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(Original Signature of Member)

116TH CONGRESS
2D SESSION

H. R. _____

To provide for a study by the National Academy of Medicine on ambulance diversions, 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 provide for a study by the National Academy of Medicine on ambulance diversions, and for other purposes.

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 ''Research Empirical Solutions to End Ambulance Reversals from Closed Hospitals Act of 2020'' or the ''RESEARCH Act of 2020''.

SEC. 2. STUDY ON AMBULANCE DIVERSIONS.

(a) STUDY.—The Secretary of Health and Human Services shall seek to enter into an agreement with the

National Academy of Medicine under which the National Academy agrees to conduct a study on ambulance diversions, including—

(1) whether the number of such diversions have increased over the last 10 years, including whether the number of such diversions have increased at the national, regional, State, and local level;

(2) what steps, if any, have been taken to reduce the number of such diversions;

(3) whether such diversions disproportionately impact medically underserved communities (as defined in section 799B of the Public Health Service Act (42 U.S.C. 295p)); and

(4) what actions the Federal Government should take—

(A) to reduce the number of ambulance diversions; and

(B) to improve the health and safety of patients affected by ambulance diversions.

(b) CONSULTATION.—The agreement under subsection (a) shall require the study under such agreement to be conducted in consultation with—

(1) the Assistant Secretary for Planning and Evaluation of the Department of Health and Human Services;

(2) the Assistant Secretary for Preparedness and Response of the Department of Health and Human Services; and

(3) the Director of the Office of Emergency Care Research of the National Institutes of Health.

(c) REPORT.—The agreement under subsection (a) shall provide for—

(1) the submission to the congressional committees of jurisdiction, not later than 24 months after the date of enactment of this Act, of a report on the results of the study under such agreement; and

(2) the inclusion in such report of recommendations on actions the Federal Government should take—

(A) to mitigate the occurrence of ambulance diversions; and

(B) to improve the health and safety of patients affected by ambulance diversions.

(d) DEFINITION.—In this section, the term ''ambulance diversion'' means the temporary closure of a hospital emergency department to incoming ambulances.

SEC. 3. HOSPITAL REPORTING REQUIREMENT.

(a) REPORTING REQUIREMENT.—A hospital shall report to the Secretary of Health and Human Services, in

the case the hospital implements an ambulance diversion on or after January 1, 2021—

(1) how long the diversion was in effect;

(2) the reason for the diversion; and

(3) the number of ambulance calls the hospital diverted while the diversion was in effect.

(b) ENFORCEMENT.—

(1) HOSPITALS.—Section 1886(d)(5) of the Social Security Act (42 U.S.C. 1395ww(d)(5)) is amended by adding at the end the following new subparagraph:

''(M)(i)(I) In the case that the Secretary determines, with respect to a calendar quarter occurring in the period beginning with 2021 and ending with 2024, that a hospital has complied with the provisions of section 3(a) of the RESEARCH Act of 2020 with respect to each ambulance diversion (if any) that occurred during such quarter, the Secretary shall increase, by the percentage specified in subclause (II) for such quarter, the amount otherwise payable to such hospital under paragraph (1)(A) for discharges occurring in the succeeding quarter.

''(II) For purposes of subclause (I), the percentage specified in this subclause is, with respect a calendar quarter occurring in—

''(aa) 2021 or 2022, 1 percent; or

''(bb) 2023 or 2024, 0.5 percent.

''(ii)(I) In the case that the Secretary determines, with respect to a calendar quarter occurring in 2025 or a subsequent year, that a hospital has failed to report an ambulance diversion occurring during such quarter to the Secretary in accordance with section 3(a) of the RESEARCH Act of 2020, the Secretary shall reduce, by the percentage specified in subclause (II) for such quarter, the amount otherwise payable to such hospital under paragraph (1)(A) for discharges occurring in the succeeding quarter.

''(II) For purposes of subclause (I), the percentage specified in this subclause is, with respect a calendar quarter occurring in—

''(aa) 2025, 1 percent; or

''(bb) 2026 or a subsequent year, 2 percent.

''(iii) In this subparagraph, the term 'ambulance diversion' has the meaning given such term in section 2 of the RESEARCH Act of 2020.''.

(2) CRITICAL ACCESS HOSPITALS.—Section 1814(l) of the Social Security Act (42 U.S.C. 1395f(l)) is amended by adding at the end the following new paragraph:

''(6)(A)(i) In the case that the Secretary determines, with respect to a calendar quarter occurring in the period

beginning with 2021 and ending with 2024, that a critical access hospital has complied with the provisions of section 3(a) of the RESEARCH Act of 2020 with respect to each ambulance diversion (if any) that occurred during such quarter, the Secretary shall increase, by the percentage specified in clause (ii) for such quarter, the amount otherwise payable to such hospital under paragraph (1) for services furnished during the succeeding quarter.

''(ii) For purposes of clause (i), the percentage specified in this clause is, with respect a calendar quarter occurring in—

''(I) 2021 or 2022, 1 percent; or

''(II) 2023 or 2024, 0.5 percent.

''(B)(i) In the case that the Secretary determines, with respect to a calendar quarter occurring in 2025 or a subsequent year, that a critical access hospital has failed to report an ambulance diversion occurring during such quarter to the Secretary in accordance with section 3(a) of the RESEARCH Act of 2020, the Secretary shall reduce, by the percentage specified in clause (ii) for such quarter, the amount otherwise payable to such hospital under paragraph (1) for services furnished during the succeeding quarter.

''(ii) For purposes of clause (i), the percentage specified in this clause is, with respect a calendar quarter occurring in—

''(I) 2025, 1 percent; or

''(II) 2026 or a subsequent year, 2 percent.''.

(c) DEFINITION.—In this section:

(1) The term ''ambulance diversion'' has the meaning given to such term in section 2.

(2) The term ''hospital'' means a subsection (d) hospital (as defined in section 1886(d)(1)(B) of the Social Security Act (42 U.S.C. 1395ww(d)(1)(B))), or a critical access hospital (as defined in section 1861(mm) of such Act (42 U.S.C. 1395x(mm))), enrolled under section 1866(j) of such Act (42 U.S.C. 1392cc(j)).