

115TH CONGRESS
1ST SESSION

H. R. 1148

To amend title XVIII of the Social Security Act to expand access to telehealth-eligible stroke services under the Medicare program.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 16, 2017

Mr. GRIFFITH (for himself, Mrs. BEATTY, Mr. CARTER of Georgia, Mr. RYAN of Ohio, Mr. COLLINS of New York, Mr. ROE of Tennessee, Mr. BILL-RAKIS, Mr. ABRAHAM, Mr. BABIN, Mr. TURNER, and Mr. JOHNSON of Ohio) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, 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 expand access to telehealth-eligible stroke services under the Medicare program.

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 “Furthering Access to
5 Stroke Telemedicine Act of 2017” or the “FAST Act of
6 2017”.

1 **SEC. 2. EXPANDING ACCESS TO TELEHEALTH-ELIGIBLE**
2 **STROKE SERVICES UNDER THE MEDICARE**
3 **PROGRAM.**

4 (a) IN GENERAL.—Section 1834(m)(4) of the Social
5 Security Act (42 U.S.C. 1395m(m)(4)) is amended—

6 (1) in subparagraph (C)—

7 (A) in clause (i), by striking “The term”
8 and inserting “Subject to clause (iii), the
9 term”; and

10 (B) by adding at the end the following new
11 clause:

12 “(iii) TELEHEALTH-ELIGIBLE STROKE
13 SERVICES.—With respect to telehealth-eli-
14 gible stroke services, the term ‘originating
15 site’ means any hospital, or any mobile
16 unit equipped with the ability to evaluate
17 possible stroke patients while being trans-
18 ported to a hospital, at which the eligible
19 telehealth individual is located at the time
20 the service is furnished via a telecommuni-
21 cations system, regardless of where the
22 hospital or mobile unit is located.”;

23 (2) in subparagraph (F)(i) by inserting “tele-
24 health-eligible stroke services,” after “Secretary)),”;
25 and

1 (3) by adding at the end the following new sub-
2 paragraph:

3 “(G) TELEHEALTH-ELIGIBLE STROKE
4 SERVICES.—The term ‘telehealth-eligible stroke
5 services’ means services that are—

6 “(i) related to the diagnosis, evalua-
7 tion, or treatment of symptoms in an indi-
8 vidual of an acute stroke; and

9 “(ii) provided to such individual not
10 later than four and a half hours (or such
11 other clinically appropriate amount of time
12 as is determined by the Secretary) after
13 the onset of such symptoms with respect to
14 such individual.”.

15 (b) NO ORIGINATING SITE FACILITY FEE FOR NEW
16 SITES.—Section 1834(m)(2)(B) of the Social Security Act
17 (42 U.S.C. 1395m(m)(2)(B)) is amended, in the matter
18 preceding clause (i), by inserting “(other than an origi-
19 nating site that is only described in clause (iii) of para-
20 graph (4)(C), and does not meet the requirement for an
21 originating site under clause (i) of such paragraph)” after
22 “the originating site”.

23 (c) EFFECTIVE DATE.—The amendments made by
24 this section shall apply to services furnished on or after

- 1 the date that is 18 months after the date of the enactment
- 2 of this Act.

