

119TH CONGRESS
2D SESSION

S. 4118

To amend title XVIII of the Social Security Act to ensure the integrity of hospice care furnished under the Medicare program, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MARCH 17, 2026

Mr. WARNER introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to ensure the integrity of hospice care furnished under the Medicare program, and for other purposes.

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 “Hospice Care Account-
5 ability, Reform, and Enforcement Act of 2026” or the
6 “Hospice CARE Act of 2026”.

7 **SEC. 2. ENSURING THE INTEGRITY OF HOSPICE CARE FUR-**
8 **NISHED UNDER THE MEDICARE PROGRAM.**

9 (a) MANDATORY TEMPORARY MORATORIUM ON EN-
10 ROLLMENT.—

(1) IN GENERAL.—Section 1866(j) of the Social Security Act (42 U.S.C. 1395cc(j)) is amended by adding at the end the following new paragraph:

“(10) MANDATORY TEMPORARY MORATORIUM ON ENROLLMENT OF HOSPICE PROGRAMS.—

“(A) IN GENERAL.—Except as provided in subparagraphs (B) and (C), the Secretary shall impose a nationwide temporary moratorium on the enrollment of new hospice programs under this title for the 5-year period beginning on the date of the enactment of this paragraph.

“(B) EXEMPTION FOR CERTAIN HOSPICES.—

“(i) IN GENERAL.—The Secretary may exempt a hospice program seeking to enroll under this title from the moratorium described in subparagraph (A) if the Secretary determines that such program will furnish hospice care to individuals entitled to benefits under part A in an area with insufficient access to such care (as specified by the Secretary, taking into account the considerations described in clause (ii)).

“(ii) CONSIDERATIONS DESCRIBED.—For purposes of clause (i), the consider-

1 ations described in this clause are, with re-
2 spect to a hospice program seeking to en-
3 roll under this title, the following:

4 “(I) The specific geographic area
5 that such program intends to serve.

6 “(II) The current availability of
7 hospice care in such area.

8 “(III) Any evidence of unmet
9 need for hospice care in such area
10 (such as wait times for such care, the
11 extent to which such area (or a popu-
12 lation in such area) is considered un-
13 derserved, and evidence that existing
14 hospice programs are provided a sub-
15 standard quality of care in such area).

16 “(IV) The program’s plan to ad-
17 dress any identified gaps in the provi-
18 sion of hospice care in such area.

19 “(C) AUTHORITY TO LIFT MORATORIUM.—

20 The Secretary may lift the moratorium imposed
21 under subparagraph (A) within a State (or geo-
22 graphic region of a State) specified by the Sec-
23 retary in the same manner as the Secretary
24 may lift a temporary moratorium (as described
25 in paragraph (7)) under section 424.570(d) of

1 title 42, Code of Federal Regulations (or a suc-
 2 cessor regulation).

3 “(D) APPLICATION OF PREPAYMENT MED-
 4 ICAL REVIEW DURING THE TEMPORARY MORA-
 5 TORIUM IN CERTAIN CIRCUMSTANCES.—

6 “(i) IN GENERAL.—Subject to clause
 7 (ii), the Secretary shall apply prepayment
 8 medical review to hospice care consisting of
 9 routine home care furnished during the 5-
 10 year period beginning on the date of the
 11 enactment of this paragraph by an applica-
 12 ble hospice program to a covered indi-
 13 vidual.

14 “(ii) TERMINATION OF APPLICATION
 15 OF PREPAYMENT MEDICAL REVIEW.—

16 “(I) IN GENERAL.—The Sec-
 17 retary shall terminate the application
 18 of prepayment medical review under
 19 clause (i) with respect to hospice care
 20 furnished by an applicable hospice
 21 program to a covered individual if the
 22 Secretary determines that, during the
 23 period in which such care so furnished
 24 by such program was subject to such
 25 review, such care was subject to a low

1 rate of denial (as specified by the Sec-
2 retary) under such review.

3 “(II) REVOCATION OF TERMI-
4 NATION.—The Secretary may revoke
5 any termination of prepayment med-
6 ical review under subclause (I) if de-
7 termined appropriate by the Sec-
8 retary.

9 “(iii) DEFINITIONS.—For purposes of
10 this subparagraph:

11 “(I) APPLICABLE HOSPICE PRO-
12 GRAM.—The term ‘applicable hospice
13 program’ means a hospice program
14 with a history of claim submissions
15 with respect to hospice care furnished
16 under this title that is aberrant (such
17 as by demonstrating that such pro-
18 gram is an outlier with respect to live
19 discharges) compared to such history
20 of claim submissions of similarly situ-
21 ated hospice programs, as determined
22 by the Secretary.

23 “(II) COVERED INDIVIDUAL.—
24 The term ‘covered individual’ means
25 an individual receiving hospice care

1 under this title during the second 90-
2 day period described in section
3 1812(d)(1) (or during any subsequent
4 period) applicable to such individual.

5 “(E) REVALIDATION OF ENROLLMENT IN-
6 FORMATION.—

7 “(i) IN GENERAL.—During the 6-
8 month period beginning on the date of the
9 enactment of this paragraph and notwith-
10 standing any applicable revalidation cycle
11 under section 424.515 of title 42, Code of
12 Federal Regulations (or a successor regula-
13 tion), the Secretary shall revalidate the en-
14 rollment information of each hospice pro-
15 gram enrolled under this title in accord-
16 ance with the requirements applicable to
17 revalidations of such information under
18 such section.

19 “(ii) PUBLICATION OF OWNERSHIP IN-
20 FORMATION.—Not later than 1 year after
21 the date of the enactment of this para-
22 graph, the Secretary shall publish on a
23 public website of the Centers for Medicare
24 & Medicaid Services ownership interest and
25 managing control information collected

1 pursuant to revalidations described in
2 clause (i) for each hospice program en-
3 rolled under this title.

4 “(iii) REPORT.—Not later than Janu-
5 ary 1, 2028, the Secretary, acting through
6 the Assistant Secretary for Planning and
7 Evaluation, shall submit to Congress a re-
8 port on hospice ownership and control
9 trends and the role of private equity in
10 ownership and control of hospice programs.
11 Such report shall include—

12 “(I) validation, to the extent fea-
13 sible, of the ownership and control in-
14 formation reported on form CMS–
15 855A (or any successor form);

16 “(II) an analysis of hospice cost
17 report data by ownership type;

18 “(III) recommendations on ways
19 to improve the integrity of the owner-
20 ship and control information reported
21 by hospices during the enrollment
22 process under this title; and

23 “(IV) to the extent practicable,
24 recommendations on policies to pro-
25 mote health care competition.

1 “(F) IMPLEMENTATION.—The Secretary
 2 shall implement this paragraph through pro-
 3 gram instruction or other forms of subregu-
 4 latory guidance.”.

