117th CONGRESS 2d Session

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To amend title XVIII of the Social Security Act to provide for the distribution of additional residency positions in psychiatry and subspecialties.

## IN THE SENATE OF THE UNITED STATES

Ms. STABENOW (for herself and Mr. DAINES) introduced the following bill; which was read twice and referred to the Committee on

## A BILL

- To amend title XVIII of the Social Security Act to provide for the distribution of additional residency positions in psychiatry and subspecialties.
  - 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 "Training Psychiatrists
- 5 for the Future Act".

1	SEC. 2. DISTRIBUTION OF ADDITIONAL RESIDENCY POSI-
2	TIONS IN PSYCHIATRY AND PSYCHIATRY SUB-
3	SPECIALTIES.
4	(a) IN GENERAL.—Section 1886(h) of the Social Se-
5	curity Act (42 U.S.C. 1395ww(h)) is amended—
6	(1) in paragraph $(4)(F)(i)$ , by striking "and
7	(9)" and inserting "(9), and (10)";
8	(2) in paragraph $(4)(H)(i)$ , by striking "and
9	(9)" and inserting " $(9)$ , and $(10)$ "; and
10	(3) by adding at the end the following new
11	paragraph:
12	"(10) DISTRIBUTION OF ADDITIONAL RESI-
13	DENCY POSITIONS IN PSYCHIATRY AND PSYCHIATRY
14	SUBSPECIALTIES.—
15	"(A) ADDITIONAL RESIDENCY POSI-
16	TIONS.—
17	"(i) IN GENERAL.—For fiscal year
18	2025, and for each succeeding fiscal year
19	until the aggregate number of full-time
20	equivalent residency positions distributed
21	under this paragraph is equal to the aggre-
22	gate number of such positions made avail-
23	able (as specified in clause (ii)(I)), the Sec-
24	retary shall, subject to the succeeding pro-
25	visions of this paragraph, increase the oth-
26	erwise applicable resident limit for each

1	qualifying hospital (as defined in subpara-
2	graph (F)) that submits a timely applica-
3	tion under this subparagraph by such
4	number as the Secretary may approve ef-
5	fective beginning July 1 of the fiscal year
6	of the increase.
7	"(ii) NUMBER AVAILABLE FOR DIS-
8	TRIBUTION.—
9	"(I) TOTAL NUMBER AVAIL-
10	ABLE.—The aggregate number of
11	such positions made available under
12	this paragraph shall be equal to 400.
13	"(II) ANNUAL LIMIT.—The ag-
14	gregate number of such positions so
15	made available shall not exceed 200
16	for a fiscal year.
17	"(iii) Distribution for psychiatry
18	OR PSYCHIATRY SUBSPECIALTY
19	RESIDENCIES.—Each of the positions
20	made available under this paragraph shall
21	be in a psychiatry or psychiatry sub-
22	specialty residency (as defined in subpara-
23	graph (F)).
24	"(iv) Process for distributing po-
25	SITIONS.—

1	"(I) ROUNDS OF APPLICA-
2	TIONS.—The Secretary shall initiate a
3	separate round of applications for an
4	increase under clause (i) for each fis-
5	cal year for which such an increase is
6	to be provided.
7	"(II) TIMING.—The Secretary
8	shall notify hospitals of the number of
9	positions distributed to the hospital
10	under this paragraph as a result of an
11	increase in the otherwise applicable
12	resident limit by January 31 of the
13	fiscal year of the increase. Such in-
14	crease shall be effective beginning
15	July 1 of such fiscal year.
16	"(B) DISTRIBUTION.—For purposes of
17	providing an increase in the otherwise applica-
18	ble resident limit under subparagraph (A), the
19	following shall apply:
20	"(i) Considerations in distribu-
21	TION.—In determining for which qualifying
22	hospitals such an increase is provided
23	under subparagraph (A), the Secretary
24	shall take into account the demonstrated
25	likelihood of the hospital filling the posi-

