

HR 3037

Hospice Care Access Improvement Act of 2015

Congress: 114 (2015–2017, Ended)

Chamber: House

Policy Area: Health

Introduced: Jul 13, 2015

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jul 17, 2015)

Official Text: <https://www.congress.gov/bill/114th-congress/house-bill/3037>

Sponsor

Name: Rep. Reed, Tom [R-NY-23]

Party: Republican • **State:** NY • **Chamber:** House

Cosponsors (20 total)

| Cosponsor | Party / State | Role | Date Joined |
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| Rep. Thompson, Mike [D-CA-5] | D · CA | | Jul 13, 2015 |
| Rep. Fitzpatrick, Michael G. [R-PA-8] | R · PA | | Jul 15, 2015 |
| Rep. Hastings, Alcee L. [D-FL-20] | D · FL | | Jul 15, 2015 |
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| Rep. Fortenberry, Jeff [R-NE-1] | R · NE | | Jul 29, 2015 |
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| Rep. Rogers, Harold [R-KY-5] | R · KY | | Jul 29, 2015 |
| Rep. Walorski, Jackie [R-IN-2] | R · IN | | Jul 29, 2015 |
| Rep. Lujan Grisham, Michelle [D-NM-1] | D · NM | | Jul 31, 2015 |
| Rep. Nunes, Devin [R-CA-22] | R · CA | | Jul 31, 2015 |
| Rep. Brat, Dave [R-VA-7] | R · VA | | Sep 8, 2015 |
| Rep. Eshoo, Anna G. [D-CA-18] | D · CA | | Sep 8, 2015 |
| Rep. Huffman, Jared [D-CA-2] | D · CA | | Sep 11, 2015 |
| Rep. McKinley, David B. [R-WV-1] | R · WV | | Sep 11, 2015 |
| Rep. Mullin, Markwayne [R-OK-2] | R · OK | | Sep 11, 2015 |

Committee Activity

| Committee | Chamber | Activity | Date |
|--------------------------|---------|-------------|--------------|
| Ways and Means Committee | House | Referred to | Jul 17, 2015 |

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Summary (as of Jul 13, 2015)

Hospice Care Access Improvement Act of 2015

This bill directs the Department of Health and Human Services (HHS) to select one Medicare administrative contractor to conduct a one-year demonstration program during FY2016 in all hospice programs under the contractor's jurisdiction to test revisions to the methodology for determining hospice payment rates under title XVIII (Medicare) of the Social Security Act contained in the "Fiscal Year 2016 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Requirements," published on May 5, 2015, by the Centers for Medicare & Medicaid Services.

No revisions to the hospice payment methodology may be made for FY2016-FY2017, except for demonstration program purposes. HHS shall implement the proposed hospice payment methodology revisions beginning with FY2018 after:

- taking into account an evaluation of the demonstration program, and
- making any necessary changes to the revisions.

HHS shall implement a process for the medical review of hospice care furnished by a hospice program identified according to certain multiple factors, such as the percentage of patients discharged after receiving hospice care for between 120 and 180 days and who were alive upon discharge.

HHS shall also develop and publish guidance for hospice programs to develop interventions to reduce hospital admissions and visits to hospital emergency departments by hospice patients.

Medicare shall cover pre-hospice evaluation and counseling services performed by a registered nurse employed by a hospice program.

A skilled nursing facility (SNF) shall make a good faith effort to contract with more than one hospice program participating in the Medicare program that provides services in the area served by the SNF, if more than one hospice program is available to serve SNF residents.

SNF residents shall have the right to be fully informed of any financial interest the SNF has in any hospice program to which a resident is referred.

Any hospital discharge planning evaluation must evaluate, for an individual likely to need hospice care, the availability of such care through hospice programs that:

- participate in the Medicare program and serve the area in which the patient resides, and
- request to be listed by the hospital as available.

Actions Timeline

- **Jul 17, 2015:** Referred to the Subcommittee on Health.
- **Jul 13, 2015:** Introduced in House
- **Jul 13, 2015:** Referred to the House Committee on Ways and Means.