

AMENDMENT NO. _____ Calendar No. _____

Purpose: To ensure consistent quality accreditation requirements for providers contracting with Medicare Advantage plans and State Medicaid programs.

IN THE SENATE OF THE UNITED STATES—111th Cong., 1st Sess.

H. R. 3590

To amend the Internal Revenue Code of 1986 to modify the first-time homebuyers credit in the case of members of the Armed Forces and certain other Federal employees, and for other purposes.

Referred to the Committee on _____ and
ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT intended to be proposed by Mr. CASEY to the
amendment (No. 2786) proposed by Mr. REID

Viz:

- 1 On page 1133, between lines 22 and 23, insert the
- 2 following:

1 **SEC. 3511. CONSISTENT QUALITY ACCREDITATION RE-**
2 **QUIREMENTS FOR PROVIDERS CON-**
3 **TRACTING WITH MEDICARE ADVANTAGE**
4 **PLANS AND STATE MEDICAID PROGRAMS.**

5 (a) MEDICARE ADVANTAGE.—Section
6 1854(a)(6)(B)(iii) of the Social Security Act (42 U.S.C.
7 1395w–24(a)(6)(B)(iii)) is amended—

8 (1) by striking “In order to” and inserting the
9 following:

10 “(aa) IN GENERAL.—In
11 order to”; and

12 (2) by adding at the end the following:

13 “(bb) QUALITY ASSUR-
14 ANCE.—An MA organization
15 shall not prohibit a particular
16 hospital, physician or other entity
17 within a category of healthcare
18 providers from eligibility to con-
19 tract with the MA organization
20 because of a separate policy of
21 the MA organization that does
22 not recognize an approved na-
23 tionally recognized accreditation
24 organization with the appropriate
25 ‘deeming authority’ from the Sec-
26 retary.”.

1 (b) STATE MEDICAID PLAN REQUIREMENT.—Section
2 1902(a)(23) of the Social Security Act (42 U.S.C.
3 1396a(a)(23)) is amended by inserting “and (C) the State
4 plan and a primary care case-management system (de-
5 scribed in section 1915(b)(1)), a medicaid managed care
6 organization, or a similar entity shall not prohibit a par-
7 ticular hospital, physician or other entity within a category
8 of healthcare providers from being qualified to perform a
9 service or services because of a separate policy of the State
10 plan, system, organization, or entity that does not recog-
11 nize an approved nationally recognized accreditation orga-
12 nization with the appropriate ‘deeming authority’ from the
13 Secretary” after “subsection (g) and in section 1915”.

14 (c) EFFECTIVE DATE.—The amendments made by
15 this section take effect on the date of enactment of this
16 Act and, in the case of MA organizations under part C
17 of title XVIII of the Social Security Act, apply to plan
18 years beginning after that date.