117TH CONGRESS
2D SESSION

S. 4067

To amend title XI of the Social Security Act to improve access to care for all Medicare and Medicaid beneficiaries through models tested under the Center for Medicare and Medicaid Innovation, and for other purposes.

IN THE SENATE OF THE UNITED STATES

APRIL 7, 2022

Mr. BOOKER (for himself, Mr. BROWN, and Mr. PADILLA) introduced the following bill; which was read twice and referred to the Committee on Finance

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A BILL

To amend title XI of the Social Security Act to improve access to care for all Medicare and Medicaid beneficiaries through models tested under the Center for Medicare and Medicaid Innovation, and for other purposes.

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 ''John Lewis Equality in Medicare and Medicaid Treatment Act of 2022''.

SEC. 2. IMPROVING ACCESS TO CARE FOR MEDICARE AND MEDICAID BENEFICIARIES.

Section 1115A of the Social Security Act (42 U.S.C. 1315a) is amended—

(1) in subsection (a)—

(A) in paragraph (1), by inserting ''advance health equity and'' before ''improve the coordination''; and

(B) in paragraph (3)—

(i) by inserting ''(including the Office of Minority Health of the Centers for Medicare & Medicaid Services, the Office of Rural Health Policy of the Health Resources and Services Administration, and the Office on Women's Health of the Department of Health and Human Services)'' after ''relevant Federal agencies''; and

(ii) by striking ''experts with expertise in medicine'' and inserting ''experts with expertise in medicine, the causes of health disparities and the social determinants of health, and'';

(2) in subsection (b)—

(A) in paragraph (2)—

(i) in subparagraph (A)—

(I) by inserting the following after the first sentence: ''Prior to selecting a model under this paragraph, the Secretary shall consult with the Office of Minority Health of the Centers for Medicare & Medicaid Services, the Office of Rural Health Policy of the Health Resources and Services Administration, and the Office on Women's Health of the Department of Health and Human Services to ensure that models under consideration address health disparities and social determinants of health as appropriate for populations to be cared for under the model.'';

(II) by inserting ''and, for models for which testing begins on or after January 1, 2023, address health equity as well as improving access to care received by individuals receiving benefits under such title'' after ''applicable title''; and

(III) by adding at the end the following: ''The models selected under

this subparagraph shall include the social determinants of health payment model described in subsection (h), the testing of which shall begin not later than December 31, 2023.''; and

(ii) in subparagraph (C), by adding at the end the following new clauses:

''(ix) Whether the model will affect access to care from providers and suppliers caring for high risk patients or operating in underserved areas.

''(x) Whether the model has the potential to reduce health disparities, including minority and rural health disparities.'';

(B) in paragraph (3)(B)—

(i) in clause (i), by inserting ''or health equity'' after ''quality of care'';

(ii) in clause (ii), by inserting ''or increasing health inequities'' after ''quality of care''; and

(iii) in clause (iii), by inserting ''or health equity'' after ''quality of care''; and

(C) in paragraph (4)(A)—

(i) in clause (i), by striking ''; and'' and inserting a semicolon;

(ii) in clause (ii), by striking the period and inserting ''; and''; and

(iii) by adding at the end the following new clause:

''(iii) for models for which testing begins on or after January 1, 2023, the extent to which the model improves health equity.'';

(3) in subsection (c)—

(A) in paragraph (1)—

(i) in subparagraph (A), by inserting ''or, beginning on or after January 1, 2023, increasing health inequities'' before the semicolon; and

(ii) in subparagraph (B), by inserting ''or, beginning on or after January 1, 2023, health equity'' after ''patient care''; and

(B) in paragraph (3), by inserting ''or increase health disparities experienced by beneficiaries, including low-income, minority, or rural beneficiaries, or that such expansion would improve health equity'' before the period;

(4) in subsection (g), by adding at the end the following: ''For reports submitted after the date of

enactment of the John Lewis Equality in Medicare and Medicaid Treatment Act of 2022, each such report shall include information on the following:

''(1) The interventions that address social determinants of health, health disparities, or health equity in payment models selected by the CMI for testing under this section.

''(2) Estimated Federal savings achieved through reducing disparities, including rural and minority health disparities, improving health equity, or addressing social determinants of health.

''(3) The effectiveness of interventions in mitigating negative health outcomes and higher costs associated with social determinants of health within models selected by the Center for Medicare and Medicaid Innovation for testing.

''(4) Other areas determined appropriate by the Secretary.''; and

(5) by adding at the end the following new subsection:

''(h) SOCIAL DETERMINANTS OF HEALTH PAYMENT MODEL.—

''(1) IN GENERAL.—The social determinants of health payment model described in this subsection is a payment model that tests each of the payment and

service delivery innovations described in paragraph (2) in a region determined appropriate by the Secretary.

''(2) PAYMENT AND SERVICE DELIVERY INNOVATIONS DESCRIBED.—For purposes of paragraph (1), the payment and service delivery innovations described in this clause are the following:

''(A) Payment and service delivery innovations for behavioral health services, focusing on gathering actionable data to address the higher costs associated with beneficiaries with diagnosed behavioral conditions.

''(B) Payment and service delivery innovations targeting conditions or comorbidities of individuals entitled or enrolled under the Medicare program under title XVIII and enrolled under a State plan under the Medicaid program under title XIX to increase capacity in underserved areas.

''(C) Payment and service delivery innovations targeting conditions or comorbidities of applicable individuals to increase capacity in underserved areas.

''(D) Payment and service delivery innovations targeted on Medicaid eligible pregnant

and postpartum women, up to one year after delivery.''.

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