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113TH CONGRESS
1ST SESSION

S. 1557

To amend the Public Health Service Act to reauthorize support for graduate medical education programs in children's hospitals.

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 27, 2013

Mr. CASEY (for himself, Mr. ISAKSON, Mr. WHITEHOUSE, Mr. ALEXANDER, Mr. BROWN, Mr. KIRK, Mr. HARKIN, Mr. BLUNT, Ms. WARREN, Mr. ROBERTS, Mr. BLUMENTHAL, Mr. MURPHY, and Mr. REED) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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A BILL

To amend the Public Health Service Act to reauthorize support for graduate medical education programs in children's hospitals.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Children's Hospital GME Support Reauthorization Act of 2013".

SEC. 2. PROGRAM OF PAYMENTS TO CHILDREN'S HOSPITALS THAT OPERATE GRADUATE MEDICAL EDUCATION PROGRAMS.

(a) IN GENERAL.—Section 340E of the Public Health Service Act (42 U.S.C. 256e) is amended—

(1) in subsection (a), by striking ''through 2005 and each of fiscal years 2007 through 2011'' and inserting ''through 2005, each of fiscal years 2007 through 2011, and each of fiscal years 2014 through 2018''; and

(2) in subsection (f)—

(A) in paragraph (1)(A)—

(i) in clause (iii), by striking ''and'';

(ii) in clause (iv), by striking the period and inserting ''; and''; and

(iii) by adding at the end the following:

''(v) for each of fiscal years 2014 through 2018, $100,000,000.''; and

(B) in paragraph (2)—

(i) in subparagraph (C), by striking ''and'';

(ii) in subparagraph (D), by striking the period and inserting ''; and''; and

(iii) by adding at the end the following:

"(E) for each of fiscal years 2014 through 2018, $200,000,000.".

(b) REPORT TO CONGRESS.—Section 340E(b)(3)(D) of the Public Health Service Act (42 U.S.C. 256e(b)(3)(D)) is amended by striking "Not later than the end of fiscal year 2011" and inserting "Not later than the end of fiscal year 2018".

SEC. 3. SUPPORT OF GRADUATE MEDICAL EDUCATION PROGRAMS IN CERTAIN HOSPITALS.

Section 340E of the Public Health Service Act (42 U.S.C. 256e) is amended by adding at the end the following:

"(h) ADDITIONAL PROVISIONS.—

"(1) IN GENERAL.—The Secretary is authorized to make available up to 25 percent of the total amounts in excess of $245,000,000 appropriated under paragraphs (1) and (2) of subsection (f), but not to exceed $7,000,000, for payments to hospitals qualified as described in paragraph (2), for the direct and indirect expenses associated with operating approved graduate medical residency training programs, as described in subsection (a).

"(2) QUALIFIED HOSPITALS.—

"(A) IN GENERAL.—To qualify to receive payments under paragraph (1), a hospital shall be a free-standing hospital—

"(i) with a Medicare payment agreement and that is excluded from the Medicare inpatient hospital prospective payment system pursuant to section 1886(d)(1)(B) of the Social Security Act and its accompanying regulations;

"(ii) whose inpatients are predominantly individuals under 18 years of age;

"(iii) that has an approved medical residency training program as defined in section 1886(h)(5)(A) of the Social Security Act; and

"(iv) that is not otherwise qualified to receive payments under this section or section 1886(h) of the Social Security Act.

"(B) ESTABLISHMENT OF RESIDENCY CAP.—In the case of a freestanding children's hospital that, on the date of enactment of this subsection, meets the requirements of subparagraph (A) but for which the Secretary has not determined an average number of full-time equivalent residents under section 1886(h)(4) of

the Social Security Act, the Secretary may establish such number of full-time equivalent residents for the purposes of calculating payments under this subsection.

"(3) PAYMENTS.—Payments to hospitals made under this subsection shall be made in the same manner as payments are made to children's hospitals, as described in subsections (b) through (e).

"(4) PAYMENT AMOUNTS.—The direct and indirect payment amounts under this subsection shall be determined using per resident amounts that are no greater than the per resident amounts used for determining direct and indirect payment amounts under subsection (a).

"(5) REPORTING.—A hospital receiving payments under this subsection shall be subject to the reporting requirements under subsection (b)(3).

"(6) REMAINING FUNDS.—

"(A) IN GENERAL.—If the payments to qualified hospitals under paragraph (1) for a fiscal year are less than the total amount made available under such paragraph for that fiscal year, any remaining amounts for such fiscal year may be made available to all hospitals par-

ticipating in the program under this subsection or subsection (a).

"(B) QUALITY BONUS SYSTEM.—For purposes of distributing the remaining amounts described in subparagraph (A), the Secretary may establish a quality bonus system, whereby the Secretary distributes bonus payments to hospitals participating in the program under this subsection or subsection (a) that meet standards specified by the Secretary, which may include a focus on quality measurement and improvement, interpersonal and communications skills, delivering patient-centered care, and practicing in integrated health systems, including training in community-based settings. In developing such standards, the Secretary shall collaborate with relevant stakeholders, including program accrediting bodies, certifying boards, training programs, health care organizations, health care purchasers, and patient and consumer groups.".

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