

111TH CONGRESS
2D SESSION

H. R. 6072

To amend titles XVIII and XIX of the Social Security Act to clarify the application of EHR payment incentives in cases of multi-campus hospitals.

IN THE HOUSE OF REPRESENTATIVES

JULY 30, 2010

Mr. SPACE (for himself, Mr. STARK, Mr. PALLONE, Mr. LEVIN, Mr. WAXMAN, Mr. DINGELL, Mr. BURGESS, Mr. ENGEL, Mrs. BLACKBURN, Mr. BOUCHER, Mr. BUTTERFIELD, Mrs. CAPPS, Ms. CASTOR of Florida, Mr. CROWLEY, Mr. DAVIS of Illinois, Mr. DOGGETT, Mr. GONZALEZ, Mr. GENE GREEN of Texas, Mr. HIGGINS, Mr. LEWIS of Georgia, Mr. McDERMOTT, Mr. MEEK of Florida, Mr. NEAL of Massachusetts, Mr. PASCRELL, Mr. POMEROY, Mr. RANGEL, Ms. SCHWARTZ, Ms. SUTTON, Mr. THOMPSON of California, Mr. VAN HOLLEN, and Mr. WEINER) 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 titles XVIII and XIX of the Social Security Act to clarify the application of EHR payment incentives in cases of multi-campus hospitals.

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 “Electronic Health
3 Record Incentives for Multi-Campus Hospitals Act of
4 2010”.

5 **SEC. 2. CLARIFICATION OF INCENTIVES FOR MULTI-CAM-**
6 **PUS HOSPITALS FOR ADOPTION AND MEAN-**
7 **INGFUL USE OF CERTIFIED ELECTRONIC**
8 **HEALTH RECORDS.**

9 (a) SPECIAL RULE FOR APPLYING MEDICARE EHR
10 INCENTIVE PAYMENTS TO REMOTE INPATIENT LOCA-
11 TIONS OF A HOSPITAL.—Section 1886(n) of the Social Se-
12 curity Act (42 U.S.C. 1395ww(n)) is amended—

13 (1) in paragraph (2), by adding at the end the
14 following new subparagraph:

15 “(H) SPECIAL RULE FOR REMOTE INPA-
16 TIENT LOCATIONS OF A HOSPITAL.—

17 “(i) IN GENERAL.—In the case of an
18 eligible hospital that consists of a qualified
19 main provider and one or more qualified
20 remote inpatient locations, the hospital
21 may elect (in such form and manner as
22 specified by the Secretary) for all applica-
23 ble payment years to—

24 “(I) substitute the base amount
25 alternative described in clause (ii) for

1 the base amount described in subpara-
2 graph (A)(i)(I); or

3 “(II) substitute the discharge re-
4 lated amount alternative described in
5 clause (iii) for the discharge related
6 amount described in subparagraph
7 (A)(i)(II).

8 The election described in the previous sen-
9 tence, with respect to an eligible hospital,
10 shall be made once for such hospital and
11 shall apply to such hospital for all applica-
12 ble payment years.

13 “(ii) BASE AMOUNT ALTERNATIVE.—
14 The base amount alternative described in
15 this clause with respect to an eligible hos-
16 pital is the product of—

17 “(I) the base amount specified in
18 subparagraph (B); and

19 “(II) the total number of all
20 qualified component facilities of the
21 hospital.

22 An election to substitute the base amount
23 alternative described in this clause shall
24 not affect the computation of the discharge

1 related amount specified in subparagraph
2 (C) for the eligible hospital.

3 “(iii) DISCHARGE RELATED AMOUNT
4 ALTERNATIVE.—The discharge related
5 amount alternative described in this clause
6 with respect to an eligible hospital for a
7 12-month period is determined as follows:

8 “(I) First, compute the amount
9 under subparagraph (C) as if the
10 phrase ‘estimated based upon total
11 discharges for the eligible hospital (re-
12 gardless of any source of payment) for
13 the period divided by the total number
14 of all component facilities of the hos-
15 pital’ were substituted for the phrase
16 ‘estimated based upon total discharges
17 for the eligible hospital (regardless of
18 any source of payment) for the pe-
19 riod’.

20 “(II) Then multiply the amount
21 computed under subclause (I) by the
22 total number of all qualified compo-
23 nent facilities of such hospital.

24 “(iv) DEFINITIONS.—For purposes of
25 this subsection:

1 “(I) APPLICABLE PAYMENT
2 YEAR.—The term ‘applicable payment
3 year’ means the first payment year
4 for which a hospital makes an election
5 described in clause (i) and each subse-
6 quent payment year applicable to such
7 hospital.

8 “(II) COMPONENT FACILITY;
9 QUALIFIED COMPONENT FACILITY.—
10 The term ‘component facility’ means,
11 with respect to an eligible hospital,
12 the main provider or any remote inpa-
13 tient location of such hospital. The
14 term ‘qualified component facility’
15 means, with respect to a main pro-
16 vider, a qualified main provider and,
17 with respect to a remote inpatient lo-
18 cation, a qualified remote inpatient lo-
19 cation.

