

119TH CONGRESS
1ST SESSION

S. 1936

To require the Center for Medicare and Medicaid Innovation to test allowing blood transfusions to be paid separately from the Medicare hospice all-inclusive per diem payment.

IN THE SENATE OF THE UNITED STATES

JUNE 3, 2025

Ms. ROSEN (for herself, Mr. BARRASSO, and Ms. BALDWIN) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To require the Center for Medicare and Medicaid Innovation to test allowing blood transfusions to be paid separately from the Medicare hospice all-inclusive per diem payment.

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 “Improving Access to
5 Transfusion Care for Hospice Patients Act of 2025”.

1 **SEC. 2. CENTER FOR MEDICARE AND MEDICAID INNOVA-**
 2 **TION TESTING OF ALLOWING BLOOD TRANS-**
 3 **FUSIONS TO BE PAID SEPARATELY FROM**
 4 **THE MEDICARE HOSPICE ALL-INCLUSIVE**
 5 **PER DIEM PAYMENT.**

6 Section 1115A of the Social Security Act (42 U.S.C.
 7 1315a) is amended—

8 (1) in subsection (b)(2)(A), by adding at the
 9 end the following new sentence: “The models se-
 10 lected under this subparagraph shall include the
 11 testing of the model described in subsection (h).”;
 12 and

13 (2) by adding at the end the following new sub-
 14 section:

15 “(h) TESTING OF ALLOWING BLOOD TRANSFUSIONS
 16 TO BE PAID SEPARATELY FROM THE MEDICARE HOS-
 17 PICE ALL-INCLUSIVE PER DIEM PAYMENT.—

18 “(1) IN GENERAL.—Not later than 1 year after
 19 the date of enactment of this subsection, the CMI
 20 shall establish and implement a model under which
 21 blood transfusions furnished to an individual receiv-
 22 ing hospice care are paid separately from the hospice
 23 all-inclusive per diem payment under section
 24 1814(i). The separate payment amount for such
 25 blood transfusion shall be the amount that would

1 otherwise apply under title XVIII if the transfusion
2 was not furnished as part of hospice care.

3 “(2) REQUIREMENTS FOR EVALUATION.—In
4 conducting any evaluation of the model described in
5 paragraph (1) pursuant to subsection (b)(4), the
6 CMI shall ensure it compares participants under the
7 model with similar patients outside of the model
8 with respect to the following metrics:

9 “(A) The number of chemotherapy services
10 furnished in the last 14 days of life.

11 “(B) Hospital utilization in the last 30
12 days of life, including emergency department
13 visits, in-patient and observation status stays
14 (including the length of the stays), and inten-
15 sive care unit (ICU) days.

16 “(C) How many days receiving hospice
17 care before the end of life.

18 “(D) The number of patients receiving
19 hospice care who received a transfusion com-
20 pared to patients with similar diagnoses not re-
21 ceiving hospice care.

22 “(E) The average frequency of transfusion
23 for patients receiving hospice care compared to
24 patients not receiving hospice care.

1 “(F) The number of transfusions for pa-
2 tients receiving hospice care compared to pa-
3 tients not receiving hospice care.

4 “(G) Other areas determined appropriate
5 by the CMI.”.

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