

105TH CONGRESS  
2D SESSION

# H. R. 3137

To amend section 4615 of the Balanced Budget Act of 1997 to delay for 18 months the prohibition of payment under the Medicare Program for home health services consisting of venipuncture solely for the purpose of obtaining a blood sample and to require submission of a report on the impact of implementing such section.

---

## IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 3, 1998

Mr. ADERHOLT (for himself, Mr. RAHALL, Mr. RILEY, Mr. BACHUS, Mr. LAHOOD, Mr. TANNER, Mr. JENKINS, Mr. CRAMER, and Mr. BOUCHER) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on 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 section 4615 of the Balanced Budget Act of 1997 to delay for 18 months the prohibition of payment under the Medicare Program for home health services consisting of venipuncture solely for the purpose of obtaining a blood sample and to require submission of a report on the impact of implementing such section.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2       This Act may be cited as the “Medicare Venipuncture  
3 Seniors Protection Act of 1998”.

4 **SEC. 2. 18-MONTH DELAY ON PROHIBITION ON PAYMENT**  
5 **FOR HOME HEALTH SERVICES SOLELY FOR**  
6 **PURPOSES OF OBTAINING A BLOOD SAMPLE.**

7       Effective as if included in the enactment of the Bal-  
8 anced Budget Act of 1997 (Public Law 105–33), section  
9 4615(b) of such Act (111 Stat. 475) is amended by strik-  
10 ing “shall apply to home health services furnished after  
11 the 6-month period beginning after the date of enactment  
12 of this Act” and inserting “shall apply to home health  
13 services furnished on and after August 5, 1999”.

14 **SEC. 3. REPORT TO CONGRESS ON MEDICARE HOME**  
15 **HEALTH BENEFITS BASED SOLELY ON DRAW-**  
16 **ING BLOOD.**

17       (a) STUDY.—

18           (1) IN GENERAL.—The Secretary of Health and  
19 Human Services shall conduct a study with respect  
20 to the provision of home health services consisting of  
21 venipuncture under the medicare program under  
22 title XVIII of the Social Security Act.

23           (2) DETAILS.—In conducting such study, the  
24 Secretary determine the following, using the most  
25 recent data available:

1           (A) The number of beneficiaries who are  
2           provided benefits for home health services  
3           under the medicare program.

4           (B) Of such beneficiaries—

5                 (i) the number of beneficiaries who  
6                 are provided benefits for home health serv-  
7                 ices that include venipuncture, and

8                 (ii) the number of beneficiaries who  
9                 are provided benefits for home health serv-  
10                ices and who qualify for such services on  
11                the basis that the only qualifying skill is  
12                the need for venipuncture solely for the  
13                purpose of obtaining a blood sample.

14           (C) The average expenditures, per home  
15           health visit under such program, for each of the  
16           group of beneficiaries described in clause (i)  
17           and clause (ii) of subparagraph (B).

18           (D) The aggregate annual expenditures  
19           under the medicare program for benefits for  
20           home health services for each of the groups of  
21           beneficiaries described in such clauses and the  
22           proportion of such expenditures that may be at-  
23           tributable to fraud and abuse in the provision  
24           of (or billing for) such services.

1           (E) The aggregate reduction in annual ex-  
2           penditures under the medicare program that is  
3           estimated to result from the implementation of  
4           section 4615 of the Balanced Budget Act of  
5           1997, taking into account alternative means by  
6           which beneficiaries described in subparagraph  
7           (B)(ii) may subsequently be able to qualify for  
8           home health benefits.

9           (F) The aggregate annual increase in costs  
10          to medicare beneficiaries and to States (through  
11          increased use of personal care services, nursing  
12          facility services, and other services under the  
13          medicaid and other programs) that is estimated  
14          to result from the implementation of such sec-  
15          tion.

16          (3) DATA ON BENEFICIARIES RESIDING IN  
17          RURAL AREAS.—In conducting such study, such Sec-  
18          retary, to the extent practicable, shall make the de-  
19          terminations under paragraph (2) separately for  
20          beneficiaries residing in rural areas.

21          (b) REPORT.—Not later than February 5, 1999, the  
22          Secretary shall submit to Congress a report on the study  
23          conducted under subsection (a). The report shall include  
24          the determinations described in subsections (a)(2) and  
25          (a)(3) and a separate analysis of the impact of the imple-

1 mentation of section 4615 of the Balanced Budget Act of  
2 1997 on medicare beneficiaries residing in rural areas,  
3 and, in particular, hardships that may be imposed due to  
4 the long and difficult travel conditions that exist for many  
5 such beneficiaries.

6 (c) ADDITIONAL REQUIREMENTS FOR REPORT ON  
7 DEFINITION OF HOMEBOUND.—Section 4613(b) of the  
8 Balanced Budget Act of 1997 (111 Stat. 474) is amended  
9 by adding at the end the following: “The report shall also  
10 include specific legislative recommendations to reduce  
11 waste, fraud, and abuse (if any) in the determination of  
12 whether an individual is homebound without jeopardizing  
13 the services provided under title XVIII of the Social Secu-  
14 rity Act to beneficiaries that have serious medical condi-  
15 tions.”.

○