

108TH CONGRESS  
1ST SESSION

# H. R. 2226

To amend title XVIII of the Social Security Act to permit reasonable cost reimbursement for emergency room services provided by federally qualified health centers.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 22, 2003

Mr. CASE (for himself and Mr. ABERCROMBIE) 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 permit reasonable cost reimbursement for emergency room services provided by federally qualified health centers.

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. MEDICARE REASONABLE COST REIMBURSE-**  
4                       **MENT FOR EMERGENCY ROOM SERVICES**  
5                       **PROVIDED BY FEDERALLY QUALIFIED**  
6                       **HEALTH CENTERS.**

7       (a) IN GENERAL.—Section 1833 of the Social Secu-  
8       rity Act (42 U.S.C. 1395l) is amended—

1           (1) in subsection (a)(3), by inserting “subject  
2       to subsection (u),” after “(3)”; and

3           (2) by adding at the end the following new sub-  
4       section:

5       “(u)(1) In the case of services described in section  
6 1832(a)(2)(D)(ii) (relating to federally qualified health  
7 center services) that constitute emergency room services  
8 (as defined in paragraph (2)), the facility may elect to  
9 have the amount of the payment under this part based  
10 on the payment methodology applied under section  
11 1834(g).

12       “(2) For purposes of paragraph (1), the term ‘emer-  
13 gency room services’ means services of the type that are  
14 provided in an emergency room of a hospital or critical  
15 access hospital (including nursing care provided by or  
16 under the supervision of a registered professional nurse,  
17 drugs, biologicals, supplies, appliances, and equipment  
18 furnished for use in the facility, and services of medical  
19 interns and residents), and that are included in the defini-  
20 tion of inpatient critical access hospital services or out-  
21 patient critical access hospital services.”.

22       (b) EFFECTIVE DATE.—The amendments made by  
23 subsection (a) shall apply to services furnished on or after  
24 January 1, 2004.

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