

113TH CONGRESS
1ST SESSION

S. 1557

AN ACT

To amend the Public Health Service Act to reauthorize support for graduate medical education programs in children's hospitals.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Children’s Hospital
3 GME Support Reauthorization Act of 2013”.

4 **SEC. 2. PROGRAM OF PAYMENTS TO CHILDREN’S HOS-**
5 **PITALS THAT OPERATE GRADUATE MEDICAL**
6 **EDUCATION PROGRAMS.**

7 (a) IN GENERAL.—Section 340E of the Public
8 Health Service Act (42 U.S.C. 256e) is amended—

9 (1) in subsection (a), by striking “through 2005
10 and each of fiscal years 2007 through 2011” and in-
11 sserting “through 2005, each of fiscal years 2007
12 through 2011, and each of fiscal years 2014 through
13 2018”; and

14 (2) in subsection (f)—

15 (A) in paragraph (1)(A)—

16 (i) in clause (iii), by striking “and”;

17 (ii) in clause (iv), by striking the pe-
18 riod and inserting “; and”; and

19 (iii) by adding at the end the fol-
20 lowing:

21 “(v) for each of fiscal years 2014
22 through 2018, \$100,000,000.”; and

23 (B) in paragraph (2)—

24 (i) in subparagraph (C), by striking
25 “and”;

1 (ii) in subparagraph (D), by striking
2 the period and inserting “; and”; and

3 (iii) by adding at the end the fol-
4 lowing:

5 “(E) for each of fiscal years 2014 through
6 2018, \$200,000,000.”.

7 (b) REPORT TO CONGRESS.—Section 340E(b)(3)(D)
8 of the Public Health Service Act (42 U.S.C.
9 256e(b)(3)(D)) is amended by striking “Not later than the
10 end of fiscal year 2011” and inserting “Not later than
11 the end of fiscal year 2018”.

12 **SEC. 3. SUPPORT OF GRADUATE MEDICAL EDUCATION**
13 **PROGRAMS IN CERTAIN HOSPITALS.**

14 Section 340E of the Public Health Service Act (42
15 U.S.C. 256e) is amended by adding at the end the fol-
16 lowing:

17 “(h) ADDITIONAL PROVISIONS.—

18 “(1) IN GENERAL.—The Secretary is authorized
19 to make available up to 25 percent of the total
20 amounts in excess of \$245,000,000 appropriated
21 under paragraphs (1) and (2) of subsection (f), but
22 not to exceed \$7,000,000, for payments to hospitals
23 qualified as described in paragraph (2), for the di-
24 rect and indirect expenses associated with operating

1 approved graduate medical residency training pro-
2 grams, as described in subsection (a).

3 “(2) QUALIFIED HOSPITALS.—

4 “(A) IN GENERAL.—To qualify to receive
5 payments under paragraph (1), a hospital shall
6 be a free-standing hospital—

7 “(i) with a Medicare payment agree-
8 ment and that is excluded from the Medi-
9 care inpatient hospital prospective payment
10 system pursuant to section 1886(d)(1)(B)
11 of the Social Security Act and its accom-
12 panying regulations;

13 “(ii) whose inpatients are predomi-
14 nantly individuals under 18 years of age;

15 “(iii) that has an approved medical
16 residency training program as defined in
17 section 1886(h)(5)(A) of the Social Secu-
18 rity Act; and

19 “(iv) that is not otherwise qualified to
20 receive payments under this section or sec-
21 tion 1886(h) of the Social Security Act.

22 “(B) ESTABLISHMENT OF RESIDENCY
23 CAP.—In the case of a freestanding children’s
24 hospital that, on the date of enactment of this
25 subsection, meets the requirements of subpara-

1 graph (A) but for which the Secretary has not
2 determined an average number of full-time
3 equivalent residents under section 1886(h)(4) of
4 the Social Security Act, the Secretary may es-
5 tablish such number of full-time equivalent resi-
6 dents for the purposes of calculating payments
7 under this subsection.

8 “(3) PAYMENTS.—Payments to hospitals made
9 under this subsection shall be made in the same
10 manner as payments are made to children’s hos-
11 pitals, as described in subsections (b) through (e).

12 “(4) PAYMENT AMOUNTS.—The direct and indi-
13 rect payment amounts under this subsection shall be
14 determined using per resident amounts that are no
15 greater than the per resident amounts used for de-
16 termining direct and indirect payment amounts
17 under subsection (a).

18 “(5) REPORTING.—A hospital receiving pay-
19 ments under this subsection shall be subject to the
20 reporting requirements under subsection (b)(3).

21 “(6) REMAINING FUNDS.—

22 “(A) IN GENERAL.—If the payments to
23 qualified hospitals under paragraph (1) for a
24 fiscal year are less than the total amount made
25 available under such paragraph for that fiscal

1 year, any remaining amounts for such fiscal
2 year may be made available to all hospitals par-
3 ticipating in the program under this subsection
4 or subsection (a).

5 “(B) QUALITY BONUS SYSTEM.—For pur-
6 poses of distributing the remaining amounts de-
7 scribed in subparagraph (A), the Secretary may
8 establish a quality bonus system, whereby the
9 Secretary distributes bonus payments to hos-
10 pitals participating in the program under this
11 subsection or subsection (a) that meet stand-
12 ards specified by the Secretary, which may in-
13 clude a focus on quality measurement and im-
14 provement, interpersonal and communications
15 skills, delivering patient-centered care, and
16 practicing in integrated health systems, includ-
17 ing training in community-based settings. In
18 developing such standards, the Secretary shall
19 collaborate with relevant stakeholders, including
20 program accrediting bodies, certifying boards,
21 training programs, health care organizations,

- 1 health care purchasers, and patient and con-
- 2 sumer groups.”.

Passed the Senate November 12, 2013.

Attest:

Secretary.

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