5 (2) AUTHORITY TO PROVIDE EXEMPTIONS TO
 6 TEMPORARY MORATORIA.—Section 1866(j)(7) of the
 7 Social Security Act (42 U.S.C. 1395cc(j)(7)) is
 8 amended—

9 (A) in subparagraph (A), by adding at the
 10 end the following new sentence: “The Secretary
 11 may exempt a provider of services or supplier
 12 that would otherwise be subject to a morato-
 13 rium imposed under the preceding sentence
 14 from such moratorium if determined appro-
 15 priate by the Secretary.”; and

16 (B) in subparagraph (C)(iii)—

17 (i) in subclause (I), by striking “and”
 18 at the end;

19 (ii) in subclause (II), by striking the
 20 period and inserting “; and”; and

21 (iii) by adding at the end the fol-
 22 lowing new subclause:

23 “(III) is not subject to an exemp-
 24 tion described in such subpara-
 25 graph.”.

1 (b) EXTENSION OF OVERSIGHT OF NEWLY EN-
 2 ROLLED HOSPICE PROGRAMS.—

3 (1) IN GENERAL.—Section 1866(j)(3)(A) of the
 4 Social Security Act (42 U.S.C. 1395cc(j)(3)(A)) is
 5 amended by inserting “(or, in the case of a hospice
 6 program, not more than 2 years)” after “1 year”.

7 (2) MANDATORY APPLICATION OF ENHANCED
 8 OVERSIGHT FOR CERTAIN HOSPICE PROGRAMS.—
 9 Section 1866(j)(3) of the Social Security Act (42
 10 U.S.C. 1395cc(j)(3)) is amended—

11 (A) by redesignating subparagraph (B) as
 12 subparagraph (C); and

13 (B) by inserting after subparagraph (A)
 14 the following new subparagraph:

15 “(B) MANDATORY APPLICATION TO CER-
 16 TAIN HOSPICE PROGRAMS.—The procedures es-
 17 tablished by the Secretary under subparagraph
 18 (A) shall provide that any hospice program en-
 19 rolling under this title that would, but for appli-
 20 cation of subparagraph (B) or (C) of paragraph
 21 (10), have been prohibited from so enrolling be
 22 subject to the enhanced oversight described in
 23 such subparagraph for a period of not less than
 24 30 days.”.

1 (c) INCREASE IN SURVEY FREQUENCY FOR CERTAIN
2 HOSPICE PROGRAMS.—Section 1822(a) of the Social Se-
3 curity Act (42 U.S.C. 1395i–6(a)) is amended—

4 (1) in paragraph (1)—

5 (A) by inserting “, with respect to such a
6 survey conducted with respect to a hospice pro-
7 gram that is not included on the list established
8 under paragraph (5),” after “local survey agen-
9 cy, or”; and

10 (B) by inserting “(or, in the case of a hos-
11 pice program that is included on the list estab-
12 lished under paragraph (5), not less frequently
13 than once every 18 months)” after “36
14 months”;

15 (2) by redesignating paragraph (5) as para-
16 graph (6);

17 (3) by inserting after paragraph (4) the fol-
18 lowing new paragraph:

19 “(5) HOSPICE PROGRAMS SUBJECT TO IN-
20 CREASED SURVEY FREQUENCY.—

21 “(A) IN GENERAL.—The Secretary shall
22 establish a list of hospice programs subject to
23 increased survey frequency under paragraph (1)
24 in accordance with the provisions of this para-
25 graph.

1 “(B) INCLUSION ON LIST.—

2 “(i) IN GENERAL.—The Secretary
3 shall include a hospice program on the list
4 established under subparagraph (A) if such
5 program is not participating in the special
6 focus program under subsection (b) and
7 such hospice program meets either of the
8 following criteria:

9 “(I) The program first submitted
10 a claim for an item or service under
11 this title during the 5-year period end-
12 ing on the date of the enactment of
13 this paragraph.

14 “(II) The program first submits
15 a claim for an item or service under
16 this title on or after such date of en-
17 actment.

18 “(ii) DISCRETIONARY INCLUSION.—
19 The Secretary may include a hospice pro-
20 gram on the list established under sub-
21 paragraph (A)—

22 “(I) if claims data submitted by
23 such program indicates that such pro-
24 gram is not providing the full scope of

1 hospice care services payable under
2 this title;

3 “(II) if the Secretary determines
4 that such program is an outlier with
5 respect to live discharges; or

6 “(III) for any other reason deter-
7 mined appropriate by the Secretary.

8 “(C) REMOVAL FROM LIST.—The Sec-
9 retary shall remove a hospice program included
10 in the list established under subparagraph
11 (A)—

12 “(i) if—

13 “(I) such program has been sub-
14 ject to 2 surveys under this subsection
15 while included on such list; and

16 “(II) neither such survey resulted
17 in such program being cited for a de-
18 ficiency for failure to comply with a
19 condition of participation relating to
20 quality of care; or

21 “(ii) if such program is placed in the
22 special focus program established under
23 subsection (b).”; and

24 (4) in paragraph (6), as so redesignated, by
25 striking “each fiscal year (beginning with fiscal year

1 2022)” and inserting “each of fiscal years 2022
 2 through 2026, and of \$15,000,000 for fiscal year
 3 2027 and for each subsequent fiscal year,”.

4 (d) PROHIBITION ON PAYMENT FOR FAILURE TO
 5 MEET QUALITY DATA REPORTING REQUIREMENTS.—
 6 Section 1814(i)(5) of the Social Security Act (42 U.S.C.
 7 1395f(i)(5)) is amended—

8 (1) in subparagraph (A)—

9 (A) in the header, by striking “REDUCTION
 10 IN UPDATE FOR”;

11 (B) in clause (i)—

12 (i) in the header, by striking “IN
 13 GENERAL” and inserting “FISCAL YEARS
 14 2014 THROUGH 2027”;

15 (ii) by inserting “through fiscal year
 16 2027” after “each subsequent fiscal year”;
 17 and

18 (iii) by adding at the end the fol-
 19 lowing new sentence: “The application of
 20 the preceding sentence may result in the
 21 market basket percentage increase under
 22 paragraph (1)(C)(ii)(VII) or paragraph
 23 (1)(C)(iii), as applicable, being less than
 24 0.0 for a fiscal year, and may result in
 25 payment rates under this subsection for a

1 fiscal year being less than such payment
 2 rates for the preceding fiscal year.”; and
 3 (C) by amending clause (ii) to read as fol-
 4 lows:

5 “(ii) SUBSEQUENT FISCAL YEARS.—
 6 For purposes of fiscal year 2028 and each
 7 subsequent fiscal year, no payment may be
 8 made under this title to a hospice program
 9 that does not submit data to the Secretary
 10 in accordance with subparagraph (C) with
 11 respect to such fiscal year.”; and

12 (2) in subparagraph (B), by striking “subpara-
 13 graph (A)” and inserting “subparagraph (A)(i)”.

14 (e) ENSURING INDEPENDENCE OF PHYSICIAN CER-
 15 TIFICATIONS OF TERMINAL ILLNESS.—Section
 16 1814(a)(7)(A)(i) of the Social Security Act (42 U.S.C.
 17 1395f(a)(7)(A)(i)) is amended—

18 (1) in subclause (I), by inserting “or, with re-
 19 spect to certifications under this clause occurring on
 20 or after October 1, 2027, in the case such individual
 21 fails to designate such an attending physician (or in
 22 the case such attending physician is employed by the
 23 hospice program at which such individual will receive
 24 such care or otherwise has a significant ownership
 25 interest in, or a significant financial relationship

1 with, such program (as determined by the Sec-
 2 retary)), by a physician, physician assistant, or
 3 nurse practitioner that does not have such a signifi-
 4 cant ownership interest in, or such a significant fi-
 5 nancial relationship with, such program (as deter-
 6 mined by the Secretary)” before “, and”; and

7 (2) in the matter following subclause (II), by
 8 striking “physician’s” and inserting “physician’s,
 9 physician assistant’s, nurse practitioner’s,”.

