To amend title XVIII of the Social Security Act to restructure the payment adjustment for non-emergency ESRD ambulance transports under the Medicare program.

IN THE HOUSE OF REPRESENTATIVES

JUNE 28, 2018

Mr. LAHOOD (for himself and Ms. SENGEL of Alabama) 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.

A BILL

To amend title XVIII of the Social Security Act to restructure the payment adjustment for non-emergency ESRD ambulance transports under the Medicare program.

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

3 SECTION 1. SHORT TITLE.

4 This Act may be cited as the “Non-Emergency Ambulance Transportation Sustainability and Accountability Act of 2018” or the “NEATSA Act”.

5
SEC. 2. RESTRUCTURE OF MEDICARE PAYMENT ADJUSTMENT FOR NON-EMERGENCY ESRD AMBULANCE TRANSPORTS.

(a) IN GENERAL.—Section 1834(l)(15) of the Social Security Act (42 U.S.C. 1395m(l)(15)) is amended to read as follows:

“(15) RESTRUCTURE OF PAYMENT ADJUSTMENT FOR NON-EMERGENCY AMBULANCE TRANSPORTS FOR ESRD BENEFICIARIES.—

“(A) IN GENERAL.—In the case of applicable ambulance services, the fee schedule amount otherwise applicable under the preceding provisions of this subsection shall be reduced as follows:

“(i) In the case of applicable ambulance services furnished during the period beginning on October 1, 2013, and ending on December 31, 2018, reduced by 10 percent.

“(ii) In the case of applicable ambulance services furnished during 2019, reduced by 15.5 percent.

“(iii) In the case of applicable ambulance services furnished during 2020 or a subsequent year—
“(I) by a provider or supplier of
ambulance services that the Secretary
has designated under subparagraph
(C) for the year and for which such
transport originates in an area not de-
scribed in paragraph (13)(A)(i), re-
duced by 29.5 percent; or
“(II) that are not described in
subclause (I), reduced by 15.5 per-
cent.
“(B) APPLICABLE AMBULANCE SERV-
ICES.—In this paragraph, the term ‘applicable
ambulance services’ means ambulance services
consisting of non-emergency basic life support
services involving transport of an individual
with end-stage renal disease for renal dialysis
services (as described in section
1881(b)(14)(B)) furnished other than on an
emergency basis by a provider of services or a
renal dialysis facility.
“(C) DESIGNATION.—
“(i) IN GENERAL.—For 2020 and
each subsequent year, the Secretary shall
designate the providers or suppliers of am-
bulance services for which the total pay-
ments made to the provider or supplier for applicable ambulance services furnished during the applicable period for the year makes up at least 50 percent of the total payments made to the provider or supplier under this part for all ambulance services furnished during such applicable period.

“(ii) **METHODOLOGY.**—The Secretary shall, through notice and comment rule-making, establish the methodology for designating providers and suppliers under clause (i) for a year. Under such methodology, the applicable period for a year shall be a 12-month period determined by the Secretary that begins and ends prior to the beginning of such year.

“(iii) **TIMING.**—Not later than November 1 of each year (beginning with 2019), the Secretary shall notify any provider or supplier that will be designated under clause (i) for the subsequent year.

“(iv) **TARGETED REVIEW.**—The Secretary shall establish a process under which a provider or supplier may seek an informal review of the designation under
clause (i) with respect to the provider or supplier.

“(v) Public Reporting.—Beginning in 2021, the Secretary shall, in an easily understandable format, make available on the Internet website of the Centers for Medicare & Medicaid Services the following:

“(I) The total number of claims paid under this part for applicable ambulance services.

“(II) The total number of claims paid under this part for applicable ambulance services that were subject to the payment reduction under subparagraph (A)(iii), broken out for each of subclauses (I) and (II) of such subparagraph.

“(III) The total number of providers and suppliers that were designated under clause (i).

“(IV) Any other data regarding applicable ambulance services that the Secretary determines appropriate.”.

(b) GAO Study and Report.—
(1) IN GENERAL.—The Comptroller General of the United States (in this subsection referred to as the ‘‘Comptroller General’’) shall conduct a study on payments under section 1834(l) of the Social Security Act (42 U.S.C. 1395m(l)) for applicable ambulance services (as defined in subparagraph (B) of paragraph (15) of such section, as added by subsection (a)). Such study shall include an analysis of the impact of the amendment made by subsection (a), including the impact on beneficiary access and any steps providers and suppliers of ambulance services have taken to avoid payment reductions under such paragraph (15).

(2) REPORT.—Not later than March 1, 2023, the Comptroller General shall submit to Congress a report containing the results of the study conducted under paragraph (1), together with recommendations for such legislation and administrative action as the Comptroller General determines appropriate.