

CHAMBER HILL

INSIGHTS

House Energy and Commerce
Health Subcommittee
Reviews Medicaid Legislation

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On April 30, 2024, the House Energy and Commerce Health Subcommittee [held](#) a hearing entitled “Legislative Proposals to Increase Medicaid Access and Improve Program Integrity.” This hearing featured a discussion of several bills related to the Medicaid program. Many of the bills on today’s agenda were bipartisan. However, other bills, such as legislation to stop the Biden Administration from implementing its recently finalized [nursing home staffing rule](#) and [Medicaid access rule](#), showed strong partisan disagreements between representatives.

WITNESS TESTIMONY

[Daniel Tsai](#), Deputy Administrator and Director of the Center for Medicaid and CHIP Services, Centers for Medicare & Medicaid Services (CMS)

OPENING STATEMENTS

Health Subcommittee Chair [Brett Guthrie](#) (R-KY)

Health Ranking Member [Anna Eshoo](#) (D-CA)

Full Committee Chair [Cathy McMorris Rodgers](#) (R-WA)

Ranking Member [Frank Pallone](#) (D-NJ)

MEMBER QUESTIONS

Many of the representatives’ questions during today’s hearing focused on legislation to prohibit the implementation of the nursing home staffing rule and the Medicaid access rule. Republican and Democratic representatives split along partisan lines. Regarding the nursing home staffing rule, Republican representatives expressed concerns that the rule will be overburdensome on nursing homes and will harm access to care, especially in rural areas. Democratic representatives and Director Tsai argued that the rule would help ensure residents of nursing homes get quality care, that the rule includes hardship exemptions, and that the rule is implemented over several years to give nursing homes time to come into compliance.

On the Medicaid access rule, Republican representatives argued that the rule's payment adequacy provision would make it harder for home health providers to offer care for those who need it. Democratic Representatives and Director Tsai countered that the rule was ensuring the direct care workforce was supported so they could provide quality care. Director Tsai also noted that the payment adequacy provision will be phased in over time. Even though Democratic members were united in their support for the access rule, it should be noted that Reps. Pallone and Debbie Dingell (D-MI) both argued that more needs to be done to support access to home and community-based services. Also even though none of the bills on the agenda focused on the Biden Administration's finalized [Medicaid eligibility rule](#), Reps. Rodgers and Bob Latta (R-OH) both spoke out about their concerns regarding the cost of implementing this rule.

Representatives discussed legislation related to oversight of the Medicaid program. Republican representatives who spoke on legislation related to this topic were more focused on addressing concerns about improper payments under the Medicaid program. For example, Rep. Morgan Griffith (R-VA) reiterated his support for giving states a portion of recovered improper payments to support their own auditing efforts. Democratic members who spoke on this topic focused more on concerns about oversight of Medicaid managed care organizations (MCOs). For example, Rep. John Sarbanes (D-MD) and Rep. Kim Schrier (D-WA) expressed support for giving CMS more flexibility in what enforcement actions it can use against MCOs beyond cutting off payments entirely, which they argued could hurt access to care in states that use managed care. There were also signs of bipartisanship when it came to bills related to oversight of the Medicaid program. One such sign came in the form of a bill from Rep. Gus Bilirakis (R-FL) and Rep. Angie Craig (D-MN) that would require quarterly verifications of the Social Security Administration's Death Master File to ensure payments are not being made for beneficiaries who are deceased.

Representatives also used today's hearing to highlight bills aimed at improving access and quality of care within the Medicare program. Both Reps. Rodgers and Pallone mentioned their legislation to allow states to provide HCBS to beneficiaries even if they don't have a need for institutional-level care and to require states to report on the status of their HCBS waiting lists. Reps. Dingell and Troy Balderson (R-OH) spoke in support of their legislation to make the Money Follows the Person Program permanent.

LEGISLATION

- [H.R. 124](#), Byron Nash Renal Medullary Carcinoma Awareness of 2023 (Rep. Green). This legislation would support education on the risk of renal medullary carcinoma for individuals who are eligible to receive medical assistance for sickle cell disease under Medicaid.
- [H.R. 468](#), Building America's Health Care Workforce Act (Reps. Guthrie and Dean). This legislation

focused on improving accessibility of health service information and resources for individuals with an intellectual disability.