10 (f) ALLOWING ADDITIONAL PROVIDERS TO CERTIFY
 11 TERMINAL ILLNESS.—

12 (1) IN GENERAL.—Section 1814(a)(7)(A)(i)(I)
 13 of the Social Security Act (42 U.S.C.
 14 1395f(a)(7)(A)(i)(I)) is amended by striking “(which
 15 for purposes of this subparagraph does not include
 16 a nurse practitioner or a physician assistant)”.

17 (2) EFFECTIVE DATE.—The amendment made
 18 by paragraph (1) shall apply with respect to certifi-
 19 cations of terminal illnesses made on or after Octo-
 20 ber 1, 2027.

21 (g) ALLOWABLE USE OF SUPPORTING MATERIAL IN
 22 MEDICAL REVIEW OF HOSPICE CARE.—Section 1814(a)
 23 of the Social Security Act (42 U.S.C. 1395f(a)) is amend-
 24 ed by adding at the end the following new sentence: “For
 25 purposes of conducting medical review of hospice care fur-

1 nished to an individual, in addition to using documenta-
 2 tion in the medical record of such individual's attending
 3 physician (as defined in section 1861(dd)) or of the physi-
 4 cian, physician assistant, or nurse practitioner otherwise
 5 making the certification described in paragraph
 6 (7)(A)(i)(I) with respect to such individual, the Secretary
 7 may use documentation in the medical record of the hos-
 8 pice program furnishing such care as supporting material,
 9 as determined appropriate by the Secretary.”.

10 (h) PROHIBITION ON CERTAIN CHANGES IN MAJOR-
 11 ITY OWNERSHIP.—With respect to any change in the ma-
 12 jority ownership of a hospice program occurring during
 13 the 5-year period beginning on the date of the enactment
 14 of this Act, the Secretary of Health and Human Services
 15 shall apply section 424.550(b) of title 42, Code of Federal
 16 Regulations (or a successor regulation) as if the references
 17 to “36 months” in paragraph (1) of such section were ref-
 18 erences to “60 months”.

19 (i) ADVANCED NOTICE OF CHANGES IN OWNERSHIP
 20 OR CONTROL.—Section 1822 of the Social Security Act
 21 (42 U.S.C. 1395i–6) is amended by adding at the end the
 22 following new subsection:

23 “(d) ADVANCED NOTICE OF CHANGES IN OWNER-
 24 SHIP OR CONTROL.—

1 “(1) IN GENERAL.—Beginning January 1,
2 2028, in the case a change occurs in—

3 “(A) the persons with an ownership or
4 control interest (as defined in section
5 1124(a)(3)) in the hospice program;

6 “(B) the persons who are officers, direc-
7 tors, agents, or managing employees (as defined
8 in section 1126(b)) of the hospice program;

9 “(C) the corporation, association, or other
10 company responsible for the management of the
11 hospice program; or

12 “(D) the individual who is the adminis-
13 trator of the hospice program, or the individual
14 who is the medical director of the hospice pro-
15 gram;

16 such program shall provide notice at the time of the
17 change (or, in the case such change is with respect
18 to a person described in subparagraph (A), at least
19 90 days before the effective date of the change) to
20 the Secretary, the appropriate State or local survey
21 agency, or appropriate approved accreditation agen-
22 cy of the change and of the identity of each new per-
23 son, company, or individual described in the respec-
24 tive subparagraph.

25 “(2) ENFORCEMENT.—

1 “(A) IN GENERAL.—In the case that the
 2 Secretary determines that a hospice program
 3 has violated paragraph (1), the Secretary
 4 may—

5 “(i) impose a civil monetary penalty
 6 in an amount not to exceed \$1,000,000 per
 7 violation; and

8 “(ii) if determined appropriate by the
 9 Secretary, terminate such program’s en-
 10 rollment under this title.

11 “(B) PROCEDURES.—The provisions of
 12 section 1128A (other than subsections (a) and
 13 (b) of such section) shall apply to a civil mone-
 14 tary penalty imposed under subparagraph (A)
 15 in the same manner as such provisions apply to
 16 a penalty or proceeding under such section.”.

17 (j) REQUIRED PROVISION OF ADDENDUM OF NON-
 18 COVERED SERVICES.—Section 1812(d)(1) of the Social
 19 Security Act (42 U.S.C. 1395d(d)(1)) is amended by add-
 20 ing at the end the following new sentence: “With respect
 21 to such an election made on or after October 1, 2027, in
 22 the case such program determines that there are items
 23 and services being furnished to such individual that are
 24 not related to the treatment of the individual’s condition
 25 with respect to which a diagnosis of terminal illness has

1 been made, such election shall include an addendum that
 2 specifies such items and services and includes such addi-
 3 tional information as may be specified by the Secretary.
 4 Such program shall provide an updated addendum de-
 5 scribed in the preceding sentence to such individual if,
 6 while such election is in effect with respect to such indi-
 7 vidual, such program makes any alteration to the adden-
 8 dum provided to such individual at the time of such elec-
 9 tion.”.

10 (k) MEDICAL REVIEW OF HOSPICE OUTLIERS AND
 11 CARE UNRELATED TO TERMINAL CONDITION.—

12 (1) IN GENERAL.—

13 (A) MEDICAL REVIEW.—Section
 14 1814(a)(7) of the Social Security Act (42
 15 U.S.C. 1395f(a)(7)) is amended—

16 (i) in subparagraph (D), by striking
 17 “and” at the end;

18 (ii) in subparagraph (E), by inserting
 19 “and before the date of the enactment of
 20 subparagraph (F),” after “subparagraph,”;
 21 and

22 (iii) by adding at the end the fol-
 23 lowing new subparagraph:

24 “(F) beginning on the date that is 5 years
 25 after the date of the enactment of this subpara-

graph, in the case of hospice care provided an individual for more than 90 days by a hospice program with aberrant billing patterns (as determined by the Secretary), the hospice care provided to such individual is subject to prepayment medical review (in accordance with procedures established by the Secretary); and”.

(B) TECHNICAL EXPERT PANEL.—

(i) IN GENERAL.—The Secretary of Health and Human Services shall establish a technical expert panel for purposes of establishing standards for identifying a hospice program with a history of aberrant billing patterns under section 1814(a)(7)(F) of the Social Security Act, as added by subparagraph (A). In making recommendations with respect to such standards, such panel shall take into account the results of prepayment medical reviews conducted under section 1866(j)(10)(D) of such Act, as added by subsection (a).

