

117TH CONGRESS
1ST SESSION

S. 934

To amend title XVIII of the Social Security Act to improve rural health
clinic payments.

IN THE SENATE OF THE UNITED STATES

MARCH 23, 2021

Mr. WARNER (for himself and Mr. BLUNT) introduced the following bill; which
was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to improve
rural health clinic payments.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Strengthening Rural
5 Health Clinics Act of 2021”.

6 **SEC. 2. RURAL HEALTH CLINIC PAYMENTS.**

7 (a) IN GENERAL.—Section 1833(f)(3) of the Social
8 Security Act (42 U.S.C. 1395l(f)(3)) is amended—

9 (1) in subparagraph (A)—

1 (A) in the matter preceding clause (i), by
2 inserting “(or, in the case of a rural health clin-
3 ic described in subparagraph (B)(ii)(III), in the
4 first year in which the rural health clinic fur-
5 nishes such services)” after “March 31”;

6 (B) in clause (i), by striking subclauses (I)
7 and (II) and inserting the following:

8 “(I) with respect to a rural
9 health clinic that had a per visit pay-
10 ment amount established for services
11 furnished in 2020—

12 “(aa) the per visit payment
13 amount applicable to such rural
14 health clinic for rural health clin-
15 ic services furnished in 2020, in-
16 creased by the percentage in-
17 crease in the MEI applicable to
18 primary care services furnished
19 as of the first day of 2021; or

20 “(bb) the limit described in
21 paragraph (2)(A); and

22 “(II) with respect to a rural
23 health clinic that did not have a per
24 visit payment amount established for
25 services furnished in 2020—

1 “(aa) the per visit payment
 2 amount applicable to such rural
 3 health clinic for rural health clin-
 4 ic services furnished in 2021 (or,
 5 in the case of a rural health clin-
 6 ic described in subparagraph
 7 (B)(ii)(III), the per visit payment
 8 amount applicable to such rural
 9 health clinic for rural health clin-
 10 ic services furnished in the first
 11 year in which such rural health
 12 clinic furnishes such services); or

13 “(bb) the limit described in
 14 paragraph (2)(A) (or, in the case
 15 of a rural health clinic described
 16 in subparagraph (B)(ii)(III), the
 17 limit established under paragraph
 18 (2) for such first year);” and

19 (C) in clause (ii)(I), by striking “under
 20 clause (i)(I)” and inserting “under subclause
 21 (I) or (II) of clause (i), as applicable,”;
 22 (2) in subparagraph (B)—

23 (A) in the matter preceding clause (i), by
 24 striking “2019, was” and inserting “2020”;

25 (B) in clause (i)—

1 (i) by inserting “was” after “(i)”; and

2 (ii) by inserting the following before
3 the semicolon: “, or, in the case of a rural
4 health clinic described in clause (ii)(III),
5 had an agreement described in such clause
6 with such a hospital”;

7 (C) by striking clause (ii) and inserting the
8 following:

9 “(ii)(I) was enrolled under section
10 1866(j) (including temporary enrollment
11 during the emergency period described in
12 section 1135(g)(1)(B) for such period);

13 “(II) submitted an application for en-
14 rollment under section 1866(j) (or re-
15 quested such a temporary enrollment for
16 such period) that was received not later
17 than December 31, 2020; or

18 “(III) as determined by the Secretary,
19 had a binding written agreement with an
20 outside unrelated party for the construc-
21 tion, purchase, lease, or other establish-
22 ment of such a rural health clinic as of
23 that date.”; and

24 (3) by adding at the end the following new sub-
25 paragraph:

1 “(C)(i) In determining whether a provider-based
2 rural health clinic had an agreement described in subpara-
3 graph (B)(ii)(III) as of December 31, 2020, the Secretary
4 may consider appropriate evidence relating to the agree-
5 ment submitted by the provider.

6 “(ii) Not later than 60 days after the date of the en-
7 actment of this subparagraph, the Secretary shall obtain
8 an attestation (pursuant to section 413.65(b)(3) of title
9 42, Code of Federal Regulations, or any successor regula-
10 tion) that such provider-based rural health clinic meets,
11 or will meet, the requirements of a provider-based rural
12 health clinic specified in section 413.65 of title 42, Code
13 of Federal Regulations, or any successor regulation.

14 “(iii) The Secretary may audit, as appropriate, the
15 compliance with subparagraph (B)(ii)(III) with respect to
16 each provider-based rural health clinic to which such sub-
17 paragraph applies. If the Secretary finds as a result of
18 an audit under this clause that the applicable require-
19 ments were not met with respect to such provider-based
20 rural health clinic, the provider-based rural health clinic
21 shall no longer be considered to be described in such sub-
22 paragraph for purposes of this paragraph.”.

23 (b) EFFECTIVE DATE.—The amendments made by
24 this section shall take effect as if included in the enact-

1 ment of the Consolidated Appropriations Act, 2021 (Pub-
2 lic Law 116–260).

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