

116TH CONGRESS
1ST SESSION

S. 1607

To amend title XVIII of the Social Security Act to provide protections for patients scheduling non-emergency procedures at in-network hospitals, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MAY 22, 2019

Mr. KENNEDY 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 provide protections for patients scheduling non-emergency procedures at in-network hospitals, 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 “Medical Billing Fair-
5 ness Act of 2019”.

1 **SEC. 2. ADDITIONAL CONDITIONS OF PARTICIPATION FOR**
 2 **HOSPITALS UNDER THE MEDICARE PRO-**
 3 **GRAM WITH RESPECT TO SCHEDULING OF**
 4 **NON-EMERGENCY PROCEDURES AT IN-NET-**
 5 **WORK HOSPITALS.**

6 (a) IN GENERAL.—Section 1866(a)(1) of the Social
 7 Security Act (42 U.S.C. 1395cc(a)(1)) is amended—

8 (1) by moving the indentation of subparagraph
 9 (W) 2 ems to the left;

10 (2) in subparagraph (X)—

11 (A) by moving the indentation 2 ems to
 12 the left; and

13 (B) by striking “and” at the end;

14 (3) in subparagraph (Y), by striking the period
 15 at the end and inserting “, and”; and

16 (4) by inserting after subparagraph (Y) the fol-
 17 lowing new subparagraph:

18 “(Z)(i) in the case of a hospital, with respect to
 19 a non-emergency procedure scheduled by a patient in
 20 the hospital where the hospital is in-network for the
 21 patient—

22 “(I) to provide to the patient at the time
 23 of scheduling the opportunity to inform the hos-
 24 pital that they would like in-network treatment
 25 only for the procedure; and

1 “(II) if such treatment is not available at
2 the time of the procedure despite the patient in-
3 forming the hospital that they would like such
4 treatment at the time of scheduling, to provide
5 for payment by the hospital of any additional
6 cost to the patient, group health plan, or group
7 or individual health insurance coverage for the
8 procedure as a result of any treatment that is
9 not in-network.

10 “(ii) For purposes of this subparagraph, the
11 term ‘non-emergency procedure’ means examination
12 or treatment for a medical condition (other than an
13 emergency medical condition, as defined in section
14 1867(e)(1)).”.

15 (b) EFFECTIVE DATE.—The amendments made by
16 subsection (a) shall take effect on the date of the enact-
17 ment of this Act and apply to contracts entered into or
18 renewed on or after the date that is six months after such
19 date of enactment.

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