(ii) FACA WAIVER.—The provisions of chapter 10 of title 5, United States

1 Code, shall not apply to the panel estab-
2 lished under clause (i).

3 (2) PREPAYMENT MEDICAL REVIEW REQUIRE-
4 MENT.—Section 1812(d)(2) of the Social Security
5 Act (42 U.S.C. 1395d(d)(2)) is amended by adding
6 at the end the following new subparagraph:

7 “(E) Notwithstanding any other provision of this
8 title, in the case of items and services (other than items
9 and services described in the matter following clause
10 (ii)(II) of subparagraph (A)) furnished on or after October
11 1, 2027, to an individual with an election in effect under
12 paragraph (1) by a provider of services or supplier, if such
13 provider of services or supplier indicates that such items
14 and services are unrelated to the individual’s condition
15 with respect to which a diagnosis of terminal illness has
16 been made, no payment may be made under this title for
17 such items and services before the Secretary has con-
18 ducted a medical review of such items and services to de-
19 termine whether such items and services are unrelated to
20 such condition. Such review shall include a review of any
21 addendum described in paragraph (1) included in such
22 election.”.

23 (3) FUNDING.—The Secretary of Health and
24 Human Services shall provide for the transfer, from
25 the Federal Hospital Insurance Trust Fund estab-

1 lished under section 1817 of the Social Security Act
 2 (42 U.S.C. 1395i) to the Centers for Medicare &
 3 Medicaid Services Program Management Account, of
 4 \$20,000,000 for fiscal year 2027, to remain avail-
 5 able until expended, for purposes of carrying out the
 6 amendments made by this subsection.

7 (l) PROVISION OF EXPLANATION OF BENEFITS UPON
 8 HOSPICE ELECTION.—

9 (1) IN GENERAL.—Section 1806 of the Social
 10 Security Act (42 U.S.C. 1395b–7) is amended by
 11 adding at the end the following new subsection:

12 “(d) PROVISION OF EXPLANATION OF BENEFITS
 13 UPON HOSPICE ELECTION.—The Secretary shall furnish
 14 to each individual who makes an election described in sec-
 15 tion 1812(d)(1), not later than 15 days after such indi-
 16 vidual makes such election, a notice that—

17 “(1) specifies—

18 “(A) the effective date of such election;

19 “(B) the hospice program that will be fur-
 20 nishing hospice care to such individual;

21 “(C) the telephone number and address of
 22 such program;

23 “(D) the physician, physician assistant, or
 24 nurse practitioner who made the certification

1 described in section 1814(a)(7)(A)(i)(I) with re-
 2 spect to such individual;

3 “(E) the toll-free telephone number of the
 4 medicare administrative contractor responsible
 5 for processing claims for such care;

6 “(2) informs such individual of the waiver of
 7 rights described in section 1812(d)(2)(A);

8 “(3) includes a statement which indicates that,
 9 because errors do occur and because Medicare waste,
 10 fraud, and abuse is a significant problem, such indi-
 11 vidual should carefully check the individual’s hospice
 12 election information and if such individual suspects
 13 Medicare waste, fraud, or abuse with respect to the
 14 provision of such care, the individual should contact
 15 the toll-free phone number 1–800–MEDICARE and
 16 a toll-free phone number maintained by the Inspec-
 17 tor General of the Department of Health and
 18 Human Services for the receipt of complaints and
 19 information about waste, fraud, and abuse in the
 20 provision or billing of services under this title; and

21 “(4) includes any other information determined
 22 appropriate by the Secretary.”.

23 (2) FUNDING.—The Secretary of Health and
 24 Human Services shall provide for the transfer from
 25 the Federal Hospital Insurance Trust Fund estab-

lished under section 1817 of the Social Security Act (42 U.S.C. 1395i) to the Centers for Medicare & Medicaid Services Program Management Account of \$10,000,000 for fiscal year 2027, to remain available until expended, for purposes of carrying out the amendment made by paragraph (1).

(3) EFFECTIVE DATE.—The amendment made by paragraph (1) shall apply to individuals making elections described in section 1812(d)(1) of the Social Security Act (42 U.S.C. 1395d(d)(1)) on or after the date that is 1 year after the date of the enactment of this Act.

(m) MEDICAL REVIEW OF HOSPICE CARE CONTRACTOR REQUIREMENTS.—

(1) IN GENERAL.—The Secretary of Health and Human Services (in this subsection referred to as the “Secretary”) shall require any entity performing medical review under contract with the Secretary of hospice care furnished under part A of title XVIII of the Social Security Act (42 U.S.C. 1395c et seq.) to, with respect to such reviews performed on or after January 1, 2028, utilize only individuals who have received specialized instruction on the philosophy behind hospice care and medical prognostication (as specified by the Secretary) in performing

1 such reviews. In so specifying such instruction and
2 in updating such instruction, the Secretary shall
3 consult with hospice programs as to the content of
4 such instruction.

5 (2) PUBLICATION.—The Secretary shall make
6 any instruction specified for purposes of paragraph
7 (1) publicly available on the website of the Centers
8 for Medicare & Medicaid Services.

9 (3) REPORT.—Not later than October 1, 2028,
10 the Secretary shall submit to Congress a report on
11 activities relating to the medical review of hospice
12 care furnished under part A of title XVIII of the So-
13 cial Security Act (42 U.S.C. 1395c et seq.). Such re-
14 port shall include—

15 (A) with respect to the medical review of
16 hospice care performed during the period begin-
17 ning on January 1, 2020, and ending on De-
18 cember 31, 2025, the accuracy rates of such re-
19 views when performed by—

20 (i) medicare administrative contrac-
21 tors;

22 (ii) recovery audit contractors;

23 (iii) supplemental medical review con-
24 tractors; and

1 (iv) uniform program integrity con-
 2 tractors;

3 (B) the total number of hospice claims
 4 submitted during the period described in sub-
 5 paragraph (A) subject to medical review;

6 (C) the percentage of such claims that
 7 were denied and appealed and the percentage of
 8 such claims so appealed that were overturned
 9 on appeal, broken down by the type of con-
 10 tractor conducting review of such claims and by
 11 each level of appeal;

12 (D) a list of medical review projects relat-
 13 ing to hospice care undertaken by contractors
 14 described in subparagraph (A); and

15 (E) actions the Secretary will take to re-
 16 duce the audit burden on hospice programs
 17 with claims selected for medical review under
 18 multiple projects described in subparagraph (D)
 19 and to minimize the number of denials of
 20 claims for hospice care that are overturned on
 21 appeal.

22 (n) REQUIRING FACE-TO-FACE ENCOUNTERS BE-
 23 FORE RECERTIFICATIONS OF TERMINAL ILLNESS.—Sec-
 24 tion 1814(a)(7) of the Social Security Act (42 U.S.C.
 25 1395f(a)(7)) is amended—

1 (1) in subparagraph (D)—

2 (A) in the matter preceding clause (i), by
3 inserting “, and before October 1, 2027” after
4 “2011”; and

5 (B) by striking “and” at the end; and

6 (2) by adding at the end the following new sub-
7 paragraph:

8 “(F) on and after October 1, 2027, not
9 more than 30 days before each recertification
10 described in subparagraph (A)(ii) is made with
11 respect to an individual, a hospice physician,
12 hospice nurse practitioner, or hospice physician
13 assistant has a face-to-face encounter (which
14 may, with respect to any such recertification
15 made for a 60-day period described in such sub-
16 paragraph, be conducted via telehealth, but only
17 if a registered nurse, licensed practical nurse,
18 or home health aide employed by the hospice
19 program furnishing hospice care to such indi-
20 vidual is physically present with such individual
21 during such encounter) with such individual to
22 gather clinical findings to determine such indi-
23 vidual’s continued eligibility for hospice care;
24 and”.

