

115TH CONGRESS  
2D SESSION

# H. R. 5678

To amend title XVIII of the Social Security Act to provide for coverage of rural emergency medical center services under the Medicare program, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 7, 2018

Ms. JENKINS of Kansas (for herself, Mr. KIND, and Ms. SEWELL of Alabama) 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 provide for coverage of rural emergency medical center 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. SHORT TITLE.**

4       This Act may be cited as the “Rural Emergency Medi-  
5 cal Center Act of 2018” or the “REMC Act of 2018”.

## 1 SEC. 2. MEDICARE RURAL EMERGENCY MEDICAL CENTERS

## 2 AND SERVICES.

**3**           (a) IN GENERAL.—

12 (B) by adding at the end the following sub-  
13 section:

14 "Rural Emergency Medical Center; Rural Emergency  
15 Medical Center Services

16        “(jjj)(1) The term ‘rural emergency medical center’  
17 means a facility that—

18               “(A)(i) as of the date of the enactment of this  
19               subsection—

“(II) was a hospital with not more than 50 beds located in a county (or equivalent unit of local government) in a rural area (as defined in section 1886(d)(2)(D)), or was a hospital with not more than 50 beds that was treated as

1           being located in a rural area pursuant to sec-  
2           tion 1886(d)(8)(E); or

3           “(ii) was a critical access hospital described in  
4           clause (i)(I) or a hospital described in clause (i)(II)  
5           that ceased operations during the period beginning  
6           on the date that is 5 years prior to the date of the  
7           enactment of this subsection and ending on the date  
8           of the enactment of this subsection;

9           “(B) provides 24-hour emergency medical care  
10          and observation care that does not exceed an annual  
11          per patient average of 24 hours or more than 1 mid-  
12          night;

13          “(C) may include a unit of the facility that is  
14          licensed as a distinct part skilled nursing facility;

15          “(D) does not provide any acute care inpatient  
16          beds and has protocols in place for the timely trans-  
17          fer of patients who require acute care inpatient serv-  
18          ices or other inpatient services;

19          “(E) provides for the transport of patients who  
20          require acute care inpatient services or other inpa-  
21          tient services from the rural emergency medical cen-  
22          ter to a hospital or critical access hospital, either by  
23          the rural emergency medical center’s ambulance  
24          service provider or through another ambulance serv-  
25          ice supplier;

1           “(F) has elected to be designated as a rural  
2         emergency medical center;

3           “(G) has been licensed by, or received approval  
4         to operate as a qualified emergency medical center  
5         from, the State under paragraph (3); and

6           “(H) is certified by the Secretary under para-  
7         graph (4).

8           “(2)(A) The term ‘rural emergency medical center  
9         services’ means medical and other health services fur-  
10       nished by a rural emergency medical center on an out-  
11       patient basis.

12          “(B) Such term shall include extended care services  
13         (as defined in subsection (h)) subject to such requirements  
14         as the Secretary may specify.

15          “(3) A facility may not operate as a rural emergency  
16         medical center unless the facility—

17           “(A) is located in a State that provides for the  
18         licensing of emergency medical centers under State  
19         or applicable local law; and

20           “(B)(i) is licensed pursuant to such law; or

21           “(ii) is approved by the agency of such State or  
22         locality responsible for licensing hospitals, as meet-  
23         ing the standards established for such licensing.

24          “(4) The Secretary shall certify a facility as a rural  
25         emergency medical center if the facility—

1           “(A) meets the criteria for rural emergency  
2        medical center described in subparagraphs (A)  
3        through (G) of paragraph (1);

4           “(B) has in effect a transfer agreement with a  
5        level I or level II trauma center; and

6           “(C) meets such staff training and certification  
7        requirements as the Secretary may require.

8           “(5) A facility certified by the Secretary as a rural  
9        emergency medical center shall be deemed to be a critical  
10      access hospital for purposes of section 256b of title 42,  
11      United States Code.”.

12           (2) PAYMENT FOR RURAL EMERGENCY MED-  
13        ICAL CENTER SERVICES.—

14           (A) IN GENERAL.—Section 1833(a) of the  
15        Social Security Act (42 U.S.C. 1395l(a)) is  
16        amended—

17           (i) in paragraph (8), by striking  
18        “and” at the end;

19           (ii) in paragraph (9), by striking the  
20        period at the end and inserting “; and”;  
21        and

22           (iii) by inserting after paragraph (9)  
23        the following new paragraph:

24           “(10) in the case of rural emergency medical  
25        center services, services provided by a rural emer-

1       gency medical center ambulance service provider or  
2       another ambulance service supplier to transport pa-  
3       tients who require acute care inpatient services or  
4       other inpatient services from such rural emergency  
5       medical center to a hospital or critical access hos-  
6       pital, and extended care services furnished by a  
7       rural emergency medical center, the amounts de-  
8       scribed in section 1834(w).”.

13        "(w) PAYMENT RULES RELATING TO RURAL EMER-  
14        GENCY MEDICAL CENTERS.—

15           “(1) PAYMENT FOR RURAL EMERGENCY MED-  
16       ICAL CENTER OUTPATIENT SERVICES.—The amount  
17       of payment for rural emergency medical center serv-  
18       ices of a rural emergency medical center is deter-  
19       mined as follows:

“(A) FACILITY FEE.—With respect to facility services (other than services for which payment is made under subparagraph (B)), the sum of the following:

“(i) OPPS RATE.—The amount of payment that would otherwise apply under

1                   section 1833(t) for covered OPD services  
2                   (as defined in section 1833(t)(1)(B) (other  
3                   than clause (ii) of such section)).