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1	tions made available under this paragraph
2	within the first 5 training years beginning
3	after the date the increase would be effec-
4	tive, as determined by the Secretary.
5	"(ii) DISTRIBUTION FOR CERTAIN
6	CATEGORIES OF HOSPITALS.—With respect
7	to the aggregate number of such positions
8	available for distribution under this para-
9	graph, the Secretary shall distribute such
10	aggregate number to the following cat-
11	egories of hospitals:
12	"(I) To hospitals that are located
13	in a rural area (as defined in section
14	1886(d)(2)(D)) or are treated as
15	being located in a rural area pursuant
16	to section 1886(d)(8)(E).
17	"(II) To hospitals in which the
18	reference resident level of the hospital
19	(as specified in subparagraph (F)(iv))
20	is greater than the otherwise applica-
21	ble resident limit.
22	"(III) To hospitals in States
23	with—
24	"(aa) new medical schools
25	that received 'Candidate School'

1	status from the Liaison Com-
2	mittee on Medical Education or
3	that received 'Pre-Accreditation'
4	status from the American Osteo-
5	pathic Association Commission
6	on Osteopathic College Accredita-
7	tion on or after January 1, 2000,
8	and that have achieved or con-
9	tinue to progress toward 'Full
10	Accreditation' status (as such
11	term is defined by the Liaison
12	Committee on Medical Edu-
13	cation) or toward 'Accreditation'
14	status (as such term is defined
15	by the American Osteopathic As-
16	sociation Commission on Osteo-
17	pathic College Accreditation); or
18	"(bb) additional locations
19	and branch campuses established
20	on or after January 1, 2000, by
21	medical schools with 'Full Ac-
22	creditation' status (as such term
23	is defined by the Liaison Com-
24	mittee on Medical Education) or
25	'Accreditation' status (as such

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1	term is defined by the American
2	Osteopathic Association Commis-
3	sion on Osteopathic College Ac-
4	creditation).
5	"(IV) To hospitals that serve
6	areas designated as health profes-
7	sional shortage areas under section
8	332(a)(1)(A) of the Public Health
9	Service Act, as determined by the Sec-
10	retary.
11	"(V) To hospitals located in
12	States with less than 27 residents per
13	100,000 people.
14	"(C) Requirements.—
15	"(i) IN GENERAL.—Subject to clause
16	(ii), a hospital that receives an increase in
17	the otherwise applicable resident limit
18	under this paragraph shall ensure, during
19	the 5-year period beginning on the date of
20	such increase, that—
21	"(I) the number of full-time
22	equivalent residents in a psychiatry or
23	psychiatry subspecialty residency (as
24	defined in subparagraph (F)), exclud-
25	ing any additional positions attrib-

1	utable to an increase under this para-
2	graph, is not less than the average
3	number of full-time equivalent resi-
4	dents in such a residency during the
5	3 most recent cost reporting periods
6	ending prior to the date of enactment
7	of this paragraph; and
8	"(II) all of the positions attrib-
9	utable to such increase are in a psy-
10	chiatry or psychiatry subspecialty resi-
11	dency (as determined by the Sec-
12	retary).
13	The Secretary may determine whether a
14	hospital has met the requirements under
15	this clause during such 5-year period in
16	such manner and at such time as the Sec-
17	retary determines appropriate, including at
18	the end of such 5-year period.
19	"(ii) Redistribution of positions
20	IF HOSPITAL NO LONGER MEETS CERTAIN
21	REQUIREMENTS.—In the case where the
22	Secretary determines that a hospital de-
23	scribed in clause (i) does not meet either
24	of the requirements under subclause (I) or
25	(II) of such clause, the Secretary shall—

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1	"(I) reduce the otherwise applica-
2	ble resident limit of the hospital by
3	the amount by which such limit was
4	increased under this paragraph; and
5	"(II) provide for the distribution
6	of positions attributable to such re-
7	duction in accordance with the re-
8	quirements of this paragraph.
9	"(iii) LIMITATION.—A hospital may
10	not receive more than 10 additional full-
11	time equivalent residency positions under
12	this paragraph.
13	"(iv) Prohibition on distribution
14	TO HOSPITALS WITHOUT AN INCREASE
15	AGREEMENT.—No increase in the other-
16	wise applicable resident limit of a hospital
17	may be made under this paragraph unless
18	such hospital agrees to increase the total
19	number of full-time equivalent residency
20	positions under the approved medical resi-
21	dency training program of such hospital by
22	the number of such positions made avail-
23	able by such increase under this para-
24	graph.