1 (o) ENSURING MEDICAL DIRECTOR AND PHYSICIAN
2 AVAILABILITY.—

3 (1) IN GENERAL.—Section 1861(dd) of the So-
4 cial Security Act (42 U.S.C. 1395x(dd)) is amend-
5 ed—

6 (A) in paragraph (2)—

7 (i) in subparagraph (F), by striking
8 “and” at the end;

9 (ii) by redesignating subparagraph
10 (G) as subparagraph (I); and

11 (iii) by inserting after subparagraph
12 (F) the following new subparagraphs:

13 “(G) has a medical director responsible for
14 the medical component of hospice care provided
15 by such program who—

16 “(i) is a doctor of medicine or osteop-
17 athy licensed to practice in the State in
18 which such program is located; and

19 “(ii) subject to paragraph (6), is not
20 the medical director of more than 1 other
21 hospice program;

22 “(H) ensures that the medical director de-
23 scribed in subparagraph (G) or a physician
24 member of the group described in subparagraph
25 (B) is available for immediate consultation

1 (which may be through telehealth) when hospice
 2 care is provided in an individual's home; and";
 3 and

4 (B) by adding at the end the following new
 5 paragraph:

6 “(6) The Secretary may waive the requirement de-
 7 scribed in paragraph (2)(G)(ii) with respect to the medical
 8 director of a hospice program if determined appropriate
 9 by the Secretary on a case-by-case basis. In determining
 10 whether to grant a waiver under the preceding sentence,
 11 the Secretary shall take into consideration—

12 “(A) the average daily census for each hospice
 13 program with respect to which such director is med-
 14 ical director;

15 “(B) the geographic areas served by such pro-
 16 grams; and

17 “(C) any other information determined appro-
 18 priate by the Secretary.”.

19 (2) EFFECTIVE DATE.—The amendments made
 20 by paragraph (1) shall apply beginning January 1,
 21 2029.

22 (p) REPORT ON HOSPICE ACCREDITING ORGANIZA-
 23 TIONS.—Not later than 2 years after the date of the enact-
 24 ment of this Act, the Comptroller General of the United
 25 States shall submit to Congress a report on the Secretary

1 of Health and Human Services' (in this subsection re-
2 ferred to as the "Secretary") oversight of hospice program
3 accrediting organizations. Such report shall include the
4 following:

5 (1) An analysis of deficiencies relating to qual-
6 ity of care found pursuant to surveys conducted
7 under section 1822(a) of the Social Security Act (42
8 U.S.C. 1395i-6(a)) following complaints when such
9 surveys were of hospice programs accredited by such
10 an organization and such surveys were conducted by
11 such an organization compared to such deficiencies
12 so found following such complaints when such sur-
13 veys were of hospice programs certified by State or
14 local survey agencies and such surveys were con-
15 ducted by such agencies.

16 (2) A list of hospice programs determined by
17 the Secretary not to be in compliance with all re-
18 quirements applicable to such programs, along with
19 a list of the accrediting organization of each such
20 program.

21 (3) A list of hospice programs that have been
22 deactivated, terminated, or investigated due to con-
23 cerns relating to waste, fraud, or abuse, along with
24 a list of the accrediting organization of each such
25 program.

1 (4) An analysis of any conflicts of interest of
2 hospice program accrediting organizations.

3 (5) Performance data for hospice program ac-
4 crediting organizations.

5 **SEC. 3. PAYMENT REFORMS FOR HOSPICE CARE FUR-**
6 **NISHED UNDER THE MEDICARE PROGRAM.**

7 (a) ADJUSTING PAYMENTS FOR HOSPICE CARE.—

8 (1) IN GENERAL.—Section 1814(i)(1)(C) of the
9 Social Security Act (42 U.S.C. 1395f(i)(1)(C)) is
10 amended—

11 (A) in clause (iii)—

12 (i) by moving such clause 6 ems to
13 the left;

14 (ii) by striking “With respect to” and
15 inserting “Except as provided under
16 clauses (viii) through (x), with respect to”;

17 (iii) by inserting “in a setting (as
18 specified by the Secretary for purposes of
19 clause (vii))” after “hospice care fur-
20 nished”;

21 (iv) by inserting “for such setting”
22 after “payment rates in effect”; and

23 (v) by striking “under this clause”
24 and inserting “under this subparagraph”;

1 (B) in clause (iv), by striking “clause
2 (ii)(VII) or (iii)” each place such phrase ap-
3 pears and inserting “clause (iii) or (iv) of para-
4 graph (2)(D) or clause (ii)(VII), (iii), (viii),
5 (ix), or (x)” in each such place; and

6 (C) by adding at the end the following new
7 clauses:

8 “(vii) Prior to the beginning of a specified fiscal year
9 (as defined in clause (xi)), the Secretary shall specify per-
10 centages by which the payment rates for hospice care con-
11 sisting of services other than routine home care (and, for
12 specified years beginning on or after October 1, 2034, for
13 hospice care consisting of routine home care and other
14 services included in hospice care) in effect for the pre-
15 ceding fiscal year shall be adjusted in such specified fiscal
16 year to align such rates with the costs of such care. In
17 specifying such percentages—

18 “(I) the Secretary shall take into account
19 changes in the average cost of such care and such
20 other factors as determined appropriate by the Sec-
21 retary; and

22 “(II) the Secretary may specify different per-
23 centages for such care based on the setting (as spec-
24 ified by the Secretary) in which such care is fur-
25 nished.

1 “(viii)(I) With respect to routine home care furnished
2 during fiscal year 2030, the payment rates for such care
3 shall be equal to the sum of—

4 “(aa) a per diem amount (which may include an
5 a case mix adjustment to account for variations in
6 cost among different units of service) reflecting the
7 cost of routine home care not consisting of direct pa-
8 tient care for nursing care, physical therapy, occupa-
9 tional therapy, speech-language pathology services,
10 medical social services (other than counseling serv-
11 ices), home health aide services, and physician serv-
12 ices (other than such services that are considered
13 administrative services); and

14 “(bb) subject to such frequency limits as may
15 be specified by the Secretary, a per visit amount
16 (which may vary depending on the type and duration
17 of the visit, as determined appropriate by the Sec-
18 retary) reflecting the cost of routine home care con-
19 sisting of direct patient care excluded from the per
20 diem amount established under item (aa) (other
21 than, in the case of such care furnished at a skilled
22 nursing facility or nursing facility (as defined in sec-
23 tion 1919(a)), the component of such rates attrib-
24 utable to home health aide services).

