

103^D CONGRESS
1ST SESSION

S. 97

To amend title XVIII of the Social Security Act and title III of the Public Health Service Act to protect and improve the availability and quality of health care in rural areas.

IN THE SENATE OF THE UNITED STATES

JANUARY 21 (legislative day, JANUARY 5), 1993

Mr. HARKIN (for himself and Mr. CONRAD) 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 and title III of the Public Health Service Act to protect and improve the availability and quality of health care in rural areas.

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 “Rural Health Care
5 Protection and Improvement Act of 1993”.

1 **SEC. 2. EXTENSION OF CERTAIN PAYMENT PROVISIONS**
2 **FOR MEDICARE-DEPENDENT SMALL RURAL**
3 **HOSPITALS.**

4 (a) IN GENERAL.—Section 1886(d)(5)(G)(i) of the
5 Social Security Act (42 U.S.C. 1395ww(d)(5)(G)(i)) is
6 amended by striking “March 31, 1993” and inserting
7 “March 31, 1996”.

8 (b) PAYMENT.—Section 1886(b)(3)(D) of such Act
9 (42 U.S.C. 1395ww(b)(3)(D)) is amended by striking
10 “March 31, 1993” and inserting “March 31, 1996”.

11 (c) PERMITTING HOSPITALS TO DECLINE RECLASSI-
12 FICATION.—If any hospital fails to qualify as a medicare-
13 dependent, small rural hospital under section
14 1886(d)(5)(G)(i) of the Social Security Act as a result of
15 a decision by the Medicare Geographic Classification Re-
16 view Board under section 1886(d)(10) of such Act to re-
17 classify the hospital as being located in an urban area for
18 fiscal year 1993 or 1994, the Secretary of Health and
19 Human Services shall—

20 (1) notify such hospital of such failure to qual-
21 ify,

22 (2) provide an opportunity for such hospital to
23 decline such reclassification, and

24 (3) if the hospital declines such reclassification,
25 administer the Social Security Act (other than sec-
26 tion 1886(d)(8)(D)) for fiscal year 1993 or 1994 as

1 if the decision by the Review Board had not oc-
2 curred.

3 (d) EFFECTIVE DATE.—

4 (1) The amendments made by subsections (a)
5 and (b) shall be effective as of January 1, 1992.

6 (2) The amendments made by subsection (c)
7 shall be effective on the date of the enactment of
8 this Act.

9 **SEC. 3. EXTENSION AND EXPANSION OF RURAL HEALTH**
10 **TRANSITION GRANT PROGRAM.**

11 (a) IN GENERAL.—Section 4005(e)(9) of the Omni-
12 bus Budget Reconciliation Act of 1987, as amended by
13 section 6003(g)(1)(B) of the Omnibus Budget Reconcili-
14 ation Act of 1989, is amended—

15 (1) by striking “1989 and” and inserting
16 “1989,”; and

17 (2) by striking “1992” and inserting “1992
18 and \$30,000,000 for each of the fiscal years 1993,
19 1994, 1995, 1996, and 1997”.

20 (b) EFFECTIVE DATE.—The amendments made by
21 subsection (a) shall take effect on the date of the enact-
22 ment of this Act.

1 **SEC. 4. ESTABLISHMENT OF RURAL HEALTH OUTREACH**
2 **GRANT PROGRAM.**

3 (a) IN GENERAL.—Subpart I of part D of title III
4 of the Public Health Service Act (42 U.S.C. 254b et seq.)
5 is amended by adding at the end the following new section:

6 **“SEC. 330A. RURAL HEALTH OUTREACH GRANT PROGRAM.**

7 “(a) IN GENERAL.—The Secretary may make grants
8 to demonstrate the effectiveness of outreach to populations
9 in rural areas that do not normally seek or do not have
10 adequate access to health or mental health services.
11 Grants shall be awarded to enhance linkages, integration,
12 and cooperation in order to provide health or mental
13 health services, to enhance services, or increase access to
14 or utilization of health or mental health services.

15 “(b) MISSION OF THE OUTREACH PROJECTS.—
16 Projects under subsection (a) should be designed to facili-
17 tate integration and coordination of services in or among
18 rural communities in order to address the needs of popu-
19 lations living in rural or frontier communities.

20 “(c) COMPOSITION OF PROGRAM.—

21 “(1) CONSORTIUM ARRANGEMENTS.—Participa-
22 tion in the program established in subsection (a) re-
23 quires the formation of consortium arrangements
24 among 3 or more separate and distinct entities to
25 carry out an outreach project.

26 “(2) CERTAIN REQUIREMENTS.—

1 “(A) A consortium under paragraph (1)
2 must be composed of 3 or more public or pri-
3 vate nonprofit health care or social service pro-
4 viders. Consortium members may include such
5 entities as local health departments, community
6 or migrant health centers, community mental
7 health centers, hospitals or private practices, or
8 other publicly funded health or social services
9 agencies.

10 “(B) Grantees currently receiving support
11 under this program shall continue to be eligible
12 for support.

13 “(d) AUTHORIZATION OF APPROPRIATIONS.—For the
14 purpose of carrying out this section, there are authorized
15 to be appropriated \$50,000,000 for fiscal year 1994, and
16 such sums as may be necessary for each of the fiscal years
17 1995, 1996, 1997 and 1998.”.

18 (b) EFFECTIVE DATE.—The amendment made by
19 subsection (a) shall take effect on the date of the enact-
20 ment of this Act.

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