

## HR 4994

### Medicare and Medicaid Extenders Act of 2010

**Congress:** 111 (2009–2011, Ended)

**Chamber:** House

**Policy Area:** Taxation

**Introduced:** Apr 13, 2010

**Current Status:** Became Public Law No: 111-309.

**Latest Action:** Became Public Law No: 111-309. (Dec 15, 2010)

**Law:** 111-309 (Enacted Dec 15, 2010)

**Official Text:** <https://www.congress.gov/bill/111th-congress/house-bill/4994>

### Sponsor

**Name:** Rep. Lewis, John [D-GA-5]

**Party:** Democratic • **State:** GA • **Chamber:** House

### Cosponsors (20 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Becerra, Xavier [D-CA-31]	D · CA		Apr 13, 2010
Rep. Berkley, Shelley [D-NV-1]	D · NV		Apr 13, 2010
Rep. Crowley, Joseph [D-NY-7]	D · NY		Apr 13, 2010
Rep. Davis, Danny K. [D-IL-7]	D · IL		Apr 13, 2010
Rep. Higgins, Brian [D-NY-27]	D · NY		Apr 13, 2010
Rep. Kind, Ron [D-WI-3]	D · WI		Apr 13, 2010
Rep. Larson, John B. [D-CT-1]	D · CT		Apr 13, 2010
Rep. Levin, Sander M. [D-MI-12]	D · MI		Apr 13, 2010
Rep. McDermott, Jim [D-WA-7]	D · WA		Apr 13, 2010
Rep. Meek, Kendrick B. [D-FL-17]	D · FL		Apr 13, 2010
Rep. Neal, Richard E. [D-MA-2]	D · MA		Apr 13, 2010
Rep. Pascrell, Bill, Jr. [D-NJ-8]	D · NJ		Apr 13, 2010
Rep. Pomeroy, Earl [D-ND-At Large]	D · ND		Apr 13, 2010
Rep. Rangel, Charles B. [D-NY-15]	D · NY		Apr 13, 2010
Rep. Sánchez, Linda T. [D-CA-39]	D · CA		Apr 13, 2010
Rep. Schwartz, Allyson Y. [D-PA-13]	D · PA		Apr 13, 2010
Rep. Stark, Fortney Pete [D-CA-13]	D · CA		Apr 13, 2010
Rep. Tanner, John S. [D-TN-8]	D · TN		Apr 13, 2010
Rep. Van Hollen, Chris [D-MD-8]	D · MD		Apr 13, 2010
Rep. Yarmuth, John A. [D-KY-3]	D · KY		Apr 13, 2010

## Committee Activity

Committee	Chamber	Activity	Date
Budget Committee	House	Referred To	Apr 13, 2010
Finance Committee	Senate	Discharged From	Dec 8, 2010
Ways and Means Committee	House	Referred To	Apr 13, 2010

## Subjects & Policy Tags

### Policy Area:

Taxation

## Related Bills

*No related bills are listed.*

**(This measure has not been amended since it was passed by the Senate on December 8, 2010. The summary of that version is repeated here.)**

Medicare and Medicaid Extenders Act of 2010 - **Title I: Extensions** - (Sec. 101) Amends title XVIII (Medicare) of the Social Security Act (SSA) to set the 2011 update to the single conversion factor in the formula for the physicians' fee schedule at zero (thus freezing the physician payment update for 2011). Requires the conversion factor for 2012 and subsequent years to be computed as if the zero update for 2011 had never applied.

(Sec. 102) Amends the Tax Relief and Health Care Act of 2006, as modified by other federal law, to extend section 508 hospital reclassifications through FY2011. ("Section 508" refers to Section 508 of the Medicare Modernization Act of 2003 [MMA], which allows the temporary reclassification of a hospital with a low Medicare area wage index, for reimbursement purposes, to a nearby location with a higher Medicare area wage index, so that the "Section 508 hospital" will receive the higher Medicare reimbursement rate.)

(Sec. 103) Extends through calendar 2011 the 1.0 floor on geographic indexing adjustments to the work portion of the physician fee schedule.

(Sec. 104) Extends through December 31, 2011, the process allowing exceptions to limitations on medically necessary therapy caps.

(Sec. 105) Amends the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000 to extend until January 1, 2012, an exception to a payment rule that permits laboratories to receive direct Medicare reimbursement when providing the technical component of certain physician pathology services that had been outsourced by certain (rural) hospitals.

