

114TH CONGRESS  
1ST SESSION

# H. R. 1373

To require the Secretary of Health and Human Services to consider, within the annual rulemaking processes, the effect of regulatory changes to certain Medicare payment systems on provider consolidation.

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## IN THE HOUSE OF REPRESENTATIVES

MARCH 16, 2015

Mr. BURGESS introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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 require the Secretary of Health and Human Services to consider, within the annual rulemaking processes, the effect of regulatory changes to certain Medicare payment systems on provider consolidation.

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 “Providers Consolida-  
5 tion and Medicare Payments Examined through Evalua-  
6 tion Act of 2015” or the “Providers COMPETE Act of  
7 2015”.

1 **SEC. 2. RULEMAKING THAT IMPLEMENTS CERTAIN MEDI-**  
2 **CARE PAYMENT CHANGES TO CONSIDER EF-**  
3 **FECTS ON PROVIDER CONSOLIDATION.**

4 (a) IN GENERAL.—Beginning for 2016, as part of  
5 any annual notice and comment rulemaking process to im-  
6 plement changes to payment systems under title XVIII of  
7 the Social Security Act (42 U.S.C. 1395 et seq.) for items  
8 and services under title XVIII of the Social Security Act  
9 (including those for inpatient and outpatient hospital serv-  
10 ices, physicians’ services, and services furnished by other  
11 providers of services and suppliers), the Secretary of  
12 Health and Human Services shall seek public comment on  
13 and evaluate the extent to which, and how, such a change  
14 is projected to affect provider consolidation.

15 (b) COORDINATION AND CONSULTATION.—

16 (1) INTERNAL COORDINATION.—For purposes  
17 of conducting the evaluations under subsection (a),  
18 the Secretary of Health and Human Services shall  
19 ensure appropriate coordination within the Centers  
20 for Medicare & Medicaid Services such that experts  
21 with respect to the applicable payment system under  
22 title XVIII of the Social Security Act work collabo-  
23 ratively for purposes of such evaluations.

24 (2) CONSULTATION.—For purposes of con-  
25 ducting the evaluations under subsection (a), the  
26 Secretary of Health and Human Services may con-

1       sult with the Medicare Payment Advisory Commis-  
2       sion established under section 1805 of the Social Se-  
3       curity Act (42 U.S.C. 1395b–6), the Federal Trade  
4       Commission, other governmental agencies, and pri-  
5       vate sector entities.

6       (c) PROVIDER CONSOLIDATION DEFINED.—For pur-  
7       poses of this section, the term “provider consolidation” in-  
8       cludes the vertical or horizontal integration among pro-  
9       viders of services and suppliers, including professional  
10      practices, health care settings, and ancillary services by  
11      any entity (such as a health system, group practice, or  
12      health insurer).

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