- [H.R. 3227](#), Ensuring Seniors' Access to Quality Care Act (Reps. Estes and Connolly). This legislation would modify requirements that otherwise prohibit a nursing home from running nurse aide trainings and competency evaluations when the nursing home has been subject to civil monetary penalties, so long as the facility has addressed deficiencies associated with the penalties and has not been found to have deficiencies related to patient harm or quality of care for more than 2 years.
- [H.R. 7513](#), Protecting America's Seniors Access to Care Act (Reps. Fischbach and Pence). This legislation would prohibit the Secretary of HHS from finalizing regulations that would require long-term care facilities to adhere to minimum staffing standards.
- [H.R. 7573](#), Stop Unfair Medicaid Recoveries Act (Rep. Schakowsky). This legislation would repeal the requirement for States to engage in estate recovery practices and limit the ability of States to place liens on a Medicaid beneficiary's property.
- [H.R. 8084](#), To amend title XIX of the Social Security Act to require States to verify certain eligibility criteria for individuals enrolled for medical assistance quarterly, and for other purposes (Reps. Bilirakis and Craig). This legislation would require States to perform quarterly verifications of the Social Security Administration's Death Master File and to disenroll any individuals enrolled for medical assistance under the State plan that are found to be deceased.
- [H.R. 8089](#), To amend title XIX of the Social Security Act to require certain additional provider screening under the Medicaid program (Reps. Garcia and Peters). This legislation would require States to perform quarterly verifications of the Social Security Administration's Death Master File and to remove providers enrolled in the State's Medicaid program that are found to be deceased.
- [H.R. 8094](#), To amend title XIX of the Social Security Act to modify certain asset recovery rules (Rep. Kean). This legislation would modify asset recovery under a State plan, so that States may choose to not pursue adjustments or recoveries of medical assistance through a property lien if, after the death of an individual, that individual's home would be transferred to another individual who is eligible for Medicaid or has an income that is 138 percent of the Federal Poverty Level or below.
- [H.R. 8106](#), To amend title XIX of the Social Security Act to remove the requirement that an individual need an institutional level of care to qualify for home and community-based services under a Medicaid waiver (Reps. McMorris Rodgers and Pallone). This legislation would amend Medicaid's section 1915(c) waivers to allow States to provide home and community-based services to beneficiaries who do not meet an institutional level of care.
- [H.R. 8107](#), To amend title XIX of the Social Security Act to remove certain age restrictions on Medicaid eligibility for working adults with disabilities (Reps. Ciscomani and Gluesenkamp Perez). This legislation

would amend the Medicaid buy-in program to repeal the eligibility pathway's age limit of 65 to allow current beneficiaries to continue to be able to retain coverage through the program.

- [H.R. 8108](#), To amend title XIX of the Social Security Act to require medical assistance under the Medicaid program for certain home and community-based services for military families (Reps. Kiggans and Kaptur). This legislation would require States that currently provide Medicaid coverage for home and community-based services to dependents of military families to maintain the coverage for care in the event that the family moves out of state for active duty.
- [H.R. 8109](#), To amend the Deficit Reduction Act of 2005 to make permanent the Money Follows the Person rebalancing demonstration (Reps. Dingell and Balderson). This legislation would permanently extend the Money Follows the Person rebalancing demonstration, which supports the transition from living in an inpatient facility to HCBS for Long Term Services and Supports (LTSS) eligible individuals.
- [H.R. 8110](#), To amend title XIX of the Social Security Act to make permanent the State option to extend protection against spousal impoverishment for recipients of home and community-based services under Medicaid (Reps. Dingell and James). This legislation would permanently extend spousal impoverishment protections for beneficiaries receiving home and community-based services, akin to current protections for beneficiaries receiving institutional care.
- [H.R. 8111](#), To amend title XIX of the Social Security Act to ensure the reliability of address information provided under the Medicaid program (Reps. Miller-Meeks and Cartwright). This legislation would streamline processes for States and managed care organizations to update address information for currently enrolled beneficiaries, to ensure that beneficiaries currently reside in the State.
- [H.R. 8112](#), To amend title XIX of the Social Security Act to require certain additional provider screening under the Medicaid program (Rep. D'Esposito). This legislation would require States to check the Data Exchange (DEX), a CMS-run database that identifies providers who have been removed from participating in the Medicare program.
- [H.R. 8113](#), To amend title XIX of the Social Security Act to require reporting on certain directed payments under the Medicaid program (Rep. Griffith). This legislation would require States to report on provider level data from amounts paid by the State through State Directed Payments.
- [H.R. 8114](#), To prohibit the Secretary of Health and Human Services from finalizing a rule proposed by the Centers for Medicare and Medicaid Services to place certain limitations on Medicaid payments for home and community-based services (Rep. Cammack). This legislation would prohibit the Secretary of HHS from finalizing regulations that would require passthrough payment requirements for home and community-based services.
- [H.R. 8115](#), To amend title XIX of the Social Security Act to allow for the deferral or disallowance of portions of payments for certain managed care violations under Medicaid (Rep. Sarbanes). This

legislation would establish enforcement mechanisms for the Secretary of HHS to make partial deferrals of payments to Medicaid managed care organizations, in addition to other existing enforcement tools, for purposes of ensuring compliance with federal laws.

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