APPLICATION OF MEDICARE PAY-**  
2 **MENT RATE FLOOR TO PRIMARY CARE SERV-**  
3 **ICES FURNISHED UNDER MEDICAID AND IN-**  
4 **CLUSION OF ADDITIONAL PROVIDERS.**

5 (a) RENEWAL OF PAYMENT FLOOR; ADDITIONAL  
6 PROVIDERS.—

7 (1) IN GENERAL.—Section 1902(a)(13) of the  
8 Social Security Act (42 U.S.C. 1396a(a)(13)) is  
9 amended by striking subparagraph (C) and inserting  
10 the following:

11 “(C) payment for primary care services (as  
12 defined in subsection (jj)) at a rate that is not  
13 less than 100 percent of the payment rate that  
14 applies to such services and physician under  
15 part B of title XVIII (or, if greater, the pay-  
16 ment rate that would be applicable under such  
17 part if the conversion factor under section  
18 1848(d) for the year involved were the conver-  
19 sion factor under such section for 2009), and  
20 that is not less than the rate that would other-

1           wise apply to such services under this title if  
2           the rate were determined without regard to this  
3           subparagraph, and that are—

4                   “(i) furnished in 2013 and 2014, by a  
5                   physician with a primary specialty designa-  
6                   tion of family medicine, general internal  
7                   medicine, or pediatric medicine; or

8                   “(ii) furnished during the period be-  
9                   ginning on the first day of the first month  
10                  beginning after the date of the enactment  
11                  of the Kids’ Access to Primary Care Act of  
12                  2025—

13                   “(I) by a physician with a pri-  
14                   mary specialty designation of family  
15                   medicine, general internal medicine,  
16                   pediatric medicine, or obstetrics and  
17                   gynecology, but only if the physician  
18                   self-attests that the physician is  
19                   board-certified in family medicine,  
20                   general internal medicine, pediatric  
21                   medicine, or obstetrics and gyne-  
22                   cology, respectively;

23                   “(II) by a physician with a pri-  
24                   mary specialty designation of a family  
25                   medicine subspecialty, an internal

1 medicine subspecialty, a pediatric sub-  
2 specialty, or a subspecialty of obstet-  
3 rics and gynecology, without regard to  
4 the board that offers the designation  
5 for such a subspecialty, but only if the  
6 physician self-attests that the physi-  
7 cian is board-certified in such a sub-  
8 specialty;

9 “(III) by an advanced practice  
10 clinician, as defined by the Secretary,  
11 that works under the supervision of—

12 “(aa) a physician described  
13 in subclause (I) or (II); or

14 “(bb) a nurse practitioner or  
15 a physician assistant (as such  
16 terms are defined in section  
17 1861(aa)(5)(A)) who is working  
18 in accordance with State law, or  
19 a certified nurse-midwife (as de-  
20 fined in section 1861(gg)(2)) who  
21 is working in accordance with  
22 State law;

23 “(IV) by a rural health clinic,  
24 Federally-qualified health center, or  
25 other health clinic that receives reim-

1 bursement on a fee schedule applica-  
2 ble to a physician described in sub-  
3 clause (I) or (II), an advanced prac-  
4 tice clinician described in subclause  
5 (III), or a nurse practitioner, physi-  
6 cian assistant, or certified nurse-mid-  
7 wife described in subclause (III)(bb),  
8 for services furnished by—

9 “(aa) such a physician,  
10 nurse practitioner, physician as-  
11 sistant, or certified nurse-mid-  
12 wife, respectively; or

13 “(bb) an advanced practice  
14 clinician supervised by such a  
15 physician, nurse practitioner,  
16 physician assistant, or certified  
17 nurse-midwife; or

18 “(V) by a nurse practitioner or a  
19 physician assistant (as such terms are  
20 defined in section 1861(aa)(5)(A))  
21 who is working in accordance with  
22 State law, or a certified nurse-midwife  
23 described in subclause (III)(bb) who is  
24 working in accordance with State law,  
25 in accordance with procedures that

1 ensure that the portion of the pay-  
2 ment for such services that the nurse  
3 practitioner, physician assistant, or  
4 certified nurse-midwife is paid is not  
5 less than the amount that the nurse  
6 practitioner, physician assistant, or  
7 certified nurse-midwife would be paid  
8 if the services were provided under  
9 part B of title XVIII;”.

10 (2) CONFORMING AMENDMENTS.—Section  
11 1905(dd) of the Social Security Act (42 U.S.C.  
12 1396d(dd)) is amended—

13 (A) by striking “Notwithstanding” and in-  
14 serting the following:

15 “(1) IN GENERAL.—Notwithstanding”;

16 (B) by inserting “or furnished during the  
17 additional period specified in paragraph (2),”  
18 after “2015,”; and

19 (C) by adding at the end the following:

20 “(2) ADDITIONAL PERIOD.—For purposes of  
21 paragraph (1), the additional period specified in this  
22 paragraph is the period beginning on the first day  
23 of the first month beginning after the date of the en-  
24 actment of the Kids’ Access to Primary Care Act of  
25 2025.”.

1 (b) IMPROVED TARGETING OF PRIMARY CARE.—

2 (1) IN GENERAL.—Section 1902(jj) of the So-  
3 cial Security Act (42 U.S.C. 1396a(jj)) is amend-  
4 ed—

5 (A) by redesignating paragraphs (1) and  
6 (2) as subparagraphs (A) and (B), respectively,  
7 and moving the margin of each such subpara-  
8 graph, as so redesignated, 2 ems to the right;

9 (B) by striking “For purposes of” and in-  
10 serting the following:

11 “(1) IN GENERAL.—For purposes of”; and

12 (C) by adding at the end the following:

13 “(2) EXCLUSIONS.—Such term does not include  
14 any services described in subparagraph (A) or (B) of  
15 paragraph (1) if such services are provided in an  
16 emergency department of a hospital.”.