(Sec. 106) Amends SSA title XVIII to extend the bonus and increased payments for ground ambulance services until January 1, 2012.

Amends the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) to extend the payment of certain urban air ambulance services until January 1, 2012.

Extends increased payments for super rural ambulance services until January 1, 2012.

(Sec. 107) Amends MIPPA to extend the physician fee schedule mental health add-on payment provision through December 31, 2011.

(Sec. 108) Extends through 2011 hold harmless provisions under the prospective payment system for hospital outpatient department services.

(Sec. 109) Amends the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, as modified by other federal law, to extend from July 1, 2010, until July 1, 2012, the reasonable cost reimbursement for clinical diagnostic laboratory service for qualifying rural hospitals with under 50 beds.

(Sec. 110) Amends SSA title XIX (Medicaid) to extend the Qualifying Individual (Q1) Program through December 31, 2011, at specified allocations.

(Sec. 111) Extends the Transitional Medical Assistance (TMA) Program through December 31, 2011.

(Sec. 112) Amends the Public Health Service Act to extend through FY2013 the authorization of appropriations for: (1) type I diabetes research; and (2) diabetes prevention and treatment through Indian health facilities.

**Title II: Other Provisions** - (Sec. 201) Amends the Patient Protection and Affordable Care Act (PPACA) to apply to elections made on and after enactment of PPACA the 12-month special Medicare part B (Supplementary Medical Insurance) enrollment period (under title XVIII [Medicare] of the Social Security Act [SSA]) for military retirees, their spouses (including widows/widowers), and dependent children, who are otherwise eligible for TRICARE (the health care plan under the Department of Defense [DOD]) and entitled to Medicare part A (Hospital Insurance) based on disability or end stage renal disease (ESRD), but who have declined Medicare part B (Supplementary Medical Insurance).

(Sec. 202) Repeals the delay until FY2012 of the implementation of Version 4 of the Resource Utilization Groups (RUG-IV) for purposes of reimbursing skilled nursing facilities (SNFs) under Medicare. Allows RUG-IV to go into effect on October 1, 2010.

(Sec. 203) Revises specified requirements for reallocating unused residency positions to qualifying hospitals for primary care residents for purposes of payments to hospitals for graduate medical education (GME) costs. Applies such requirements to hospitals which are members of the same affiliated group. Makes the reference level for each such hospital the reference resident level with respect to the cost reporting period that results in the smallest difference between such level and the otherwise applicable resident limit.

(Sec. 204) Amends the Public Health Service Act and SSA title XIX (Medicaid) to require the inclusion of orphan drugs for rare diseases or conditions among covered outpatient drugs under the 340B drug discount program (which limits the cost of covered outpatient drugs to certain federal grantees) for eligible children's hospitals.

(Sec. 205) Makes technical corrections to SSA titles XIX and XXI (Children's Health Insurance Program) (CHIP).

Repeals the requirement that Medicaid agencies exclude individuals or entities from participating in Medicaid for a specified period of time if the entity or individual owns, controls, or manages an entity that: (1) has failed to repay overpayments during a specified period; (2) is suspended, excluded, or terminated from participation in any Medicaid program; or (3) is affiliated with an individual or entity that has been suspended, excluded, or terminated from Medicaid participation.

Delays until calendar 2014 the increase from 100% to 133% of the income official poverty line applicable to a family of the size involved of the income level the state must establish with respect to a Medicaid group containing children born after September 30, 1983 (or, at state option, after any earlier date), who have attained between 6 and 19 years of age.

Amends the Children's Health Insurance Program Reauthorization Act of 2009 with respect to the requirement that the Secretary of Health and Human Services (HHS) calculate or publish any national or state-specific error rate based on the application of the federal payment error rate measurement (PERM) requirements to CHIP. Declares that the Secretary of Health and Human Services is not required to calculate or publish a national or a state-specific error rate for FY2009 or FY2010.

Revises requirements for CHIP coverage of the children of state employees as targeted low-income children. Repeals the

requirement that the hardship exception in favor of such a child, where the annual aggregate amount of premiums and cost-sharing imposed for coverage of the child's family would exceed 5% of the family's income for the year involved, be determined only on a case-by-case basis.

Revises requirements for calculation of the net average allowable costs of a state in the formula for determining federal payments to states to encourage the adoption and use of certified electronic health record (EHR) technology.

