(Original Signature of Member)

118TH CONGRESS 2D Session

H. R.

To amend title XVIII of the Social Security Act to establish the Rural Hospital Stabilization Pilot Program to provide grants to rural hospitals for purposes of ensuring local access to services.

IN THE HOUSE OF REPRESENTATIVES

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

A BILL

- To amend title XVIII of the Social Security Act to establish the Rural Hospital Stabilization Pilot Program to provide grants to rural hospitals for purposes of ensuring local access to services.
 - 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 "Rural Hospital Sta-5 bilization Act".

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1	SEC. 2. RURAL HOSPITAL STABILIZATION PILOT PROGRAM.
2	Section 1820(g) of the Social Security Act (42 U.S.C.
3	1395i–4) is amended by adding at the end the following
4	new paragraph:
5	"(8) RURAL HOSPITAL STABILIZATION PILOT
6	PROGRAM
7	"(A) IN GENERAL.—Beginning January 1,
8	2026, the Secretary, acting through the Direc-
9	tor of the Office of Rural Health Policy, shall
10	award grants to—
11	"(i) hospitals, critical access hospitals,
12	and rural emergency hospitals that are lo-
13	cated in a rural area, as such term is used
14	for purposes of section 711 of this Act (in
15	this paragraph referred to as 'rural hos-
16	pitals') that have submitted applications to
17	the Secretary, for purposes of assisting
18	such hospitals in ensuring local access to
19	services; and
20	"(ii) experienced technical assistance
21	providers that have submitted applications
22	to the Secretary, for purposes of assisting
23	such rural hospitals in planning to apply
24	for grants under this paragraph and using
25	any amounts received under such a grant.

1	"(B) PRIORITIZATION FACTORS.—In mak-
2	ing grants to rural hospitals under this para-
3	graph for a fiscal year (and determining the
4	amount of each such grant), the Secretary shall
5	consider the following factors:
6	"(i) The average daily census of the
7	hospital.
8	"(ii) The distance between the hos-
9	pital and the next nearest hospital.
10	"(iii) The financial circumstances of
11	the hospital, as determined by such hos-
12	pital's most recently filed Medicare cost re-
13	port (or other applicable source of informa-
14	tion).
15	"(iv) The risk that the hospital will
16	close.
17	"(v) The risk that the hospital will re-
18	duce or stop offering a class of services.
19	"(C) USE OF FUNDS.—
20	"(i) HOSPITALS.—Amounts received
21	by a rural hospital under a grant under
22	this paragraph shall be used to sustain, en-
23	hance, or expand the classes of services of-
24	fered by such hospital, or to begin offering

	_
1	a new class of service, and may be used
2	for—
3	"(I) minor renovations to build-
4	ings;
5	"(II) training with respect to the
6	delivery of new or existing services;
7	"(III) recruiting or hiring new
8	staff or supplementing compensation
9	of existing staff; and
10	"(IV) equipment acquisition or
11	refurbishment.
12	"(ii) EXPERIENCED TECHNICAL AS-
13	SISTANCE PROVIDERS.—Amounts received
14	by an experienced technical assistance pro-
15	vider under a grant under this paragraph
16	shall be used to assist rural hospitals—
17	"(I) in applying for a grant
18	under this paragraph; and
19	"(II) with respect to a rural hos-
20	pital that has been awarded a grant
21	under this paragraph, in using
22	amounts received under such grant in
23	accordance with the requirements of
24	clause (i).
25	"(D) REPORTS TO CONGRESS.—

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1	"(i) INITIAL REPORT.—Not later than
2	January 1, 2029, the Secretary shall sub-
3	mit to Congress a report on the grants
4	awarded under this paragraph that in-
5	cludes the following information:
6	"(I) The names of all experienced
7	technical assistance providers that re-
8	ceived a grant under this paragraph
9	and, with respect to each such experi-
10	enced technical assistance provider, an
11	analysis of the use of the amounts re-
12	ceived under such grant.
13	"(II) The names and locations of
14	all rural hospitals that received a
15	grant under this paragraph and, with
16	respect to each such hospital—
17	"(aa) the use of the
18	amounts received under such
19	grant;
20	"(bb) an analysis of the fi-
21	nancial circumstances of such
22	hospital, as determined by such
23	hospital's most recently filed
24	Medicare cost report (or other

1	applicable source of informa-
2	tion)—
3	"(AA) at the time of
4	the receipt of such grant;
5	and
6	"(BB) at the time the
7	report is submitted under
8	this clause;
9	"(cc) an analysis of the
10	classes of services offered by the
11	hospital—
12	"(AA) prior to the re-
13	ceipt of such grant; and
14	"(BB) following such
15	receipt, as determined at the
16	time the report is submitted
1 7	under this clause; and
18	''(dd) an analysis of any new
19	classes of services offered by the
20	hospital following the receipt of
21	such grant.
22	"(ii) SUBSEQUENT REPORTNot
23	later than 2 years after the initial report
24	is submitted under clause (i), the Secretary
25	shall submit to Congress a subsequent re-

1	port on the grants awarded under this
2	paragraph that includes updates to the in-
3	formation described in subclauses (I) and
4	(II) of such clause.
5	"(E) FUNDING.—There are authorized to
6	be appropriated from the Federal Hospital In-
7	surance Trust Fund under section 1817 for
8	making grants under this paragraph,
9	\$20,000,000 for each of fiscal years 2026
10	through 2029, to remain available until ex-
11	pended.".