

118TH CONGRESS  
1ST SESSION

# H. R. 3674

To amend title XVIII of the Social Security Act to increase the nonfacility practice expense relative value units for specified services furnished under the Medicare program.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 25, 2023

Mr. BILIRAKIS (for himself, Mr. CÁRDENAS, Mr. MURPHY, and Mr. DAVIS of Illinois) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to increase the nonfacility practice expense relative value units for specified services furnished under the Medicare program.

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 “Providing Relief and  
5 Stability for Medicare Patients Act of 2023”.

1 **SEC. 2. INCREASING THE NONFACILITY PRACTICE EX-**  
2 **PENSE RELATIVE VALUE UNITS FOR SPECI-**  
3 **FIED SERVICES FURNISHED UNDER THE**  
4 **MEDICARE PROGRAM.**

5 (a) IN GENERAL.—Section 1848(c)(2) of the Social  
6 Security Act (42 U.S.C. 1395w–4(c)(2)) is amended by  
7 adding at the end the following subparagraph:

8 “(P) INCREASE OF NONFACILITY PRACTICE  
9 EXPENSE RELATIVE VALUE UNITS FOR SPECI-  
10 FIED SERVICES.—

11 “(i) IN GENERAL.—The Secretary  
12 shall increase the nonfacility practice ex-  
13 pense relative value units applied to a  
14 specified service (as defined in clause (ii))  
15 furnished in—

16 “(I) 2024, by 10 percent of the  
17 number of nonfacility practice expense  
18 relative value units that would other-  
19 wise apply to such service furnished in  
20 such year without application of this  
21 clause; and

22 “(II) 2025, by 15 percent of the  
23 number of nonfacility practice expense  
24 relative value units that would other-  
25 wise apply to such service furnished in

1           such year without application of this  
2           clause.

3           “(ii) SPECIFIED SERVICE DEFINED.—

4           For purposes of this subparagraph, the  
5           term ‘specified service’ means, with respect  
6           to a service furnished in a year, a service  
7           with a nonfacility practice expense relative  
8           value unit that was calculated for such  
9           year (without application of this subpara-  
10          graph) based on 65 percent or more of the  
11          service’s direct practice expense cost being  
12          attributed to equipment and supply costs.

13          “(iii) FUNDING.—There shall be  
14          transferred from the General Fund of the  
15          Treasury to the Federal Supplementary  
16          Medical Insurance Trust Fund under sec-  
17          tion 1841 such sums as the Secretary de-  
18          termines are necessary for purposes of in-  
19          creasing payment amounts pursuant to  
20          this subparagraph, to remain available  
21          until expended.”.

22          (b) NONAPPLICATION OF BUDGET NEUTRALITY.—

23          Section 1848(c)(2)(B)(iv) of the Social Security Act (42  
24          U.S.C. 1395w-4(c)(2)(B)(iv)) is amended—

1           (1) in subclause (IV), by striking “; and” and  
2 inserting a semicolon;

3           (2) in subclause (V), by striking the period at  
4 the end and inserting “; and”; and

5           (3) by adding at the end the following new sub-  
6 clause:

7   “(VI) subparagraph (P) shall not  
8   be taken into account in applying  
9   clause (ii)(II).”.

10          (c) REPORT.—Not later than 1 year after the date  
11 of the enactment of this Act, the Comptroller General of  
12 the United States shall submit to Congress a report on  
13 the Medicare physician fee schedule and patient access,  
14 including—

15           (1) an analysis of the number of health care  
16 providers furnishing specified services (as defined in  
17 section 1848(c)(2)(P) of the Social Security Act, as  
18 added by subsection (a)) in a nonfacility setting  
19 under the Medicare program over the 20 year period  
20 ending on such date of enactment, including a de-  
21 scription of any changes in volume of such services  
22 furnished under such program and the availability of  
23 such services under such program and a description  
24 of wait-times, decreased hours, other factors that

1       could impede a patient’s access to such services  
2       (such as increased cost sharing);

3               (2) an analysis of any change in the proportion  
4       of services payable under such schedule furnished in  
5       nonfacility settings compared to the proportion of  
6       such services furnished at other sites of service over  
7       such period, including an analysis of the impact of  
8       any such change on health system consolidation, un-  
9       derserved and rural populations, quality of care of  
10      Medicare beneficiaries, and increased cost to the  
11      Medicare program;

12              (3) an analysis of whether significant annual  
13      changes in provider reimbursement are a cause of  
14      any change described in paragraph (2), disruptions  
15      in patient access to services, and increased cost  
16      sharing; and

17              (4) taking into account the analyses described  
18      in paragraphs (1) through (3), recommendations for  
19      improving Medicare patient access to specified serv-  
20      ices (as defined in section 1848(c)(2)(P) of the So-  
21      cial Security Act, as added by subsection (a)) and  
22      minimizing health system consolidation.

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