

114TH CONGRESS
1ST SESSION

S. 1149

To amend title XVIII of the Social Security Act to require reporting of certain data by providers and suppliers of air ambulance services for purposes of reforming reimbursements for such services under the Medicare program, and for other purposes.

IN THE SENATE OF THE UNITED STATES

APRIL 30, 2015

Mr. VITTER (for himself, Mr. BENNET, Mr. GARDNER, and Mr. SCOTT) 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 require reporting of certain data by providers and suppliers of air ambulance services for purposes of reforming reimbursements for such services 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. FINDINGS.**

4 The Congress finds the following:

5 (1) Air medical critical care transport is an es-
6 sential component of the healthcare system.

1 (2) The presence of air medical services in rural
2 areas provides tens of millions of rural Americans
3 with access to critical care within an hour of injury.

4 (3) As an emergency responder, air medical
5 providers must maintain readiness 24 hours a day
6 and 7 days a week.

7 (4) Air medical providers transport all emergent
8 patients for which they are dispatched regardless of
9 insurance status or ability to pay.

10 (5) The air ambulance fee schedule under the
11 Medicare program was first implemented in 2002
12 and developed through negotiated rulemaking, which
13 required the new fee schedule to be created in a
14 budget neutral manner. As such, the Medicare air
15 ambulance fee schedule has never reflected true
16 costs.

17 (6) Since the implementation of the air ambu-
18 lance fee schedule under the Medicare program, re-
19 imbursements have only been adjusted by infla-
20 tionary updates averaging 2.2 percent a year.

21 (7) Operational readiness and safety enhance-
22 ment costs have grown at a far faster rate than the
23 Medicare inflationary updates, creating a funda-
24 mental imbalance within the air ambulance fee
25 schedule.

1 (8) It is imperative that balance be restored to
 2 the air ambulance fee schedule to preserve access to
 3 timely care for tens of millions of Americans.

4 **SEC. 2. AIR AMBULANCE DATA REPORTING PROGRAM.**

5 Section 1834(l) of the Social Security Act (42 U.S.C.
 6 1395m(l)) is amended—

7 (1) in paragraph (3)(B), by striking “subpara-
 8 graph (C)” and inserting “subparagraph (C) and
 9 paragraph (16)”; and

10 (2) by adding at the end the following new
 11 paragraphs:

12 “(16) AIR AMBULANCE DATA REPORTING PRO-
 13 GRAM.—

14 “(A) REDUCTION IN UPDATE FOR FAILURE
 15 TO REPORT.—

16 “(i) IN GENERAL.—With respect to
 17 air ambulance services furnished by a sup-
 18 plier or provider of air ambulance services
 19 during 2017 or any subsequent year, in the
 20 case the supplier or provider does not sub-
 21 mit data to the Secretary in accordance
 22 with subparagraph (C) with respect to
 23 such year, after determining the percent-
 24 age increase under paragraph (3)(B), and
 25 after application of paragraph (3)(C), the

1 Secretary shall reduce such percentage in-
2 crease for payments under the fee schedule
3 under this subsection during such year by
4 2.0 percentage points.

5 “(ii) SPECIAL RULE.—The application
6 of this subparagraph may result in such
7 percentage increase being less than 0.0 for
8 a year, and may result in payment rates
9 under the fee schedule under this sub-
10 section for a year being less than such pay-
11 ment rates for the preceding year.

12 “(B) NONCUMULATIVE APPLICATION.—
13 Any reduction under subparagraph (A) shall
14 apply only with respect to the year involved and
15 the Secretary shall not take into account such
16 reduction in computing the payment amount
17 under the fee schedule under this subsection for
18 a subsequent year.

19 “(C) SUBMISSION OF DATA.—For 2017
20 and each subsequent year, for purposes of this
21 paragraph, each supplier or provider of air am-
22 bulance services shall submit to the Secretary
23 data specified under subparagraph (D) for the
24 reporting period (specified by the Secretary) for
25 the year. Such data shall be submitted in a

1 form and manner, and at a time, specified by
2 the Secretary for purposes of this subpara-
3 graph.

