

115TH CONGRESS
2D SESSION

H. R. 5715

To amend title XVIII of the Social Security Act to provide for certain program integrity transparency measures under Medicare parts C and D.

IN THE HOUSE OF REPRESENTATIVES

MAY 9, 2018

Mr. RENACCI (for himself, Ms. SEWELL of Alabama, Mr. GUTHRIE, and Mr. PETERS) 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

A BILL

To amend title XVIII of the Social Security Act to provide for certain program integrity transparency measures under Medicare parts C and D.

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 “Strengthening Part-
5 nerships to Prevent Opioid Abuse Act”.

1 **SEC. 2. PROGRAM INTEGRITY TRANSPARENCY MEASURES**
2 **UNDER MEDICARE PARTS C AND D.**

3 (a) IN GENERAL.—Section 1859 of the Social Secu-
4 rity Act (42 U.S.C. 1395w–28) is amended by adding at
5 the end the following new subsection:

6 “(i) PROGRAM INTEGRITY TRANSPARENCY MEAS-
7 URES.—

8 “(1) PROGRAM INTEGRITY PORTAL.—

9 “(A) IN GENERAL.—Not later than two
10 years after the date of the enactment of this
11 subsection, the Secretary shall, after consulta-
12 tion with stakeholders, establish a secure Inter-
13 net website portal (or other successor tech-
14 nology) that would allow a secure path for com-
15 munication between the Secretary, MA plans
16 under this part, prescription drug plans under
17 part D, and an eligible entity with a contract
18 under section 1893 (such as a Medicare drug
19 integrity contractor or an entity responsible for
20 carrying out program integrity activities under
21 this part and part D) for the purpose of ena-
22 bling through such portal (or other successor
23 technology)—

24 “(i) the referral by such plans of sub-
25 stantiated fraud, waste, and abuse for ini-

1 tiating or assisting investigations con-
2 ducted by the eligible entity; and

3 “(ii) data sharing among such MA
4 plans, prescription drug plans, and the
5 Secretary.

6 “(B) REQUIRED USES OF PORTAL.—The
7 Secretary shall disseminate the following infor-
8 mation to MA plans under this part and pre-
9 scription drug plans under part D through the
10 secure Internet website portal (or other suc-
11 cessor technology) established under subpara-
12 graph (A):

13 “(i) Providers of services and sup-
14 pliers that have been referred pursuant to
15 subparagraph (A)(i) during the previous
16 12-month period.

17 “(ii) Providers of services and sup-
18 pliers who are the subject of an active ex-
19 clusion under section 1128 or who are sub-
20 ject to a suspension of payment under this
21 title pursuant to section 1862(o) or other-
22 wise.

23 “(iii) Providers of services and sup-
24 pliers who are the subject of an active rev-
25 ocation of participation under this title, in-

1 cluding for not satisfying conditions of par-
2 ticipation.

3 “(iv) In the case of such a plan that
4 makes a referral under subparagraph
5 (A)(i) through the portal (or other suc-
6 cessor technology) with respect to activities
7 of substantiated fraud, waste, or abuse of
8 a provider of services or supplier, if such
9 provider or supplier has been the subject of
10 an administrative action under this title or
11 title XI with respect to similar activities, a
12 notification to such plan of such action so
13 taken.

14 “(C) RULEMAKING.—For purposes of this
15 paragraph, the Secretary shall, through rule-
16 making, specify what constitutes substantiated
17 fraud, waste, and abuse, using guidance such as
18 what is provided in the Medicare Program In-
19 tegrity Manual 4.7.1.

20 “(D) HIPAA COMPLIANT INFORMATION
21 ONLY.—For purposes of this subsection, com-
22 munications may only occur if the communica-
23 tions are permitted under the Federal regula-
24 tions (concerning the privacy of individually
25 identifiable health information) promulgated

1 under section 264(e) of the Health Insurance
2 Portability and Accountability Act of 1996.

3 “(2) QUARTERLY REPORTS.—Beginning two
4 years after the date of enactment of this subsection,
5 the Secretary shall make available to MA plans
6 under this part and prescription drug plans under
7 part D in a timely manner (but no less frequently
8 than quarterly) and using information submitted to
9 an entity described in paragraph (1) through the
10 portal (or other successor technology) described in
11 such paragraph or pursuant to section 1893, infor-
12 mation on fraud, waste, and abuse schemes and
13 trends in identifying suspicious activity. Information
14 included in each such report shall—

15 “(A) include administrative actions, perti-
16 nent information related to opioid overpre-
17 scribing, and other data determined appropriate
18 by the Secretary in consultation with stake-
19 holders; and

20 “(B) be anonymized information submitted
21 by plans without identifying the source of such
22 information.

23 “(3) CLARIFICATION.—Nothing in this sub-
24 section shall be construed as precluding or otherwise
25 affecting referrals described in subparagraph (A)

1 that may otherwise be made to law enforcement en-
2 tities or to the Secretary.”.

3 (b) CONTRACT REQUIREMENT TO COMMUNICATE
4 PLAN CORRECTIVE ACTIONS AGAINST OPIOIDS OVER-
5 PRESCRIBERS.—Section 1857(e)(4)(C) of the Social Secu-
6 rity Act (42 U.S.C. 1395w–27(e)(4)(C)) is amended by
7 adding at the end the following new paragraph:

8 “(5) COMMUNICATING PLAN CORRECTIVE AC-
9 TIONS AGAINST OPIOIDS OVER-PRESCRIBERS.—

10 “(A) IN GENERAL.—Beginning with plan
11 years beginning on or after January 1, 2021, a
12 contract under this section with an MA organi-
13 zation shall require the organization to submit
14 to the Secretary, through the process estab-
15 lished under subparagraph (B), information on
16 the investigations and other actions taken by
17 such plans related to providers of services who
18 prescribe a high volume of opioids.

19 “(B) PROCESS.—Not later than January
20 1, 2021, the Secretary shall, in consultation
21 with stakeholders, establish a process under
22 which MA plans and prescription drug plans
23 shall submit to the Secretary information de-
24 scribed in subparagraph (A).

1 “(C) REGULATIONS.—For purposes of this
2 paragraph, including as applied under section
3 1860D–12(b)(3)(D), the Secretary shall, pursu-
4 ant to rulemaking—

5 “(i) specify a definition for the term
6 ‘high volume of opioids’ and a method for
7 determining if a provider of services pre-
8 scribes such a high volume; and

9 “(ii) establish the process described in
10 subparagraph (B) and the types of infor-
11 mation that shall be submitted through
12 such process.”.

13 (c) REFERENCE UNDER PART D TO PROGRAM IN-
14 TEGRITY TRANSPARENCY MEASURES.—Section 1860D–4
15 of the Social Security Act (42 U.S.C. 1395w–104) is
16 amended by adding at the end the following new sub-
17 section:

18 “(m) PROGRAM INTEGRITY TRANSPARENCY MEAS-
19 URES.—For program integrity transparency measures ap-
20 plied with respect to prescription drug plan and MA plans,
21 see section 1859(i).”.

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