

S 2409

Medicare and Medicaid Improvements and Adjustments Act of 2015

Congress: 114 (2015–2017, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Dec 16, 2015

Current Status: Read twice and referred to the Committee on Finance.

Latest Action: Read twice and referred to the Committee on Finance. (Dec 16, 2015)

Official Text: <https://www.congress.gov/bill/114th-congress/senate-bill/2409>

Sponsor

Name: Sen. Wyden, Ron [D-OR]

Party: Democratic • **State:** OR • **Chamber:** Senate

Cosponsors (2 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Cantwell, Maria [D-WA]	D · WA		Dec 17, 2015
Sen. Murray, Patty [D-WA]	D · WA		Dec 17, 2015

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Dec 16, 2015

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
114 HR 670	Related bill	Sep 21, 2016: Received in the Senate and Read twice and referred to the Committee on Finance.
114 HR 4273	Identical bill	Dec 18, 2015: Referred to the Subcommittee on Health.

Medicare and Medicaid Improvements and Adjustments Act of 2015

This bill amends titles XVIII (Medicare) and XIX (Medicaid) of the Social Security Act to modify payment rules and other provisions related to the Medicare and Medicaid programs.

The bill includes off-campus outpatient department (OPD) services in Medicare's prospective payment system (in which predetermined amounts form the basis of payment) with respect to departments that are under development.

The existing Medicare payment adjustment for cancer hospitals shall apply to off-campus OPDs.

The bill temporarily prohibits specified Medicare payment adjustments related to competitive acquisition programs for certain wheelchair accessories.

In addition, the bill modifies provisions related to: (1) reimbursement under Medicare for certain drugs furnished through durable medical equipment (DME), (2) Medicare payment rules for certain radiation therapy services, and (3) the treatment of Medicaid supplemental needs trusts.

The bill expands criminal penalties and civil monetary penalties for certain acts involving federal health care programs.

With respect to negative Medicare payment adjustments for physicians and hospitals that fail to comply with certain requirements related to electronic health records (EHR), the bill authorizes a temporary blanket exception.

A patient encounter occurring at an ambulatory surgical center shall not be used to determine whether an eligible professional qualifies as a meaningful EHR user. This prohibition applies until a specified period has passed following a determination by the Department of Health and Human Services that certified EHR technology is applicable to that setting.

Current law limits state reimbursement for DME under Medicaid to Medicare payment rates beginning January 1, 2019. The bill accelerates this limitation such that it begins October 1, 2018.

Actions Timeline

- **Dec 16, 2015:** Introduced in Senate
- **Dec 16, 2015:** Read twice and referred to the Committee on Finance.