

HR 1639

Rural Hospital Closure Relief Act of 2021

Congress: 117 (2021–2023, Ended)

Chamber: House

Policy Area: Health

Introduced: Mar 8, 2021

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Mar 9, 2021)

Official Text: <https://www.congress.gov/bill/117th-congress/house-bill/1639>

Sponsor

Name: Rep. Kinzinger, Adam [R-IL-16]

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

Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Panetta, Jimmy [D-CA-20]	D · CA		Mar 8, 2021
Rep. Davis, Rodney [R-IL-13]	R · IL		Mar 23, 2021
Rep. Lucas, Frank D. [R-OK-3]	R · OK		Mar 23, 2021
Rep. Cole, Tom [R-OK-4]	R · OK		Feb 9, 2022
Rep. McKinley, David B. [R-WV-1]	R · WV		Jun 9, 2022

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Mar 9, 2021
Ways and Means Committee	House	Referred to	Mar 8, 2021

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
117 S 644	Identical bill	Mar 9, 2021: Read twice and referred to the Committee on Finance. (text: CR S1426)

Rural Hospital Closure Relief Act of 2021

This bill allows additional hospitals to qualify as critical access hospitals (CAHs) that receive special payment under Medicare.

Currently, in order to qualify as a CAH under Medicare, a hospital must either (1) be located more than 35 miles (or 15 miles in mountainous regions or areas with only secondary roads) from another hospital, or (2) have been certified prior to January 1, 2006, by the state as a necessary provider of services in the area.

The bill allows a hospital to also qualify if the hospital is a small, rural hospital that (1) serves a health professional shortage area, or a high number of low-income individuals or Medicare or Medicaid beneficiaries; (2) has experienced financial losses for two consecutive years; and (3) attests to having a strategic plan to address financial solvency.

In addition, the Center for Medicare and Medicaid Innovation must test a new delivery and payment model for rural hospitals that promotes financially sustainable access to care and must establish a corresponding transition process for CAHs.

Actions Timeline

- **Mar 9, 2021:** Referred to the Subcommittee on Health.
- **Mar 8, 2021:** Introduced in House
- **Mar 8, 2021:** Referred to the Subcommittee on Health.
- **Mar 8, 2021:** Referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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.