

113TH CONGRESS  
2D SESSION

# S. 2586

To establish a smart card pilot program under the Medicare program.

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## IN THE SENATE OF THE UNITED STATES

JULY 10, 2014

Mr. KIRK (for himself and Mr. RUBIO) introduced the following bill; which was read twice and referred to the Committee on Finance

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# A BILL

To establish a smart card pilot program 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 “Medicare Common Ac-  
5       cess Card Act of 2014”.

6 **SEC. 2. SECURE MEDICARE CARD PILOT PROGRAM.**

7       (a) PILOT PROGRAM IMPLEMENTATION (PHASE I).—  
8           (1) IN GENERAL.—Not later than 18 months  
9           after the date of the enactment of this Act, the Sec-  
10          retary shall conduct a pilot program under title  
11          XVIII of the Social Security Act for the purpose of

1       utilizing smart card technology for Medicare bene-  
2       ficiary and provider identification cards in order  
3       to—

4                 (A) increase the quality of care furnished  
5                 to Medicare beneficiaries;

6                 (B) improve the accuracy and efficiency in  
7                 the billing for Medicare items and services fur-  
8                 nished by Medicare providers;

9                 (C) reduce the potential for identity theft  
10                 and other unlawful use of Medicare beneficiary  
11                 and provider identifying information; and

12                 (D) reduce waste, fraud, and abuse in the  
13                 Medicare program.

14                 (2) SITE REQUIREMENTS.—The Secretary shall  
15                 conduct the pilot program in at least 5 geographic  
16                 areas in which the Secretary determines there is a  
17                 high risk for waste, fraud, or abuse.

18                 (3) DESIGN OF PILOT PROGRAM.—In designing  
19                 the pilot program, the Secretary shall provide for the  
20                 following:

21                 (A) Implementation of a system that uti-  
22                 lizes a smart card as a Medicare identification  
23                 card for Medicare beneficiaries and Medicare  
24                 providers. Such a card shall contain appropriate  
25                 security features and protect personal privacy.

(B) Issuance of a new smart card to all Medicare beneficiaries participating in the pilot program. Such card shall not have the Social Security number printed on the front but, instead shall have such number stored securely on the smart card chip along with other information the Secretary deems necessary.

(C) Issuance of a new provider card to all Medicare providers participating in the pilot program. Such card shall include a photograph of the provider and shall not have the Medicare provider number printed on the front of the card but, instead shall have such number stored securely on the smart card chip along with other information the Secretary deems necessary.

(D) A process for enrollment of all Medicare providers that includes—

(i) identity and certification verification; and

(ii) utilization of biometric data, such as fingerprints, for provider identification and authentication.

(E) A process under which the cards issued under subparagraphs (B) and (C) are

1           used by both Medicare beneficiaries and Medi-  
2           care providers to verify eligibility, prevent  
3           fraud, and authorize transactions.

4           (F) Distribution of necessary equipment,  
5           including cards, card readers, kiosks, biometric  
6           readers, and other materials or documents to  
7           Medicare beneficiaries and providers at no cost  
8           to them.

9           (G) Regular monitoring and review by the  
10           Secretary of Medicare providers' Medicare bil-  
11           lings and Medicare beneficiaries' Medicare  
12           records in order to identify and address inac-  
13           curate charges and instances of waste, fraud, or  
14           abuse.

15           (H) Reporting mechanisms for measuring  
16           the cost savings to the Medicare program by  
17           reason of the pilot program.

18           (I) Include provisions—

19                (i) to ensure that all devices and sys-  
20                tems utilized as part of the pilot program  
21                comply with standards for identity creden-  
22                tials and biometric data developed by the  
23                American National Standards Institute  
24                and the National Institute of Standards  
25                and Technology and Federal requirements

relating to interoperability and information security, including all requirements under the Health Insurance Portability and Accountability Act of 1996;

(ii) to ensure that a Medicare beneficiary's and provider's personal identifying, health, and other information is protected from unauthorized access or disclosure through the use of at least two-factor authentication;

(iii) for the development of procedures and guidelines for the use of identification cards, card readers, kiosks, biometric data and readers, and other equipment to verify a Medicare beneficiary's identity and eligibility for services;

(iv) to ensure that each Medicare beneficiary and provider participating in the pilot program is informed of—

(I) the purpose of the program;

(II) the processes for capturing, enrolling, and verifying their eligibility and, with respect to providers, their biometric data;

(III) the manner in which the biometric data for providers will be used; and

(IV) the steps that will be taken to protect personal identifying, health, and other information from unauthorized access and disclosure;

(v) for addressing problems related to the loss, theft, or malfunction of or damage to equipment and any identifying documents or materials provided by the Secretary;

(vi) for development of a hotline, Web site, or other means by which Medicare beneficiaries and providers can contact the Secretary for assistance; and

(vii) for addressing problems related to accessing care outside the pilot area and cases where the individual faces issues related to physical or other capacity limitations.