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"(D) APPLICATION OF PER RESIDENT AMOUNTS FOR NONPRIMARY CARE.—With respect to additional residency positions in a hospital attributable to the increase provided under this paragraph, the approved FTE per resident amounts are deemed to be equal to the hospital per resident amounts for nonprimary care computed under paragraph (2)(D) for that hospital. "(E) PERMITTING FACILITIES TO APPLY

10 AGGREGATION RULES.—The Secretary shall 11 permit hospitals receiving additional residency 12 positions attributable to the increase provided 13 under this paragraph to, beginning in the fifth 14 year after the effective date of such increase, 15 apply such positions to the limitation amount 16 under paragraph (4)(F) that may be aggre-17 gated pursuant to paragraph (4)(H) among 18 members of the same affiliated group.

19 "(F) DEFINITIONS.—In this paragraph:

20 "(i) OTHERWISE APPLICABLE RESI21 DENT LIMIT.—The term 'otherwise appli22 cable resident limit' means, with respect to
23 a hospital, the limit otherwise applicable
24 under subparagraphs (F)(i) and (H) of
25 paragraph (4) on the resident level for the

1	hospital determined without regard to this
2	paragraph but taking into account para-
3	graphs (7)(A), (7)(B), (8)(A), (8)(B), and
4	(9)(A).
5	"(ii) Psychiatry or psychiatry
6	SUBSPECIALTY RESIDENCY.—The term
7	'psychiatry or psychiatry subspecialty resi-
8	dency' means a residency in psychiatry as
9	accredited by the Accreditation Council for
10	Graduate Medical Education for the pur-
11	pose of preventing, diagnosing, and treat-
12	ing mental health disorders.
13	"(iii) Qualifying hospital.—The
14	term 'qualifying hospital' means a hospital
15	described in any of subclauses (I) through
16	(V) of subparagraph (B)(ii).
17	"(iv) Reference resident
18	LEVEL.—The term 'reference resident
19	level' means, with respect to a hospital, the
20	resident level for the most recent cost re-
21	porting period of the hospital ending on or
22	before the date of enactment of this para-
23	graph, for which a cost report has been
24	settled (or, if not, submitted (subject to
25	audit)), as determined by the Secretary.

1	"(v) RESIDENT LEVEL.—The term
2	'resident level' has the meaning given such
3	term in paragraph (7)(C)(i).".
4	(b) IME.—Section 1886(d)(5)(B) of the Social Secu-
5	rity Act (42 U.S.C. 1395ww(d)(5)(B)) is amended—
6	(1) in clause (v), in the third sentence, by strik-
7	ing "and $(h)(9)$ " and inserting " $(h)(9)$ , and
8	(h)(10)'';
9	(2) by moving clause (xii) 4 ems to the left; and
10	(3) by adding at the end the following new
11	clause:
12	"(xiii) For discharges occurring on or after
13	July 1, 2024, insofar as an additional payment
14	amount under this subparagraph is attributable to
15	resident positions distributed to a hospital under
16	subsection $(h)(10)$ , the indirect teaching adjustment
17	factor shall be computed in the same manner as pro-
18	vided under clause (ii) with respect to such resident
19	positions.".
20	(c) Prohibition on Judicial Review.—Section
21	1886(h)(7)(E) of the Social Security Act (42 U.S.C.
22	1395ww— $4(h)(7)(E)$ ) is amended by inserting "para-
23	graph (10)," after "paragraph (8),".