H. R. ____

To prevent across-the-board direct spending cuts, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. Yarmuth (for himself, Mr. Neal, Mr. Pallone, and Mr. David Scott of Georgia) introduced the following bill; which was referred to the Committee on ____________

A BILL

To prevent across-the-board direct spending cuts, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. PREVENTING PAYGO SEQUESTRATION.

(a) Statutory PAYGO Scorecards.—The budgetary effects of this Act and the American Rescue Plan Act of 2021 (Public Law 117–2) shall not be counted on either PAYGO scorecard maintained pursuant to section 4(d) of the Statutory Pay-As-You-Go Act of 2010 (2 U.S.C. 933(d)).
(b) SENATE PAYGO SCORECARDS.—The budgetary effects of this Act shall not be counted on any PAYGO scorecard maintained for purposes of section 4106 of H. Con. Res. 71 (115th Congress).

SEC. 2. EXTENSION OF TEMPORARY SUSPENSION OF MEDI-CARE SEQUESTRATION.

(a) IN GENERAL.—Section 3709(a) of division A of the CARES Act (2 U.S.C. 901a note) is amended by striking “March 31, 2021” and inserting “December 31, 2021”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect as if enacted as part of the CARES Act (Public Law 116–136).

SEC. 3. TECHNICAL CORRECTIONS.

(a) DISREGARD OF CERTAIN ADDITIONAL COM-PENSATION FOR PURPOSES OF MEDICAID AND CHIP.—Section 2104(h) of the CARES Act (15 U.S.C. 9023(h)) is amended by striking “Federal pandemic unemployment compensation” and inserting “Federal Pandemic Unemployment Compensation or Mixed Earner Unemployment Compensation”.

(b) RURAL HEALTH CLINIC PAYMENTS.—

(1) IN GENERAL.—Section 1833(f)(3) of the Social Security Act (42 U.S.C. 1395l(f)(3)) is amended—
(A) in subparagraph (A)—

(i) in clause (i), by striking subclauses (I) and (II) and inserting the following:

“(I) with respect to a rural health clinic that had a per visit payment amount established for services furnished in 2020—

“(aa) the per visit payment amount applicable to such rural health clinic for rural health clinic services furnished in 2020, increased by the percentage increase in the MEI applicable to primary care services furnished as of the first day of 2021; or

“(bb) the limit described in paragraph (2)(A); and

“(II) with respect to a rural health clinic that did not have a per visit payment amount established for services furnished in 2020—

“(aa) the per visit payment amount applicable to such rural health clinic for rural health clinic services furnished in 2021; or
“(bb) the limit described in paragraph (2)(A); and”;

(ii) in clause (ii)(I), by striking “under clause (i)(I)” and inserting “under subclause (I) or (II) of clause (i), as applicable,”; and

(B) in subparagraph (B)—

(i) in the matter preceding clause (i), by striking “2019, was” and inserting “2020”;

(ii) in clause (i), by inserting “was” after “(i)”; and

(iii) by striking clause (ii) and inserting the following:

“(ii)(I) was enrolled under section 1866(j) (including temporary enrollment during the emergency period described in section 1135(g)(1)(B) for such period); or

“(II) submitted an application for enrollment under section 1866(j) (or requested such a temporary enrollment for such period) that was received not later than December 31, 2020.”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall take effect as if included in
the enactment of the Consolidated Appropriations Act, 2021 (Public Law 116–260).

(c) Eligibility for Reemployment Services.—

Section 306(a) of the Social Security Act (42 U.S.C. 506(a)) is amended—

(1) by striking “individuals referred to reemployment services as described in section 303(j)” and inserting “claimants for unemployment compensation, including claimants referred to reemployment services as described in section 303(j),”; and

(2) by striking “such individuals” and inserting “such claimants”.

(d) Additional Amount for Certain Hospitals With High Disproportionate Share.—Effective as if included in the enactment of section 203(a) of title II of division CC of Public Law 116–260, subsection (g) of section 1923 of the Social Security Act (42 U.S.C. 1396r–4) amended by such section 203(a) is amended by adding at the end the following new paragraph:

“(3) Additional Amount for Certain Hospitals With High Disproportionate Share.—

“(A) In general.—In the case of a hospital with high disproportionate share (as defined in subparagraph (B)) located in a State referenced in subsection (e) of section 4721 of
the Balanced Budget Act of 1997, a payment adjustment during a State fiscal year shall be considered consistent with subsection (c) if the payment adjustment does not exceed 175 percent of the costs of furnishing hospital services during the year, but only if the Governor of the State certifies to the satisfaction of the Secretary that the hospital’s applicable minimum amount is used for health services during the year. In determining the amount that is used for such services during a year, there shall be excluded any amounts received under the Public Health Service Act, title V, title XVIII, or from third party payors (not including the State plan under this title) that are used for providing such services during the year.

“(B) Hospital with high disproportionate share defined.—In subparagraph (A), a hospital is a ‘hospital with high disproportionate share’ if—

“(i) the hospital is owned or operated by the State (or by an instrumentality or a unit of government within the State); and

“(ii) the hospital—
“(I) meets the requirement described in subparagraphs (A) or (B) of subsection (b)(1); or

“(II) has the largest number of inpatient days attributable to individuals entitled to benefits under the State plan of any hospital in such State for the previous fiscal year.

“(C) APPLICABLE MINIMUM AMOUNT DEFINED.—In subparagraph (A), the ‘applicable minimum amount’ for a hospital for a fiscal year is equal to the difference between the amount of the hospital’s payment adjustment for the fiscal year and the costs to the hospital of furnishing hospital services described in paragraph (1)(A) during the fiscal year.”.