1 “(II) With respect to routine home care furnished
 2 during fiscal year 2031 or a subsequent fiscal year, the
 3 payment rates for such care shall be equal to the sum of—

4 “(aa) the per diem amount attributable to hos-
 5 pice care described in subclause (I)(aa) in effect
 6 under this clause for the preceding fiscal year, ad-
 7 justed, in the case of a specified fiscal year, by the
 8 percentages specified pursuant to clause (vii) for
 9 such specified fiscal year, increased by the market
 10 basket percentage increase (as defined in section
 11 1886(b)(3)(B)(iii)) for the fiscal year (reduced in ac-
 12 cordance with clause (iv)); and

13 “(bb) the per visit amount for hospice care de-
 14 scribed in subclause (I)(bb) in effect under this
 15 clause for the preceding fiscal year, adjusted, in the
 16 case of a specified fiscal year, by the percentages
 17 specified pursuant to clause (vii) for such specified
 18 fiscal year, increased by such market basket percent-
 19 age increase for the fiscal year (reduced in accord-
 20 ance with clause (iv)).

21 “(III) For purposes of this clause, the term ‘visit’
 22 means, with respect to an individual receiving hospice care
 23 from a hospice program, in-person contact with such indi-
 24 vidual by staff of such program (or by others under ar-
 25 rangements with such program), not including any such

1 contact conducted via telehealth or any other form of tele-
2 communications technology.

3 “(ix)(I) With respect to routine home care consisting
4 of specified hospice care (as defined in subclause (II)) fur-
5 nished by, or under arrangements made by, a hospice pro-
6 gram during the period beginning on October 1, 2027, and
7 ending on September 30, 2032, in lieu of the rates other-
8 wise payable under this subparagraph for such routine
9 home care, the Secretary shall pay to the hospice program
10 furnishing such care an amount equal to 400 percent of
11 the amount payable for routine home care furnished in
12 fiscal year 2027, increased by the market basket percent-
13 age increase (as defined in section 1886(b)(3)(B)(iii)) for
14 the fiscal year (reduced in accordance with clause (iv)),
15 or such other amount determined appropriate by the Sec-
16 retary (which may vary based on the type of service fur-
17 nished) for each day during which such specified hospice
18 care was furnished.

19 “(II) For purposes of subclause (I), the term ‘speci-
20 fied hospice care’ means any of the following items and
21 services:

22 “(aa) Palliative chemotherapy or radiation fur-
23 nished under the supervision of an oncologist and in
24 accordance with accepted clinical guidelines.

1 “(bb) Palliative radiation therapy furnished
2 under the supervision of an oncologist and in accord-
3 ance with accepted clinical guidelines.

4 “(cc) Subject to such frequency limitations as
5 the Secretary may establish, palliative blood trans-
6 fusions furnished to an individual diagnosed with a
7 blood cancer and furnished under the supervision of
8 an oncologist and in accordance with accepted clin-
9 ical guidelines.

10 “(dd) Palliative dialysis furnished under the su-
11 pervision of a nephrologist, but only if—

12 “(AA) the individual receiving such pallia-
13 tive dialysis was receiving dialysis treatments
14 prior to making the election under section
15 1812(d); and

16 “(BB) such individual has received fewer
17 than 10 sessions of such palliative in-center or
18 home hemodialysis or the equivalent for peri-
19 toneal dialysis or other modalities (or, in the
20 case such individual has received 10 or more
21 such sessions or the equivalent of such sessions,
22 such session or equivalent of such session is
23 subject to prior authorization).

24 “(x) With respect to hospice care consisting of serv-
25 ices other than routine home care furnished during 2030

1 or a subsequent fiscal year, the payment rates for such
2 care shall be equal to the rates in effect for such care for
3 the preceding fiscal year, adjusted, in the case of a speci-
4 fied fiscal year, by the percentages specified pursuant to
5 clause (vii) for such specified fiscal year, increased by the
6 market basket percentage increase (as defined in section
7 1886(b)(3)(B)(iii)) for the fiscal year (reduced in accord-
8 ance with clause (iv)).

9 “(xi) For purposes of this subparagraph, the term
10 ‘specified fiscal year’ means fiscal years 2030, 2035, and
11 2040.

12 “(xii)(I) The Secretary shall, with respect to cost re-
13 porting periods beginning during an applicable fiscal year
14 (as defined in subclause (III)), conduct an audit of a rep-
15 resentative sample of cost reports submitted by hospice
16 programs.

17 “(II) The Secretary shall, for each applicable fiscal
18 year, convene a technical expert panel for purposes of re-
19 viewing the methodology and results of the audit con-
20 ducted under subclause (I) with respect to such applicable
21 fiscal year.

22 “(III) For purposes of this clause, the term ‘applica-
23 ble fiscal year’ means fiscal years 2026, 2031, and 2036.

1 “(IV) The provisions of chapter 10 of title 5, United
2 States Code, shall not apply to the panel established under
3 subclause (II).

4 “(V) The Secretary shall provide for the transfer,
5 from the Federal Hospital Insurance Trust Fund estab-
6 lished under section 1817 to the Centers for Medicare &
7 Medicaid Services Program Management Account, of
8 \$10,000,000 for each of fiscal years 2027, 2032, and
9 2037, to remain available until expended, for purposes of
10 carrying out this clause.”.

11 (2) OUTLIER PAYMENTS.—Section 1814(i) of
12 the Social Security Act (42 U.S.C. 1395f(i)) is
13 amended—

14 (A) by redesignating paragraph (7) as
15 paragraph (8); and

16 (B) by inserting after paragraph (6) the
17 following new paragraph:

18 “(7)(A) Subject to subparagraph (B), with respect to
19 routine home care furnished during a fiscal year beginning
20 on or after October 1, 2032, the Secretary may, if deter-
21 mined appropriate by the Secretary, provide an additional
22 payment for types of such care (such as specified hospice
23 care (as defined in paragraph (1)(C)(ix))) specified by the
24 Secretary to account for unusual variations in the type
25 or amount of such routine home care.

1 “(B)(i) The total amount of additional payments esti-
 2 mated to be made under subparagraph (A) for routine
 3 home care furnished during a fiscal year may not exceed
 4 5 percent of the total amount of payments estimated to
 5 be made for such care furnished during such fiscal year
 6 without application of this paragraph for such fiscal year.

7 “(ii) The total amount of additional payments esti-
 8 mated to be made under subparagraph (A) for routine
 9 home care furnished during a fiscal year to an individual
 10 hospice program may not exceed 10 percent of the total
 11 amount of payments estimated to be made for such care
 12 furnished during such fiscal year by such program without
 13 application of this paragraph for such fiscal year.

14 “(C) The Secretary shall reduce any per diem rate
 15 applicable under paragraph (1) to routine home care fur-
 16 nished during the first fiscal year for which payments are
 17 made under subparagraph (A) by such proportion as will
 18 result, not taking into account any additional payments
 19 made under subparagraph (A) for such care furnished
 20 during such fiscal year, in an aggregate reduction of 5
 21 percent in payment for such care furnished during such
 22 fiscal year.”.

23 (3) PLAN OF CARE REQUIREMENTS.—

24 (A) IN GENERAL.—Section 1814(a)(7)(B)
 25 of the Social Security Act (42 U.S.C.

