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115TH CONGRESS
1ST SESSION

H. R. 4582

To amend title XVIII of the Social Security Act to preserve access to rehabilitation innovation centers under the Medicare program.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 7, 2017

Mr. OLSON (for himself, Mr. GENE GREEN of Texas, Mr. MICHAEL F. DOYLE of Pennsylvania, Ms. ROYBAL-ALLARD, Mr. LOWENTHAL, Mr. FOSTER, and Mr. DANNY K. DAVIS of Illinois) 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

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A BILL

To amend title XVIII of the Social Security Act to preserve access to rehabilitation innovation centers under the Medicare program.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Preserving Rehabilitation Innovation Centers Act of 2017''.

SEC. 2. PRESERVING ACCESS TO REHABILITATION INNOVATION CENTERS UNDER MEDICARE.

Section 1886(j)(7)(E) of the Social Security Act (42 U.S.C. 1395ww(j)(7)(E)) is amended—

(1) by striking ''PUBLIC AVAILABILITY OF DATA SUBMITTED.—The'' and inserting ''PUBLIC AVAILABILITY OF DATA SUBMITTED—

''(i) IN GENERAL.—The''; and

(2) by inserting after clause (i), as redesignated by paragraph (1), the following new clauses:

''(ii) PUBLIC RECOGNITION OF REHABILITATION INNOVATION CENTERS.—Not later than one year after the date of the enactment of this clause, the Secretary shall make publicly available on such Internet website, in addition to the information required to be reported on such website under clause (i), a list of all rehabilitation innovation centers.

''(iii) REHABILITATION INNOVATION CENTERS DEFINED.—For purposes of clause (ii), the term 'rehabilitation innovation centers' means a rehabilitation facility that, as of the date of the enactment of this clause, is a rehabilitation facility described in either clause (iv) or (v).

''(iv) NOT-FOR-PROFIT.—A rehabilitation facility described in this clause is a rehabilitation facility that—

''(I) is classified as a not-for-profit entity under the IRF Rate Setting File for the Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2016 (80 Fed. Reg. 47142);

''(II) holds at least one Federal rehabilitation research and training designation for research projects on traumatic brain injury, spinal cord injury, or stroke rehabilitation research from the National Institute on Disability, Independent Living, and Rehabilitation Research at the Department of Health and Human Services, based on such data submitted to the Secretary by a facility, in a form, manner, and time frame specified by the Secretary;

''(III) has a minimum Medicare estimated weight per discharge of 1.1144 for fiscal year 2016 according

to the IRF Rate Setting File described in subclause (I); and

''(IV) is determined by the Secretary, based upon such data submitted by the facility to the Secretary as the Secretary may require, to have had at least 300 Medicare discharges in a year.

''(v) GOVERNMENT-OWNED.—A rehabilitation facility described in this clause is a rehabilitation facility that—

''(I) is classified as a Government-owned institution under the IRF Rate Setting File described in clause (iv)(I);

''(II) holds at least one Federal rehabilitation research and training designation for research projects on traumatic brain injury, spinal cord injury, or stroke rehabilitation research from the National Institute on Disability, Independent Living, and Rehabilitation Research at the Department of Health and Human Services, as determined based on such data

submitted to the Secretary by the facility as the Secretary may require (and in a form, manner, and time frame specified by the Secretary);

"(III) has a minimum Medicare estimated weight per discharge of 1.1144 according to the IRF Rate Setting File described in clause (iv)(I); and

"(IV) has a Medicare disproportionate share hospital (DSH) percentage of at least 0.6300 according to the IRF Rate Setting File described in clause (iv)(I).

"(vi) IMPLEMENTATION.—Notwithstanding any other provision of law the Secretary may implement clauses (ii) through (v) by program instructions or otherwise.

"(vii) NONAPPLICATION OF PAPERWORK REDUCTION ACT.—Chapter 35 of title 44, United States Code, shall not apply to data collected under this clause.

"(viii) STUDY.—Not later than 18 months after the date of the enactment of

this clause, the Medicare Payment Advisory Commission established under section 1805 shall submit to Congress a report analyzing the most recent three years of cost report data available for all rehabilitation innovation centers (as defined in clause (ii)) and assess the payment adequacy for such innovation centers under the Medicare program.''.

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