

.....
(Original Signature of Member)

117TH CONGRESS
1ST SESSION

H. R.

To amend title XVIII of the Social Security Act to require the Secretary of Health and Human Services to conduct a demonstration program to assess the effects of a hospital providing to qualified individuals medically tailored home-delivered meals, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. MCGOVERN introduced the following bill; which was referred to the Committee on _____

A BILL

To amend title XVIII of the Social Security Act to require the Secretary of Health and Human Services to conduct a demonstration program to assess the effects of a hospital providing to qualified individuals medically tailored home-delivered meals, and for other purposes.

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 “Medically Tailored
5 Home-Delivered Meals Demonstration Pilot Act of 2021”.

1 **SEC. 2. MEDICALLY TAILORED HOME-DELIVERED MEALS**
2 **DEMONSTRATION PILOT PROGRAM.**

3 (a) IN GENERAL.—Part A of title XVIII of the Social
4 Security Act (42 U.S.C. 1395 et seq.) is amended by add-
5 ing at the end the following new section:

6 **“SEC. 1823. MEDICALLY TAILORED HOME-DELIVERED**
7 **MEALS DEMONSTRATION PILOT PROGRAM.**

8 “(a) ESTABLISHMENT.—

9 “(1) IN GENERAL.—Not later than 1 year after
10 the date of the enactment of this section, the Sec-
11 retary shall conduct under this section the Medically
12 Tailored Home-Delivered Meals Demonstration Pilot
13 Program (in this section referred to as the ‘Pro-
14 gram’) for a 3-year period to assess the effects of a
15 covered hospital providing to qualified individuals
16 medically tailored home-delivered meals. Under the
17 Program, the Secretary shall—

18 “(A) select eligible hospitals to participate
19 in the Program in accordance with paragraph
20 (2);

21 “(B) establish procedures for covered hos-
22 pitals to carry out the requirements of the Pro-
23 gram described under paragraph (3);

24 “(C) make payments to covered hospitals
25 for items and services provided to qualified indi-
26 viduals in accordance with subsection (b); and

1 “(D) submit a report on the Program in
2 accordance with subsection (c).

3 “(2) SELECTION.—

4 “(A) IN GENERAL.—For purposes of this
5 subsection, a covered hospital is a hospital—

6 “(i) that submits to the Secretary an
7 application at such time, in such manner,
8 and containing such information as the
9 Secretary may require;

10 “(ii) is selected by the Secretary to
11 carry out the Program for not more than
12 a 3-year period; and

13 “(iii) is a subsection (d) hospital
14 under section 1886.

15 “(B) REQUIREMENT.—The Secretary shall
16 select at least 20 covered hospitals located in at
17 least 10 different States to carry out the Pro-
18 gram.

19 “(3) PROGRAM REQUIREMENTS.—

20 “(A) STAFF.—A covered hospital shall
21 maintain on staff a physician, registered dieti-
22 tian or nutrition professional, or clinical social
23 worker to—

24 “(i) screen an individual that is an in-
25 patient of such hospital with validated

1 screening tools to determine whether such
2 individual is a qualified individual;

3 “(ii) re-screen each individual receiv-
4 ing medically tailored home-delivered meals
5 with validated screening tools every 12
6 weeks to determine whether such indi-
7 vidual is qualified to continue receiving
8 medically tailored home-delivered meals;

9 “(iii) in the case such an individual is
10 determined to be a qualified individual
11 under clause (i) or (ii), ensure such indi-
12 vidual receives medically tailored home-de-
13 livered meals pursuant to a contract de-
14 scribed in subparagraph (B);

15 “(iv) provide to such individual deter-
16 mined to be a qualified individual under
17 clause (i) or (ii) medical nutrition therapy
18 furnished by a registered dietitian or nutri-
19 tional professional or ensure that the orga-
20 nization described in subparagraph (B)
21 that delivers meals to such individual pro-
22 vides to such individual such therapy (as
23 appropriate); and

24 “(v) monitor the clinical health out-
25 comes (based on measures developed by

1 the Secretary consistent with State law) of
2 each individual that receive medically tai-
3 lored home-delivered meals.

4 “(B) CONTRACT TO DELIVER MEALS.—

5 “(i) IN GENERAL.—A covered hospital
6 shall enter into a contract (in accordance
7 with criteria established by the Secretary)
8 with at least 1 organization that has at
9 least 1 year of experience preparing and
10 delivering medically tailored meals similar
11 to meals described in subsection (e)(2) and
12 providing individual nutritional counseling
13 or medical nutrition therapy in connection
14 with delivering meals.

15 “(ii) NUMBER OF MEALS.—The con-
16 tract described in clause (i) shall provide
17 for—

18 “(I) at least 2 medically tailored
19 home-delivered meals (or a portioned
20 equivalent) each day that meet at
21 least two-thirds of the daily nutri-
22 tional needs of the qualified indi-
23 vidual; and

24 “(II) at least 12 weeks of medi-
25 cally tailored home-delivered meals.

