

Summary of the Medicare Patient Empowerment Act

The Medicare Patient Empowerment Act would establish a Medicare payment option for patients and physicians (and practitioners) to freely contract, without penalty, for Medicare fee-for-service services, while allowing Medicare beneficiaries to use their Medicare benefits and allowing physicians to bill the patient for all amounts not covered by Medicare. Physicians and practitioners could continue to elect Medicare participating (PAR) or non-participating (non-PAR) status for other beneficiaries they treat.

The approach taken in this legislation would:

- **Provide patients with more choice of physicians;**
- **Increase the number of physicians who will continue to accept Medicare patients;**
- **Help address physician shortages by attracting physicians into the medical profession; and**
- **Help preserve our Medicare program, along with patient-centered care, for our elderly and disabled patients.**

Specifically, the proposed bill would:

- Allow Medicare beneficiaries to contract with any physician (or practitioner) outside of Medicare at rates established between the patient and physician or practitioner.
- Allow Medicare beneficiaries to submit claims to the Medicare program.
- Allow the physician or practitioner to file claims on behalf of the beneficiary, if requested by the beneficiary.
- Medicare claims would be paid directly to the beneficiary, but the beneficiary could assign such payment to the physician or practitioner.
- Establish that Medicare balance billing limits would not apply to Medicare charges by the physician or practitioner.
- Specify that if a physician (or practitioner) contracts with a beneficiary, the physician (or practitioner) is not considered a Medicare PAR or non-PAR physician or practitioner, and therefore Medicare requirements do not apply to the physician or practitioner for purposes of services furnished under the contract.
- Establish beneficiary protections in cases of emergency or urgent care situations, and holds beneficiaries harmless for any physician that bills in excess of the fees specified in their contract.
- Define “emergency medical condition” and “urgent health care situation” using existing Medicare definitions for these terms.
- Allow physicians and practitioners to continue as a Medicare PAR or non-PAR physician or practitioner with respect to any patient not covered under the contract.