

EDITION: July 30, 2021



COVID-19 Resources

[HLB COVID-19 Resource Center](#)

Congressional

Bipartisan Infrastructure Agreement

On July 28, a bipartisan group of Senators and the White House came to an agreement on a \$550 billion bipartisan infrastructure package. Just hours later, the Senate voted 67-32 to proceed to the start of debate. Although the legislative text has yet to be released, the Senate is planning to pass the bill before they adjourn for their August recess.

Some of the relevant pay-fors include:

- \$205 billion from repurposed COVID-19 relief funds
- \$49 billion from delaying the Medicare Part D rebate rule
- \$8.7 billion from the mandatory sequester
- \$3 billion in savings from reducing Medicare spending on discarded medications from large, single-use drug vials

New Social Determinants of Health Caucus

On July 21, the [Congressional Social Determinants of Health Caucus](#) was launched. The Caucus is a bipartisan group aimed at exploring legislative opportunities to improve the impact of services delivered to address social determinants with the support of federal funding.

With its launch, the Caucus also released a [request for](#)

UPCOMING HEALTH CARE ACTIVITIES ON THE HILL

Senate Health, Education, Labor & Pensions Committee

8/3 at TBD: Full Committee [Executive Session](#) on "S. 1486, S. 1543, S. 2425, S. 2401, and Nominations"

[information \(RFI\)](#) to seek feedback on challenges and opportunities related to social determinants of health. Submissions are due September 21, 2021.

MedPAC Releases Medicare Spending Data Book

On July 16, MedPAC released its 2021 [data book](#) on health care spending and the Medicare program. The publication provides data on Medicare population, beneficiaries' access to care, and quality of care in the program, among other information.

Administration

Psychiatric Facilities PPS Final Rule Released

Yesterday, the Centers for Medicare & Medicaid Services (CMS) [released](#) the fiscal year (FY) 2022 Inpatient Psychiatric Facilities Prospective Payment System and Quality Reporting Updates [final rule](#). The rule would increase the FY 2022 pay for inpatient psychiatric facilities by 2.1%. In addition, the rule modifies facilities' quality reporting program and adds a measure that assesses COVID-19 vaccination rates among health care personnel.

IRF PPS Final Rule Released

CMS also [released](#) the Inpatient Rehabilitation Facility (IRF) Prospective Payment System for FY 2022 and Updates to the IRF Quality Reporting Program [final rule](#) yesterday. The agency will increase facilities' fiscal year pay by 1.5%. CMS finalized changes to the facilities' quality reporting program and will require IRFs to report COVID-19 vaccinations among health care personnel in their facilities beginning in fiscal year 2023.

CMS Announces Hospice Proposed Rule

Yesterday, CMS [announced](#) their FY 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice and Home Health Quality Reporting Program Requirements [final rule](#). The rule increases payments by 2% and finalizes tweaks to hospice conditions of participation, including those around hospice aid competency evaluation standards.

SNF Proposed Rule Posted

The Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities (SNF); Updates to the Quality Reporting Program and Value-Based Purchasing Program for Fiscal Year 2022 [final rule](#) was [released](#) by CMS on July 29. CMS estimates that nursing homes will get a \$410 million increase in FY 2022 compared to this year, though that doesn't take into account an estimated \$184.25 million in cuts tied to the SNF value-based pay (VBP) program. The rule

also updates measures to the VBP and requires SNFs to report health care personnel COVID-19 vaccination status under the quality reporting program starting in 2023, though reporting must start October 1, 2021.

CMS Releases HOPPS & ASC Proposed Rule

On July 19, CMS [released](#) their calendar year (CY) 2022 Medicare hospital outpatient prospective payment system (HOPPS) and ambulatory surgical center (ASC) [proposed rule](#), which also includes proposals related to the Radiation Oncology (RO) model. The proposed rule continues its policy reducing payment for separately payable 340B drugs to ASP-22.55%, reverses the last Administration's policy eliminating the inpatient-only list, reverses the previous Administration's policy to expand the list of procedures that are eligible for payment in an ASC, and includes a request for information on health equity, amongst many other important proposals. Comments are due September 17, 2021.

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