17 (2) EFFECTIVE DATE.—The amendments made  
18 by paragraph (1) shall apply with respect to primary  
19 care services provided on or after the first day of the  
20 period described in subparagraph (C)(ii) of section  
21 1902(a)(13) of the Social Security Act (42 U.S.C.  
22 1396a(a)(13)), as amended by section 2.

23 (c) ENSURING PAYMENT BY MANAGED CARE ENTI-  
24 TIES.—

1           (1) IN GENERAL.—Section 1903(m)(2)(A) of  
2           the Social Security Act (42 U.S.C. 1396b(m)(2)(A))  
3           is amended—

4                   (A) in clause (xii), by striking “and” after  
5           the semicolon;

6                   (B) in clause (xiii)—

7                           (i) by moving the margin of such  
8           clause 2 ems to the left; and

9                           (ii) by striking the period at the end  
10          and inserting “; and”; and

11                   (C) by inserting after clause (xiii) the fol-  
12          lowing:

13                   “(xiv) such contract provides that (I) payments  
14          to health care providers specified in section  
15          1902(a)(13)(C) for furnishing primary care services  
16          defined in section 1902(jj) during a year or period  
17          specified in section 1902(a)(13)(C) are at least equal  
18          to the amounts set forth and required by the Sec-  
19          retary by regulation, (II) the entity shall, upon re-  
20          quest, provide documentation to the State that is  
21          sufficient to enable the State and the Secretary to  
22          ensure compliance with subclause (I), and (III) the  
23          Secretary shall approve payments described in sub-  
24          clause (I) that are furnished through an agreed-  
25          upon capitation, partial capitation, or other value-

1 based payment arrangement if the agreed-upon capi-  
2 tation, partial capitation, or other value-based pay-  
3 ment arrangement is based on a reasonable method-  
4 ology and the entity provides documentation to the  
5 State that is sufficient to enable the State and the  
6 Secretary to ensure compliance with subclause (I).”.

7 (2) CONFORMING AMENDMENT.—Section  
8 1932(f) of the Social Security Act (42 U.S.C.  
9 1396u–2(f)) is amended by inserting “and clause  
10 (xiv) of section 1903(m)(2)(A)” before the period.

11 (3) EFFECTIVE DATE.—The amendments made  
12 by this subsection shall apply with respect to con-  
13 tracts entered into on or after the date of the enact-  
14 ment of this Act.

15 **SEC. \_\_\_\_ . STUDY.**

16 (a) IN GENERAL.—Not later than the date that is  
17 one year and one month after the date of the enactment  
18 of this Act, the Secretary of Health and Human Services  
19 shall conduct a study—

20 (1) comparing the number of children enrolled  
21 in a State plan under title XIX of the Social Secu-  
22 rity Act (42 U.S.C. 1396 et seq.) (or a waiver of  
23 such plan) during the 12-month period preceding the  
24 first day of the period described in subparagraph  
25 (C)(ii) of section 1902(a)(13) of such Act (42



1 U.S.C. 1396a(a)(13)), as amended by section 2, to  
2 the number of children so enrolled during the 12-  
3 month period beginning on such first day;

4 (2) comparing the number of health care pro-  
5 viders receiving payments for primary care services  
6 under the Medicaid program under such title during  
7 the 12-month period preceding the first day of the  
8 period described in subparagraph (C)(ii) of section  
9 1902(a)(13) of such Act (42 U.S.C. 1396a(a)(13)),  
10 as amended by section 2, to the number of health  
11 care providers receiving such payments during the  
12 12-month period beginning on such first day; and

13 (3) comparing health care provider payment  
14 rates for primary care services under the Medicaid  
15 program under such title during the 12-month pe-  
16 riod beginning on the first day of the period de-  
17 scribed in subparagraph (C)(ii) of section  
18 1902(a)(13) of such Act (42 U.S.C. 1396a(a)(13)),  
19 as amended by section 2, across States, using the in-  
20 dexes described in subsection (b).

21 (b) INDEXES DESCRIBED.—The indexes described in  
22 this subsection are each of the following:

23 (1) A Medicaid fee index, comparing each  
24 State's average fee for primary care services under

1 the Medicaid program under such title to the na-  
2 tional average for such services.

3 (2) A Medicaid-to-Medicare fee index, com-  
4 paring each State's average fee for primary care  
5 services under the Medicaid program under such  
6 title to the fee for such services under the Medicare  
7 program under title XVIII of such Act (42 U.S.C.  
8 1395 et seq.).

9 (3) A Medicaid fee change index, comparing  
10 fees for primary care services under the Medicaid  
11 program under such title during the 12-month pe-  
12 riod preceding the first day of the period described  
13 in subparagraph (C)(ii) of section 1902(a)(13) of  
14 such Act (42 U.S.C. 1396a(a)(13)), as amended by  
15 section 2, to the fees for such services during the  
16 12-month period beginning on such first day.

17 (c) AUTHORIZATION OF APPROPRIATIONS.—For pur-  
18 poses of this section, there is authorized to be appro-  
19 priated \$200,000 for fiscal year 2026, to be available until  
20 expended.