1        health information) promulgated under section  
2        264(c) of the Health Insurance Portability and Ac-  
3        countability Act of 1996.

4                    (5) DISCLOSURE EXEMPTION.—Information on  
5        the smart card shall be exempt from disclosure  
6        under section 552(b)(3) of title 5, United States  
7        Code.

8                    (b) EXPANDED IMPLEMENTATION (PHASE II).—  
9        Taking into account the interim report under subsection  
10      (d)(2) the Secretary shall, through rulemaking, expand  
11      the duration and the scope of the pilot program, to the  
12      extent determined appropriate by the Secretary.

13                  (c) WAIVER AUTHORITY.—The Secretary may waive  
14      such provisions of titles XI and XVIII of the Social Secu-  
15      rity Act as the Secretary determines to be appropriate for  
16      the conduct of the pilot program.

17                  (d) REPORTS TO CONGRESS.—

18                  (1) PLAN.—Not later than 6 months after the  
19        date of the enactment of this Act, the Secretary  
20        shall submit to Congress a report that contains a de-  
21        scription of the design and development of the pilot  
22        program, including the Secretary's plan for imple-  
23        mentation.

24                  (2) INTERIM REPORT.—Not later than 1 year  
25        after the pilot program is first implemented, the

1       Secretary shall conduct an evaluation of the pilot  
2       program and submit an interim report to Congress.  
3       Such an evaluation shall include an initial analysis  
4       of the deployment of the program, the usability of  
5       the card system, and the measures taken to protect  
6       beneficiary and provider information.

7                     (3) ADDITIONAL REPORT.—Not later than 2  
8       years after the date that the pilot program is first  
9       implemented, the Secretary shall submit to Congress  
10      a report on the pilot program. Such report shall con-  
11      tain a detailed description of issues related to the ex-  
12      pansion of the program under subsection (b) and  
13      recommendations for such legislation and adminis-  
14      trative actions as the Secretary considers appro-  
15      priate for implementation of the program on a na-  
16      tionwide basis.

17                     (e) FUNDING.—There are appropriated, from  
18      amounts in the Treasury not otherwise appropriated,  
19      \$29,000,000 for the design, implementation, and evalua-  
20      tion of the pilot program. Amounts appropriated under the  
21      preceding sentence shall remain available until expended.

22                     (f) DEFINITIONS.—In this section:

23                         (1) MEDICARE BENEFICIARY.—The term  
24      “Medicare beneficiary” means an individual entitled  
25      to, or enrolled for, benefits under part A of title

1        XVIII of the Social Security Act or enrolled for ben-  
2        efits under part B of such title.

3                (2) MEDICARE PROGRAM.—The term “Medicare  
4        program” means the health benefits program under  
5        title XVIII of the Social Security Act.

6                (3) MEDICARE PROVIDER.—The term “Medi-  
7        care provider” means a provider of services (as de-  
8        fined in subsection (u) of section 1861 of the Social  
9        Security Act (42 U.S.C. 1395x)) and a supplier (as  
10        defined in subsection (d) of such section), including  
11        a supplier of durable medical equipment and sup-  
12        plies.

13                (4) PILOT PROGRAM.—The term “pilot pro-  
14        gram” means the pilot program conducted under  
15        this section.

16                (5) SECRETARY.—The term “Secretary” means  
17        the Secretary of Health and Human Services.

18                (6) SMART CARD.—The term “smart card”  
19        means a secure, electronic, machine readable, fraud-  
20        resistant, tamper-resistant card that includes an em-  
21        bedded integrated circuit chip with a secure micro-  
22        controller.

## 1 SEC. 3. REVISION OF FUNDING FOR THE CENTER FOR

## 2 MEDICARE AND MEDICAID INNOVATION.

3 Section 1115A(f) of the Social Security Act (42

4 U.S.C. 1315a(f)) is amended—

5 (1) In paragraph (1)—

6 (A) in subparagraph (B), by striking  
7 “and” at the end;8 (B) by redesignating subparagraph (C) as  
9 subparagraph (D);10 (C) by inserting after subparagraph (B)  
11 the following new subparagraph:12 “(C) \$8,900,000,000 for the activities ini-  
13 tiated under this section for the period of fiscal  
14 years 2020 through 2029; and”; and15 (D) in subparagraph (D), as redesignated  
16 by subparagraph (B) of this paragraph, by  
17 striking “2020” and inserting “2030”; and18 (2) in paragraph (2), by striking “and (C)” and  
19 inserting “, (C), and (D)”.