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(Original Signature of Member)

117TH CONGRESS
1ST SESSION

H. R. _____

To prohibit the Secretary of Health and Human Services from taking certain actions with respect to the clinical labor price, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. RUSH introduced the following bill; which was referred to the Committee on _____

A BILL

To prohibit the Secretary of Health and Human Services from taking certain actions with respect to the clinical labor price, and for other purposes.

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 “Medicare Stability for
5 Patients and Providers Act”.

1 **SEC. 2. PROHIBITING IMPLEMENTATION OF CERTAIN**
2 **LABOR PRICE UPDATES UNDER THE 2022**
3 **PHYSICIAN FEE SCHEDULE; REPORT.**

4 (a) IN GENERAL.—Notwithstanding any other provi-
5 sion of law, the Secretary of Health and Human Services
6 shall maintain clinical labor prices under the 2022 physi-
7 cian fee schedule and not take any action to implement,
8 finalize, or enforce the clinical labor price updates of the
9 final rule published by the Centers for Medicare & Med-
10 icaid Services on November 19, 2021, entitled “Medicare
11 Program; CY 2022 Payment Policies Under the Physician
12 Fee Schedule and Other Changes to Part B Payment Poli-
13 cies; Medicare Shared Savings Program Requirements;
14 Provider Enrollment Regulation Updates; Provider and
15 Supplier Prepayment and Post-Payment Medical Review
16 Requirements”.

17 (b) REPORT.—Not later than 12 months after the
18 date of the enactment of this Act, the Secretary of Health
19 and Human Services shall submit to Congress a report
20 on the physician fee schedule under the Medicare program
21 under section 1848 of the Social Security Act (42 U.S.C.
22 1395w–4), including—

23 (1) an analysis of provider reimbursement
24 under such physician fee schedule and whether or
25 not such reimbursement has sufficiently taken into
26 account medical inflation over the last 20 years;

1 (2) an analysis of whether significant annual
2 changes in provider reimbursement are a cause of
3 site-of-service migration and disruptions in patient
4 access and cost-sharing; and

5 (3) based on paragraphs (1) and (2), rec-
6 ommendations for reforming such fee schedule to
7 minimize significant annual changes in provider re-
8 imbursement and appropriately account for inflation
9 updates.