

113TH CONGRESS
1ST SESSION

H. R. 3144

To amend title XVIII of the Social Security Act to provide Medicare coverage of extended care services without regard to a requirement for a 3-day prior hospitalization, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 19, 2013

Mr. McDERMOTT introduced the following bill; which was referred to the Committee on Ways and Means

A BILL

To amend title XVIII of the Social Security Act to provide Medicare coverage of extended care services without regard to a requirement for a 3-day prior hospitalization, 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 “Fairness for Bene-

5 ficiaries Act of 2013”.

1 **SEC. 2. MEDICARE COVERAGE OF EXTENDED CARE SERV-**
2 **ICES WITHOUT A 3-DAY PRIOR HOSPITALIZA-**
3 **TION.**

4 (a) IN GENERAL.—Subsection (f) of section 1812 of
5 the Social Security Act (42 U.S.C. 1395d) is amended to
6 read as follows:

7 “(f) COVERAGE OF EXTENDED CARE SERVICES
8 WITHOUT A 3-DAY PRIOR HOSPITALIZATION.—

9 “(1) IN GENERAL.—Coverage shall be provided
10 under this part for an individual for extended care
11 services in a skilled nursing facility that are not
12 post-hospital extended care services if, before the in-
13 dividual is admitted to the skilled nursing facility, a
14 physician or other qualified health care practitioner
15 described in section 1814(a)(2) makes a determina-
16 tion that the provision of extended care services to
17 the individual is medically necessary and has made
18 the certification described in subparagraph (B) of
19 such section with respect to such services (and con-
20 tinues to have such a certification made in the same
21 manner as for post-hospital extended care services).

22 “(2) CONTINUED APPLICATION OF CERTIFI-
23 CATION AND OTHER REQUIREMENTS AND PROVI-
24 SIONS.—The requirements of paragraphs (2) and (6)
25 of section 1814(a) and the provisions of subsections
26 (b)(2) and (e) and sections 1852(l),

1 1861(v)(1)(G)(i), 1861(v)(2)(A), 1861(v)(3),
2 1861(y), 1861(tt)(1)(B), 1862(a)(18),
3 1866(a)(1)(H)(ii)(I), 1883(d), 1883(f), and 1888(e)
4 shall apply to extended care services provided under
5 this subsection in the same manner as they apply to
6 post-hospital extended care services.

7 “(3) MAC DETERMINATIONS.—

8 “(A) PUBLICATION OF REQUIREMENTS
9 FOR DETERMINATIONS.—Not later than 6
10 months after the date of the enactment of this
11 paragraph, the Secretary shall publish a set of
12 uniform requirements that will enable the medi-
13 care administrative contractors to make deter-
14 minations as to whether an admission described
15 in paragraph (1) is medically necessary.

16 “(B) MAC AUDITS.—A medicare adminis-
17 trative contractor may audit determinations de-
18 scribed in paragraph (1) based on the uniform
19 requirements established under subparagraph
20 (A). In any administrative proceeding to review
21 such determinations, the uniform requirements
22 established by the Secretary shall be binding on
23 administrative law judges.”.

24 (b) EFFECTIVE DATE.—The amendment made by
25 subsection (a) shall apply to extended care services fur-

1 nished on or after the date that is 1 year after the date
2 of the enactment of this Act.

