## H. R. 1969

To amend title XVIII of the Social Security Act to address disparity in Medicare Advantage benchmark rates for regions with low Medicare fee-for-service penetration.

## IN THE HOUSE OF REPRESENTATIVES

March 17, 2021

Miss González-Colón introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

## A BILL

To amend title XVIII of the Social Security Act to address disparity in Medicare Advantage benchmark rates for regions with low Medicare fee-for-service penetration.

- 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 "Medicare Advantage
- 5 Integrity Act".

1	SEC. 2. ADDRESSING DISPARITIES IN MEDICARE ADVAN-
2	TAGE BENCHMARK LEVELS BASED ON PENE-
3	TRATION.
4	(a) In General.—Section 1853(n) of the Social Se-
5	curity Act (42 U.S.C. 1395w–23(n)) is amended—
6	(1) in paragraph (1)(B), by striking "subse-
7	quent year" and inserting "subsequent year, subject
8	to paragraph (6),"; and
9	(2) by adding at the end the following new
10	paragraph:
11	"(6) Average Geographic adjustment
12	FLOOR.—For 2022 and each subsequent year, when
13	calculating the adjusted average per capita cost
14	under section 1876(a)(4) for the purposes of estab-
15	lishing the base payment amount specified in para-
16	graph (2)(E), the average geographic adjustment
17	shall not be less than 0.70 for any area. For pur-
18	poses of the previous sentence, the Secretary may
19	define the term 'average geographic adjustment' by
20	program instruction or otherwise.".
21	(b) Ensuring Plan Payments Flow to Pro-
22	VIDERS.—Section 1857(e) of the Social Security Act (42
23	U.S.C. 1395w-27(e)) is amended by adding at the end
24	the following new paragraph:
25	"(6) Strengthening support to health
26	CARE PROVIDERS.—A contract under this section

with an MA organization shall require that, with respect to any increase in blended benchmark amount attributable to section 1853(n)(6), the plan shall provide that no less than 50 percent of such increase is directed toward provider compensation.".

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