(Sec. 206) Makes appropriations to the Secretary of HHS for the Centers for Medicare and Medicaid Services Program Management Account with respect to Medicare claims reprocessing.

(Sec. 207) Decreases the amounts available for expenditure from the Medicare Improvement Fund for FY2015.

(Sec. 208) Amends the Internal Revenue Code to raise the ceiling on the increase allowed in the tax imposed as a result of excess advance payments of the health insurance tax credit under PPACA to a taxpayer whose household income is less than 500% (currently, less than 400%) of the poverty line for the size of the family involved.

## Actions Timeline

---

- **Dec 15, 2010:** Signed by President.
- **Dec 15, 2010:** Became Public Law No: 111-309.
- **Dec 10, 2010:** Presented to President.
- **Dec 9, 2010:** Mr. Stark moved that the House suspend the rules and agree to the Senate amendments. (consideration: CR H8267-8273, H8274)
- **Dec 9, 2010:** DEBATE - The House proceeded with forty minutes of debate on the motion to suspend the rules and agree to the Senate amendments to H.R. 4994.
- **Dec 9, 2010:** At the conclusion of debate, the Yeas and Nays were demanded and ordered. Pursuant to the provisions of clause 8, rule XX, the chair announced that further proceedings on the motion would be postponed.
- **Dec 9, 2010:** Resolving differences -- House actions: On motion that the House suspend the rules and agree to the Senate amendments Agreed to by the Yeas and Nays: (2/3 required): 409 - 2 (Roll no. 626). (text as House agreed to Senate amendments: CR H8267-8269)
- **Dec 9, 2010:** On motion that the House suspend the rules and agree to the Senate amendments Agreed to by the Yeas and Nays: (2/3 required): 409 - 2 (Roll no. 626). (text as House agreed to Senate amendments: CR H8267-8269)
- **Dec 9, 2010:** Motion to reconsider laid on the table Agreed to without objection.
- **Dec 9, 2010:** Cleared for White House.
- **Dec 8, 2010:** Senate Committee on Finance discharged by Unanimous Consent. (consideration: CR S8631-8634)
- **Dec 8, 2010:** Senate Committee on Finance discharged by Unanimous Consent. (consideration: CR S8631-8634)
- **Dec 8, 2010:** Measure laid before Senate by unanimous consent. (consideration: CR S8631-8634)
- **Dec 8, 2010:** Passed/agreed to in Senate: Passed Senate with an amendment and an amendment to the Title by Unanimous Consent. (text: CR S8632-8634)
- **Dec 8, 2010:** Passed Senate with an amendment and an amendment to the Title by Unanimous Consent. (text: CR S8632-8634)
- **Dec 8, 2010:** Message on Senate action sent to the House.
- **Apr 15, 2010:** Received in the Senate and Read twice and referred to the Committee on Finance.
- **Apr 14, 2010:** Mr. Lewis (GA) moved to suspend the rules and pass the bill, as amended.
- **Apr 14, 2010:** Considered under suspension of the rules. (consideration: CR H2531-2535)
- **Apr 14, 2010:** DEBATE - The House proceeded with forty minutes of debate on H.R. 4994.
- **Apr 14, 2010:** At the conclusion of debate, the Yeas and Nays were demanded and ordered. Pursuant to the provisions of clause 8, rule XX, the Chair announced that further proceedings on the motion would be postponed.
- **Apr 14, 2010:** Considered as unfinished business. (consideration: CR H2551-2552)
- **Apr 14, 2010:** Passed/agreed to in House: On motion to suspend the rules and pass the bill, as amended Agreed to by the Yeas and Nays: (2/3 required): 399 - 9 (Roll no. 200). (text: CR H2531-2533)
- **Apr 14, 2010:** On motion to suspend the rules and pass the bill, as amended Agreed to by the Yeas and Nays: (2/3 required): 399 - 9 (Roll no. 200). (text: CR H2531-2533)
- **Apr 14, 2010:** Motion to reconsider laid on the table Agreed to without objection.
- **Apr 13, 2010:** Introduced in House
- **Apr 13, 2010:** Referred to the Committee on Ways and Means, and in addition to the Committee on the Budget, 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.
- **Apr 13, 2010:** Referred to House Ways and Means
- **Apr 13, 2010:** Referred to House Budget