1395f(a)(7)(B)) is amended by inserting “and, with respect to the establishment of such plan, in the case such plan includes the furnishing of specified hospice care (as defined in subsection (i)(1)(C)(x)(II)), by a nephrologist (if such care is care described in item (dd) of such subsection) or by an oncologist (if such care is care described in any of items (aa) through (cc) of such subsection) who does not have a significant ownership interest in, or a significant financial relationship with, such hospice program, as determined by the Secretary, and, with respect to the periodic review of such plan, in the case such plan includes the furnishing of specified hospice care (as defined in subsection (i)(1)(C)(x)(II)), by the nephrologist supervising the furnishing of such care (if such care is described in item (dd) of such subsection) or by the oncologist supervising the furnishing of such care (if such care is described in any of items (aa) through (cc) of such subsection)” after “of the hospice program”.

(B) EFFECTIVE DATE.—The amendment made by subparagraph (A) shall apply with respect to written plans for providing hospice care

1 developed or reviewed on or after October 1,
2 2027.

3 (4) EXCLUDING HOME HEALTH AIDE SERVICES
4 AND HOMEMAKER FROM THE DEFINITION OF HOS-
5 PICE CARE IN CERTAIN CIRCUMSTANCES.—

6 (A) IN GENERAL.—Section
7 1861(dd)(1)(D)(i) of the Social Security Act
8 (42 U.S.C. 1395x(dd)(1)(D)(i)) is amended by
9 inserting “in the case such individual is not re-
10 siding in a skilled nursing facility or a nursing
11 facility,” before “services of a”.

12 (B) HOMEMAKER SERVICES.—Section
13 1861(dd)(1)(D)(ii) of the Social Security Act
14 (42 U.S.C. 1395x(dd)(1)(D)(ii)) is amended by
15 inserting “(but only if such individual is not re-
16 siding in a skilled nursing facility or a nursing
17 facility (as defined in section 1919(a)) or, if
18 such individual is residing in such a skilled
19 nursing facility or nursing facility, only if such
20 services are provided on a volunteer basis in ac-
21 cordance with paragraph (2)(E))” after “home-
22 maker services”.

23 (C) EFFECTIVE DATE.—The amendments
24 made by subparagraphs (A) and (B) shall apply

1 to items and services furnished on or after Oc-
 2 tober 1, 2029.

3 (5) CONFORMING ADJUSTMENT TO PAYMENT
 4 CAP.—Section 1814(i)(2)(B) of the Social Security
 5 Act (42 U.S.C. 1395f(i)(2)(B)) is amended—

6 (A) in clause (i), by striking “clause (ii)”
 7 and inserting “clauses (ii) through (iv)”;

8 (B) in clause (ii), by inserting “, and sub-
 9 ject to clause (iii),” after “subparagraph (A)”;

10 (C) by striking clause (iii) and inserting
 11 the following new clause:

12 “(iii) For purposes of subparagraph (A), in the case
 13 of a specified fiscal year (as defined in paragraph
 14 (1)(C)(xi)), the ‘cap amount’ for such year is the cap
 15 amount under this subparagraph for the preceding fiscal
 16 year, adjusted by the estimated percentage change in the
 17 total amount of payment made under this part for hospice
 18 care attributable to application of the amendments made
 19 by section 3(a)(1) of the Hospice Care Accountability, Re-
 20 form, and Enforcement Act of 2026 for such specified fis-
 21 cal year and then increased by the market basket percent-
 22 age increase (as defined in section 1886(b)(3)(B)(iii)) for
 23 such specified fiscal year (reduced in accordance with
 24 paragraph (1)(C)(iv)).”; and

1 (D) by adding at the end the following new
 2 clause:

3 “(iv) For purposes of subparagraph (A), and subject
 4 to clause (iii), for a fiscal year beginning on or after Octo-
 5 ber 1, 2035, the ‘cap amount’ for such year is the cap
 6 amount under this subparagraph for the preceding fiscal
 7 year, increased by the market basket percentage increase
 8 (as defined in section 1886(b)(3)(B)(iii)) for such fiscal
 9 year (reduced in accordance with paragraph (1)(C)(iv)).”.

10 (b) WAGE ADJUSTING CAPS.—

11 (1) IN GENERAL.—Section 1814(i)(2) of the
 12 Social Security Act (42 U.S.C. 1395f(i)(2)), as
 13 amended by subsection (a), is further amended—

14 (A) in subparagraph (A)—

15 (i) by striking “‘cap amount’ for the
 16 year (computed under subparagraph (B))”
 17 and inserting “wage-adjusted cap (as de-
 18 fined in subparagraph (B)) for such pro-
 19 gram and year”; and

20 (ii) by striking “subparagraph (C)”
 21 and inserting “subparagraph (E)”;

22 (B) by redesignating subparagraphs (B)
 23 through (D) as subparagraphs (D) through (F),
 24 respectively;

1 (C) by inserting after subparagraph (A)
 2 the following new subparagraphs:

3 “(B) For purposes of subparagraph (A), the term
 4 ‘wage-adjusted cap’ means, with respect to a hospice pro-
 5 gram and a year, the product of—

6 “(i) the wage index ratio (as computed under
 7 subparagraph (C)) for such program and year; and

8 “(ii) the cap amount for such year (as com-
 9 puted under subparagraph (D)).

10 “(C) For purposes of subparagraph (B), the wage
 11 index ratio for a hospice program and a year is the ratio
 12 of—

13 “(i) the aggregate payments to such program
 14 for such year under paragraph (1); to

15 “(ii) the aggregate payments to such program
 16 for such year under such paragraph that would have
 17 been made had such payments not been subject to
 18 any wage adjustment.”;

19 (D) in subparagraph (D), as so redesign-
 20 nated—

21 (i) by striking “subparagraph (A)”
 22 each place it appears and inserting “sub-
 23 paragraph (B)” in each such place; and

24 (ii) by adding at the end the following
 25 new clause:

1 “(v) Notwithstanding the preceding provisions of this
2 subparagraph, for a fiscal year beginning on or after Octo-
3 ber 1, 2026, the cap amount otherwise determined under
4 this subparagraph for such fiscal year shall be decreased
5 by the same percentage reduction (if any) applied to the
6 amount of payment made under this part for such fiscal
7 year under an order issued pursuant to section 251 of the
8 Balanced Budget and Emergency Deficit Control Act of
9 1985. Any reduction to the cap amount for a fiscal year
10 under the preceding sentence shall not be taken into ac-
11 count for purposes of determining the cap amount for any
12 succeeding fiscal year.”; and

13 (E) by adding at the end the following new
14 subparagraph:

15 “(G) Not later than 1 year after the date of the en-
16 actment of this subparagraph, and annually thereafter,
17 the Secretary shall submit to Congress and make public
18 on the website of the Centers for Medicare & Medicaid
19 Services a report on the calculation of hospice programs’
20 cap amounts under this paragraph. Such report shall con-
21 tain, with respect to each of the 5 most recent accounting
22 years for which data is available and each hospice program
23 receiving payments under this section for hospice care fur-
24 nished during such year, the following:

1 “(i) Such program’s cap amount determined
2 under such section.

3 “(ii) The percentage of such program’s cap
4 amount paid to such program for such care.

5 “(iii) In the case payments to such program ex-
6 ceeded such cap, any amount recouped by the Sec-
7 retary with respect to such program.

8 “(iv) The live discharge rate of such program.”.

9 (2) IMPLEMENTATION.—Notwithstanding any
10 other provision of law, the Secretary of Health and
11 Human Services may implement the amendments
12 made by paragraph (1) by program instruction or
13 otherwise.