4                   “(ii) ADDITIONAL FEE.—An addi-  
5                   tional facility payment in an amount deter-  
6                   mined appropriate by the Secretary that  
7                   accounts for the fixed costs of the rural  
8                   emergency medical center in furnishing  
9                   rural emergency medical center services  
10                  and the low volume of services provided by  
11                  such center.

12                  “(B) PROFESSIONAL SERVICES.—With re-  
13                  spect to professional services, the amount of  
14                  payment that would otherwise be made under  
15                  this part (other than under section  
16                  1833(t)(21)) for such services.

17                  “(2) PAYMENT FOR TRANSPORTATION SERV-  
18                  ICES.—The amount of payment for services provided  
19                  by a rural emergency medical center ambulance serv-  
20                  ice provider or another ambulance service supplier to  
21                  transport patients who require acute care inpatient  
22                  services or other inpatient services from such rural  
23                  emergency medical center to a hospital or critical ac-  
24                  cess hospital is equal to 105 percent of the amount

1 otherwise payable for such services in such area  
2 under section 1834(l).

3       “(3) PAYMENT FOR EXTENDED CARE SERV-  
4 ICES.—The amount of payment for extended care  
5 services furnished by a rural emergency medical cen-  
6 ter that is licensed and approved to furnish such ex-  
7 tended care services is equal to 110 percent of the  
8 amount of payment that would otherwise be made  
9 for covered skilled nursing facility services under  
10 section 1888(e) for the year involved without regard  
11 to section 1888(h).”.

12       (b) CONDITIONS OF PARTICIPATION.—Section  
13 1866(a)(1) of the Social Security Act (42 U.S.C.  
14 1395cc(a)(1)) is amended—

15           (1) in subparagraph (X), by striking at the end  
16 “and”;

17           (2) in the subparagraph (Y), by striking at the  
18 end the period and inserting a comma; and

19           (3) by inserting after subparagraph (Y) the fol-  
20 lowing new subparagraph:

21           “(Z) in the case of a rural emergency medical  
22 center, to meet requirements applicable to critical  
23 access hospitals under this title, other than—

24           “(i) requirements relating to a Medicare  
25 rural hospital flexibility program under section

1           1820(c), including state designation of a facility  
2           as a critical access hospital and criteria for  
3           such designation under paragraph (2) of such  
4           section;

5           “(ii) requirements relating to critical ac-  
6           cess hospitals and rural health networks under  
7           section 1820(d);

8           “(iii) certification by the Secretary as a  
9           critical access hospital under section 1820(e);

10          “(iv) requirements relating to the provision  
11          of inpatient hospital services or acute care beds  
12          by a hospital or critical access hospital under  
13          this section, including under—

14           “(I) paragraph (1)(G) of this sub-  
15           section (relating to certain payment re-  
16           strictions for inpatient hospital services);  
17           and

18           “(II) paragraph (1)(T) of this sub-  
19           section (relating to data submission re-  
20           quirements for inpatient hospital services  
21           for purposes of the low-volume adjust-  
22           ment); and

23          “(v) such others provisions of law or regu-  
24          lation, including provisions under Part B and  
25          Part E, as the Secretary may specify.”.

1       (c) TREATMENT AS TELEHEALTH ORIGINATING  
2 SITE.—Section 1834(m)(4)(C)(ii) of the Social Security  
3 Act (42 U.S.C. 1395m(m)(4)(C)(ii)) is amended by adding  
4 at the end the following new subclause:

5                             “(IX) A rural emergency medical  
6                             center (as defined in section  
7                             1861(jjj)(1)).”.

8       (d) WAIVER OF DISTANCE REQUIREMENT FOR RE-  
9 PLACEMENT CAHS; SUBSEQUENT REDESIGNATION OF  
10 RURAL EMERGENCY MEDICAL CENTER AS CAHS.—Sec-  
11 tion 1820(c)(2) of the Social Security Act (42 U.S.C.  
12 1395i–4(c)(2)) is amended—

13                             (1) in subparagraph (B)(i)(I), by inserting  
14                             “subject to subparagraph (F),” before “is located”;  
15                             and

16                             (2) by adding at the end the following new sub-  
17 paragraphs:

18                             “(F) OPTION TO WAIVE DISTANCE RE-  
19 QUIREMENT.—Beginning on the date of the en-  
20 actment of this subparagraph, for every critical  
21 access hospital located in a State that is cer-  
22 tified as a rural emergency medical center  
23 under section 1861(jjj)(4), the State shall have  
24 the option of waiving the distance requirement  
25 described in subparagraph (B)(i)(I) with re-

1           spect to another facility located in the State  
2           that is seeking designation as a critical access  
3           hospital under this paragraph.

4           “(G) REDESIGNATION OF A RURAL EMER-  
5           GENCY MEDICAL CENTER AS A CRITICAL AC-  
6           CESS HOSPITAL.—A rural emergency medical  
7           center that was previously designated as a crit-  
8           ical access hospital under this paragraph may  
9           elect to be redesignated as a critical access hos-  
10          pital (in the same manner that the hospital was  
11          originally designated as a critical access hos-  
12          pital) at any time, subject to such conditions as  
13          the Secretary may establish.”.

14          (e) CONFORMING AMENDMENT.—Section 1861(u) of  
15          the Social Security Act (42 U.S.C. 1395x(u)) is amended  
16          by inserting “rural emergency medical center,” after “crit-  
17          ical access hospital.”.

18          (f) EFFECTIVE DATE.—The amendments made by  
19          this section shall apply to items and services furnished on  
20          or after the date that is 1 year after the date of the enact-  
21          ment of this Act.