20 “(III) MAIN PROVIDER; QUALI-
21 FIED MAIN PROVIDER.—The term
22 ‘main provider’, with respect to an eli-
23 gible hospital, has the meaning given
24 such term in section 413.65(a)(2) of
25 title 42, Code of Federal Regulations.

1 The term ‘qualified main provider’
2 means a main provider that is a
3 meaningful EHR user for the report-
4 ing period involved.

5 “(IV) REMOTE INPATIENT LOCA-
6 TION; QUALIFIED REMOTE INPATIENT
7 LOCATION.—The term ‘remote inpa-
8 tient location’ means, with respect to
9 an eligible hospital, a remote location
10 of a hospital, as defined in and ap-
11 plied under section 413.65 of title 42,
12 Code of Federal Regulations, that
13 provides inpatient hospital services
14 that are paid for under subsection (d).
15 The term ‘qualified remote inpatient
16 location’ means, with respect to an eli-
17 gible hospital, a location for which the
18 eligible hospital has submitted to the
19 Secretary, for the reporting period in-
20 volved, an attestation (in such form
21 and manner as specified by the Sec-
22 retary) that certifies that the location
23 is a remote inpatient location and a
24 meaningful EHR user for such pe-
25 riod.”; and

1 (2) in paragraph (4)(A)—

2 (A) at the end of clause (ii), by striking
3 “and”;

4 (B) at the end of clause (iii), by striking
5 the period and inserting a semicolon; and

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

8 “(iv) the methodology and standards
9 for determining a remote inpatient loca-
10 tion, a qualified remote inpatient location,
11 a component facility, a qualified compo-
12 nent facility, a main provider, and a quali-
13 fied main provider, as such terms are de-
14 fined in paragraph (2)(H)(iv), and which
15 such locations, facilities, and providers are
16 qualified remote inpatient locations, quali-
17 fied component facilities, and qualified
18 main providers, as such terms are defined
19 in such paragraph; and

20 “(v) the methodology and standards
21 for the election described in paragraph
22 (2)(H).”.

23 (b) IMPLEMENTATION AND ADMINISTRATION.—

24 (1) IMPLEMENTATION.—Notwithstanding any
25 other provision of law, the Secretary of Health and

1 Human Services may implement by program instruc-
2 tion or otherwise this section.

3 (2) ADMINISTRATION.—Chapter 35 of title 44,
4 United States Code, shall not apply to the collection
5 of information to carry out the amendments made
6 by this section.

7 (c) EFFECTIVE DATE.—The amendments made by
8 this section shall apply as if included in the enactment
9 of the American Recovery and Reinvestment Act of 2009
10 (Public Law 111–5).

11 **SEC. 3. CLARIFICATION FOR MEDICAID EHR PAYMENT IN-**
12 **CENTIVES.**

13 (a) IN GENERAL.—Section 1903(t)(5) of the Social
14 Security Act (42 U.S.C. 1396b(t)(5)) is amended—

15 (1) by adding at the end the following new sub-
16 paragraph:

17 “(E) For purposes of determining the applicable
18 amounts specified in subparagraph (A) of section
19 1886(n)(2), as applied by the first sentence of subpara-
20 graph (B)—

21 “(i) the provisions of subparagraph (H) of such
22 section shall apply to a Medicaid provider described
23 in paragraph (2)(B) consisting of a qualified main
24 provider and one or more qualified remote inpatient
25 locations (as such terms are defined in clause (iv) of

1 such subparagraph (H)) in the same manner and to
2 the same extent that such subparagraph applies to
3 an eligible hospital described in clause (i) of such
4 subparagraph, except that—

5 “(I) in applying the second sentence of
6 clause (iv)(IV) of such subparagraph, with re-
7 spect to a Medicaid provider described in para-
8 graph (2)(B), in lieu of certifying that a remote
9 inpatient location is a meaningful EHR user,
10 the Medicaid provider shall certify that the re-
11 mote inpatient location is described in para-
12 graph (2)(B) and is in compliance with para-
13 graph (6)(C) of this subsection for the year of
14 payment involved; and

15 “(II) the first sentence of clause (iv)(IV) of
16 such subparagraph shall be applied in the case
17 of a Medicaid provider described in paragraph
18 (2)(B)(i) without regard to the requirement
19 that inpatient hospital services provided are
20 paid for under section 1886(d); and

21 “(ii) an election made under subparagraph (H)
22 of such section by an eligible hospital described in
23 clause (i) of such subparagraph that is a Medicaid
24 provider described in paragraph (2)(B), shall apply.

1 The Secretary may make appropriate adjustments to the
2 overall hospital EHR amount under subparagraph (B),
3 with respect to a Medicaid provider described in paragraph
4 (2)(B), to take into account the provisions of this subpara-
5 graph.”; and

6 (2) in the first sentence of subparagraph (B),
7 by inserting “and subject to subparagraph (E)”
8 after “For purposes of this paragraph”.

9 (b) EFFECTIVE DATE.—The amendments made by
10 this section shall apply as if included in the enactment
11 of the American Recovery and Reinvestment Act of 2009
12 (Public Law 111–5).

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