

117TH CONGRESS
2D SESSION

H. R. 9271

To amend title XVIII of the Social Security Act to preserve access to rehabilitation innovation centers under the Medicare program.

IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 3, 2022

Ms. SCHAKOWSKY (for herself, Mr. LAHOOD, Mr. QUIGLEY, Mr. HERN, Ms. NEWMAN, Ms. ROYBAL-ALLARD, Mr. CASTEN, Mr. SCHNEIDER, and Mr. BOST) 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 preserve access to rehabilitation innovation centers under the Medicare program.

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 “Dr. Joanne Smith Me-
5 morial Rehabilitation Innovation Centers Act of 2022”.

1 **SEC. 2. PRESERVING ACCESS TO REHABILITATION INNOVA-**
2 **TION CENTERS UNDER MEDICARE.**

3 (a) IN GENERAL.—Section 1886(j)(7)(E) of the So-
4 cial Security Act (42 U.S.C. 1395ww(j)(7)(E)) is amend-
5 ed—

6 (1) by striking “PUBLIC AVAILABILITY OF DATA
7 SUBMITTED.—The” and inserting “PUBLIC AVAIL-
8 ABILITY OF DATA SUBMITTED.—

9 “(i) IN GENERAL.—The”; and

10 (2) by inserting after clause (i), as redesignated
11 by paragraph (1), the following new clauses:

12 “(ii) PUBLIC RECOGNITION OF REHA-
13 BILITATION INNOVATION CENTERS.—Be-
14 ginning not later than 18 months after the
15 date of the enactment of this clause, the
16 Secretary shall make publicly available on
17 such Internet website, in addition to the
18 information required to be reported on
19 such website under clause (i), a list of all
20 rehabilitation innovation centers, and shall
21 update such list on such website not less
22 frequently than biennially. In carrying out
23 the activities under this clause, the Sec-
24 retary may, as permitted by law, dissemi-
25 nate research, best practices, and other
26 clinical information identified or developed

by such rehabilitation innovation centers to, as determined appropriate by the Secretary, Federal agencies, hospitals, health professional organizations, and national and State accreditation bodies.

“(iii) REHABILITATION INNOVATION CENTERS DEFINED.—For purposes of clause (ii), the term ‘rehabilitation innovation centers’ means a rehabilitation facility that, as of the applicable date (as defined in clause (v)), is a rehabilitation facility described in clause (iv).

“(iv) REHABILITATION FACILITY DESCRIBED.—

“(I) IN GENERAL.—Subject to subclause (II), a rehabilitation facility described in this clause is a rehabilitation facility that—

“(aa) is classified as a rehabilitation facility under the IRF Rate Setting File for the Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2019 (83 Fed. Reg. 38514), or any suc-

cessor regulations that contain
such information;

“(bb) holds at least one
Federal rehabilitation research
and training designation for re-
search projects on traumatic
brain injury or spinal cord injury
from the National Institute on
Disability, Independent Living,
and Rehabilitation Research at
the Department of Health and
Human Services, based on such
data submitted to the Secretary
by a facility, in a form, manner,
and time frame specified by the
Secretary;

“(cc) submits to the Sec-
retary a description of the clin-
ical research enterprise of the fa-
cility and a summary of research
activities of the facility that are
supported by Federal agencies;

“(dd) has a minimum Medi-
care estimated weight per dis-
charge of 1.20 for the most re-

cent fiscal year for which such information is available according to the IRF Rate Setting File described in item (aa), or any successor regulations that contain such information; and

“(ee) has a minimum teaching status of 0.075 for the most recent fiscal year for which such information is available according to the IRF Rate Setting File described in item (aa), or any successor regulations that contain such information.

“(II) WAIVER.—The Secretary may, as determined appropriate, waive any of the requirements under items (aa) through (ee) of subclause (I).

“(v) APPLICABLE DATE DEFINED.—For purposes of clauses (iii) and (iv), the term ‘applicable date’ means—

“(I) with respect to the initial publication of a list under clause (ii), the date of the enactment of such clause; and

1 “(II) with respect to the publica-
 2 tion of an updated list under clause
 3 (ii), a date specified by the Secretary
 4 that is not more than one year prior
 5 to the date of such publication.

6 “(vi) IMPLEMENTATION.—Notwith-
 7 standing any other provision of law the
 8 Secretary may implement clauses (ii)
 9 through (v) by program instruction or oth-
 10 erwise.

11 “(vii) NONAPPLICATION OF PAPER-
 12 WORK REDUCTION ACT.—Chapter 35 of
 13 title 44, United States Code, shall not
 14 apply to data collected under clauses (ii)
 15 through (v).”.

16 (b) REPORT.—Not later than 3 years after the date
 17 of the enactment of this Act, the Secretary of Health and
 18 Human Services shall submit to Congress a report con-
 19 taining any recommendations for such legislation or ad-
 20 ministrative action as the Secretary determines appro-
 21 priate to preserve access to rehabilitation innovation cen-
 22 ters (as defined in section 1886(j)(7)(E)(iii) of the Social
 23 Security Act, as added by subsection (a)).

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