1 “(iii) OPTION TO PROVIDE MEALS FOR
2 CAREGIVERS OR DEPENDENTS UNDER THE
3 AGE OF 18.—In the case an individual is
4 determined to be a qualified individual
5 under clause (i) or (ii) of subparagraph
6 (A), the covered hospital may contract with
7 the organization described in clause (i) to
8 provide to the primary caregiver of the in-
9 dividual or a dependent under the age of
10 18 that resides in the household of such in-
11 dividual a meal the organization deter-
12 mines appropriate.

13 “(C) REPORT BY HOSPITAL.—Not later
14 than 1 year after the date the covered hospital
15 begins to participate in the Program, and annu-
16 ally thereafter, a hospital selected under para-
17 graph (2) shall submit to the Secretary a report
18 on—

19 “(i) the impact of medically tailored
20 home-delivered meals on clinical health
21 outcomes described in subparagraph
22 (A)(v);

23 “(ii) the impact of medically tailored
24 home-delivered meals on hospital costs (in-
25 cluding the costs associated with the read-

1 mission (as defined in 1886(q)(5)(E)) of
2 individuals); and

3 “(iii) any other information necessary
4 to evaluate the Program.

5 “(b) PAYMENT.—Under the Program, payment for
6 an item or service provided under this section shall be
7 made from the Federal Hospital Insurance Trust Fund
8 for the type, amount, frequency, and duration of such an
9 item or service as the Secretary determines appropriate
10 as if the item or service was payable under section 1886.
11 Payment for a contract described in subsection (a)(3)(B)
12 shall be made from the Federal Hospital Insurance Trust
13 Fund for the amount the Secretary determines appro-
14 priate.

15 “(c) REPORT BY SECRETARY.—Not later than 3
16 years after the date of the enactment of this Act, and 6
17 years after such date, the Secretary shall submit to the
18 Committee on Ways and Means of the House of Rep-
19 resentatives and the Committee on Finance of the Senate
20 a report on the Program. Such report shall include a sum-
21 mary of, evaluation of, and recommendations on whether
22 to cover medically tailored home-delivered meals as a ben-
23 efit under this part.

24 “(d) HEARINGS.—

1 “(1) IN GENERAL.—The Committee on Ways
2 and Means of the House of Representatives shall,
3 not later than 90 days after the date the Secretary
4 submits a report under subsection (c), hold a hear-
5 ing on the recommendations submitted by the Sec-
6 retary under subsection (c).

7 “(2) EXERCISE OF RULEMAKING AUTHORITY.—
8 Paragraph (1) is enacted—

9 “(A) as an exercise of rulemaking power of
10 the House of Representatives, and, as such,
11 shall be considered as part of the rules of the
12 House, and such rules shall supersede any other
13 rule of the House only to the extent that rule
14 is inconsistent therewith; and

15 “(B) with full recognition of the constitu-
16 tional right of either House to change such
17 rules (so far as relating to the procedure in
18 such House) at any time, in the same manner,
19 and to the same extent as in the case of any
20 other rule of the House.

21 “(e) DEFINITIONS.—In this section:

22 “(1) MEDICAL NUTRITION THERAPY.—The
23 term ‘medical nutrition therapy’ means, for the pur-
24 pose of disease management, nutritional, diagnostics,

1 and counseling, services that are furnished by a reg-
2 istered dietitian or nutrition professional.

3 “(2) MEDICALLY TAILORED HOME-DELIVERED
4 MEAL.—The term ‘medically tailored home-delivered
5 meal’ means a meal that is designed by a registered
6 dietitian or nutritional professional—

7 “(A) for the treatment plan of a qualified
8 individual; and

9 “(B) to improve health outcomes, lower the
10 cost of care, and increase the patient satisfac-
11 tion of such qualified individual.

12 “(3) QUALIFIED INDIVIDUAL.—The term ‘quali-
13 fied individual’ means an individual who—

14 “(A) is entitled to benefits under this part;

15 “(B) has a diet-impacted disease (such as
16 kidney disease, congestive heart failure, diabe-
17 tes, chronic obstructive pulmonary disease, or
18 any other disease the Secretary determines ap-
19 propriate) that is likely to cause the individual
20 to require care at a hospital; and

21 “(C) has at least one activity of daily living
22 limitation.

23 “(4) REGISTERED DIETITIAN OR NUTRITION
24 PROFESSIONAL.—The term ‘dietitian or nutrition

1 professional' has the meaning given such term in
2 section 1861(vv)(2).

3 “(5) VALIDATED SCREENING TOOL.—The term
4 ‘validated screening tool’ means a questionnaire that
5 has been psychometrically tested for reliability and
6 validity in assessing the presence of a condition in
7 the individual who is screened by such question-
8 naire.”.