14 (3) EFFECTIVE DATE.—The amendments made
15 by subparagraphs (A) through (C) of paragraph (1)
16 shall apply with respect to payment for hospice care
17 furnished during fiscal years beginning on or after
18 October 1, 2027.

19 (c) MODIFICATION OF REQUIREMENTS RELATING TO
20 SHORT-TERM INPATIENT CARE.—

21 (1) IN GENERAL.—Section 1861(dd) of the So-
22 cial Security Act (42 U.S.C. 1395x(dd)) is amend-
23 ed—

24 (A) in paragraph (1)—

1 (i) in subparagraph (G), by striking
2 “consecutively over longer than five days”
3 and inserting “for more than 5 days dur-
4 ing any 90-day election period (or 60-day
5 election period, as applicable) described in
6 section 1812(d)(1)”; and

7 (ii) in the flush matter following sub-
8 paragraph (I), by adding at the end the
9 following new sentence: “In the case of an
10 individual who receives short-term inpa-
11 tient care described in subparagraph (G)
12 consisting of respite care during an elec-
13 tion period and the furnishing of such care
14 is immediately preceded by a hospital stay
15 (which may include a stay for observation)
16 during which such individual made an elec-
17 tion described in section 1812(d)(1) for the
18 first time during such individual’s lifetime
19 (or if such care is immediately preceded by
20 the furnishing of hospice care consisting of
21 general inpatient care and such general in-
22 patient care is immediately preceded by
23 such a hospital stay), the first continuous
24 15 days of such care shall not be taken
25 into account for purposes of applying the

1 limitation on the number of days during
2 which such care may be furnished during
3 an election period under such subpara-
4 graph, but only if such individual does not
5 have sufficient caregiver support to be dis-
6 charged to the individual's home.”; and

7 (B) in paragraph (2)—

8 (i) in subparagraph (A)(iii)—

9 (I) by striking “provides assur-
10 ances satisfactory to the Secretary
11 that” and inserting “ensures that the
12 sum of”; and

13 (II) by striking “20 percent” and
14 inserting “10 percent (or a higher
15 percent (not to exceed 20 percent)
16 specified by the Secretary if deter-
17 mined necessary by the Secretary to
18 ensure sufficient access to such inpa-
19 tient care)”; and

20 (ii) by adding at the end the following

21 flush sentence:

22 “For purposes of subparagraph (A)(iii), the Sec-
23 retary shall ensure that the limitation described in
24 such subparagraph is applied, to the extent prac-
25 ticable, on a real-time basis.”.

1 (2) ALLOWING RESPITE CARE TO BE FUR-
 2 NISHED IN RESIDENTIAL CARE FACILITIES.—Not
 3 later than October 1, 2027, the Secretary of Health
 4 and Human Services (in this paragraph referred to
 5 as the “Secretary”) shall revise section 418.108 of
 6 title 42, Code of Federal Regulations (or a successor
 7 regulation) to allow short-term inpatient care con-
 8 sisting of respite care (as described in section
 9 1861(dd)(1)(G) of the Social Security Act (42
 10 U.S.C. 1395x(dd)(1)(G))) to be furnished in residen-
 11 tial care facilities (as defined by the Secretary) that
 12 only provide care to individuals receiving hospice
 13 care (as specified by the Secretary) and that meet
 14 such standards relating to health and safety as the
 15 Secretary may specify (which may be based on State
 16 licensure requirements applicable to such facilities).

17 (3) EFFECTIVE DATE.—The amendments made
 18 by paragraph (1) shall apply to hospice care fur-
 19 nished on or after October 1, 2027.

20 (d) HOSPITAL DISCHARGE PLANNING REQUIRE-
 21 MENTS.—

22 (1) IN GENERAL.—Section 1861(ee)(2)(D) of
 23 the Social Security Act (42 U.S.C. 1395x(ee)(2)(D))
 24 is amended—

1 (A) by inserting “, home health services,”
2 after “including hospice care”;

3 (B) by striking “including the availability
4 of home health services through individuals and
5 entities” and inserting the following: “includ-
6 ing—

7 “(i) in the case of individuals who are like-
8 ly to need home health services, the availability
9 of such services through home health agencies”;

10 (C) by striking “listed by the hospital as
11 available and, in the case of individuals who are
12 likely to need post-hospital extended care serv-
13 ices,” and inserting the following: “listed by the
14 hospital as available;

15 “(ii) in the case of individuals who are
16 likely to need post-hospital extended care serv-
17 ices,”;

18 (D) by striking the period and inserting “;
19 and”; and

20 (E) by adding at the end the following new
21 clause:

22 “(iii) in the case of individuals who
23 are likely eligible for hospice care, the
24 availability of such care (including the
25 availability of respite care described in sub-

1 section (dd)(1)(G)) through hospice pro-
 2 grams that participate in the program
 3 under this title and that serve the area in
 4 which the patient resides.”.

5 (2) EFFECTIVE DATE.—The amendments made
 6 by paragraph (1) shall apply with respect to dis-
 7 charges occurring on or after October 1, 2027.

8 (e) PAYMENT FOR RESPITE CARE FURNISHED IN
 9 THE HOME.—

10 (1) IN GENERAL.—Section 1861(dd)(1) of the
 11 Social Security Act (42 U.S.C. 1395x(dd)(1)) is
 12 amended—

13 (A) in subparagraph (H), by striking
 14 “and” at the end;

15 (B) by redesignating subparagraph (I) as
 16 subparagraph (J); and

17 (C) by inserting after subparagraph (H)
 18 the following new subparagraph:

19 “(I) short-term home respite care furnished to
 20 an individual on or after October 1, 2029, that—

21 “(i) is furnished in the place of residence
 22 used as such individual’s home (other than a
 23 skilled nursing facility, a nursing facility (as de-
 24 fined in section 1919(a)), an assisted living fa-

1 cility (as defined by the Secretary), or another
2 facility specified by the Secretary);

3 “(ii) is furnished on an intermittent, non-
4 routine, and occasional basis;

5 “(iii) is furnished for not more than 120
6 hours during any 90-day period described in
7 section 1812(d)(1) (or, in the case of any 60-
8 day period described in such section, for not
9 more than 80 hours during such period); and

10 “(iv) meets such other requirements as the
11 Secretary may specify.”.

12 (2) PAYMENT RATES.—Section 1814(i)(1)(C) of
13 the Social Security Act (42 U.S.C. 1395f(i)(1)(C)),
14 as amended by subsection (a), is further amended—

15 (A) in clause (iii), by striking “through
16 (x)” and inserting “through (x) and clause
17 (xiii)”; and

18 (B) by adding at the end the following new
19 clause:

20 “(xiii) With respect to short-term home respite care
21 furnished to an individual during fiscal year 2030 or a
22 subsequent fiscal year, the rates payable for such care
23 shall be equal to the sum of the per diem rate established
24 for routine home care for such fiscal year and an hourly
25 rate established by the Secretary, except that in no case

1 may such rate payable for such short-term home respite
2 care furnished in a 24-hour period exceed the rate of pay-
3 ment for general inpatient care furnished during such a
4 period.”.

○