4 “(D) DATA.—For purposes of reporting
5 data for air ambulance services furnished dur-
6 ing a year, the data described in this subpara-
7 graph are cost data on the following:

8 “(i) Maintenance of aircrafts.

9 “(ii) Medical supplies.

10 “(iii) Fuel.

11 “(iv) Employee expenses.

12 “(v) Recurring training relating to
13 aviation, maintenance, communication, and
14 clinical.

15 “(vi) Rent and utilities.

16 “(vii) Communications.

17 “(viii) Travel.

18 “(ix) Hull and aviation liability insur-
19 ance, life insurance, and professional mal-
20 practice insurance.

21 “(x) Marketing.

22 “(xi) Supplies.

23 “(xii) Overhead support.

24 “(xiii) Aircraft ownership expenses.

1 “(xiv) Safety enhancement capital
2 costs.

3 “(xv) Safety enhancement recurring
4 costs.

5 “(E) VOLUNTARY REPORTING ON QUALITY
6 MEASURES.—Not later than January 1, 2018,
7 the Secretary shall select no less than two qual-
8 ity measures with respect to which providers
9 and suppliers of air ambulance services may
10 voluntarily submit to the Secretary data. In se-
11 lecting such measures, the Secretary shall con-
12 sider the following:

13 “(i) Ventilator use in patients with
14 advanced airways.

15 “(ii) Blood glucose check for altered
16 mental status.

17 “(iii) Waveform capnography for ven-
18 tilated patients.

19 “(iv) First attempt tracheal tube suc-
20 cess.

21 “(v) DASH 1A-definitive airway sans
22 hypoxia/hypotension on first attempt.

23 “(vi) Verification of tracheal tube
24 placement.

25 “(vii) Medication errors on transport.

1 “(viii) Rapid sequence intubation pro-
2 tocol compliance.

3 “(ix) Unplanned dislodgements of
4 therapeutic devices.

5 “(x) Rate of serious reportable events.

6 “(xi) Medical equipment failure.

7 “(F) REPORTS.—

8 “(i) BY SECRETARY.—Not later than
9 July 1, 2019, subject to clause (iii), the
10 Secretary shall submit to Congress a re-
11 port on the data described in subparagraph
12 (E) submitted to the Secretary.

13 “(ii) BY COMPTROLLER GENERAL.—
14 Not later than July 1, 2019, subject to
15 clause (iii), the Comptroller General of the
16 United States shall submit to Congress a
17 report on the data described in subpara-
18 graph (D) and subparagraph (E) sub-
19 mitted under this paragraph. Such report
20 shall include a recommendation on the ade-
21 quate amount of reimbursement under this
22 title to providers and suppliers of air am-
23 bulance services for furnishing such serv-
24 ices that would reflect operational costs of
25 such providers and suppliers and preserve

1 access to critical air medical services and
 2 such other recommendations as the Comp-
 3 troller General deems appropriate.

4 “(iii) LIMITATION.—The reports sub-
 5 mitted under subclauses (i) and (ii) shall
 6 not include any information that the Sec-
 7 retary or Comptroller General, respectively,
 8 determines is proprietary.

9 “(17) INCREASE IN PAYMENT FOR AIR AMBU-
 10 LANCE SERVICES.—

11 “(A) IN GENERAL.—Subject to subpara-
 12 graph (B), In the case of air ambulance services
 13 furnished on or after January 1, 2017, and be-
 14 fore January 1, 2021, the Secretary shall pro-
 15 vide for a percent increase in the base rate of
 16 the fee schedule established under this sub-
 17 section—

18 “(i) during 2017, by 20 percent; and

19 “(ii) during 2018 through 2020, by 5
 20 percent.

21 “(B) ADJUSTMENT TO ENSURE BUDGET
 22 NEUTRALITY.—For 2017 through 2020, the
 23 Secretary shall adjust the percentages described
 24 in clauses (i) and (ii) of subparagraph, by ei-
 25 ther increasing or reducing (but in no case

1 below zero) such percentages, to ensure that the
2 increased expenditures under this part by rea-
3 son of subparagraph (A) are equal to the re-
4 duced expenditures under this part by reason of
5 paragraph (16).”.

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