

119TH CONGRESS
2D SESSION

H. R. 8986

To amend title XVIII of the Social Security Act to allow for the designation of certain facilities as critical access hospitals under the Medicare program.

IN THE HOUSE OF REPRESENTATIVES

MAY 21, 2026

Mr. NEWHOUSE (for himself and Mr. LARSEN of Washington) introduced the following bill; which was referred to the Committee on Ways and Means

A BILL

To amend title XVIII of the Social Security Act to allow for the designation of certain facilities as critical access hospitals 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 “Ensuring Rural Health
5 Care Access for Military and Tribal Families Act”.

6 **SEC. 2. PROVIDING ESSENTIAL HEALTH CARE ACCESS FOR**
7 **MEMBERS OF THE ARMED FORCES, DEPEND-**
8 **ENTS, AND VETERANS IN RURAL AREAS.**

9 Section 1820(c)(2) of the Social Security Act (42
10 U.S.C. 1395i–4(c)(2)) is amended—

1 (1) in subparagraph (B)(i), by inserting “sub-
2 ject to subparagraph (F),” before “is a hospital”;

3 (2) in subparagraph (E)(ii), by striking “The
4 total” and inserting “Subject to subparagraph (F),
5 the total”; and

6 (3) by adding at the end the following new sub-
7 paragraph:

8 “(F) ESSENTIAL HEALTH CARE ACCESS
9 FOR MEMBERS OF THE ARMED FORCES, DE-
10 PENDENTS, AND VETERANS IN RURAL AREAS.—

11 “(i) IN GENERAL.—Beginning Octo-
12 ber 1, 2026, a State may designate a facil-
13 ity as a critical access hospital without re-
14 gard to the criteria under subparagraph
15 (B)(i) if the facility meets 3 or more of the
16 following criteria:

17 “(I) The hospital—

18 “(aa) delivers health care
19 services to individuals covered
20 under the TRICARE program
21 (as defined in section 1072 of
22 title 10, United States Code) and
23 veterans enrolled in the patient
24 enrollment system under section

1 1705 of title 38, United States
2 Code, living in rural areas; and

3 “(bb) is located in a county
4 (or equivalent unit of local gov-
5 ernment) in a rural area (as de-
6 fined in section 1886(d)(2)(D))
7 or is treated as being located in
8 a rural area pursuant to section
9 1886(d)(8)(E), or is located in
10 an area that otherwise meets the
11 definition of rural established by
12 the Federal Office of Rural
13 Health Policy.

14 “(II) The hospital is not a sole
15 community hospital (as defined in sec-
16 tion 1886(d)(5)(D)(iii)).

17 “(III) At the time of designation,
18 8 percent or more of the annual gross
19 revenue of the hospital and its pro-
20 vider-based departments, including af-
21 filiated outpatient department and
22 provider-based clinics, is derived from
23 services provided to individuals cov-
24 ered under the TRICARE program.

1 “(IV) At the time of designation,
2 15 percent or more of the annual
3 gross revenue from labor and delivery
4 services of the hospital is derived from
5 services provided to individuals cov-
6 ered under the TRICARE program.

7 “(V) The hospital is located on a
8 reservation (as defined in section 4 of
9 the Indian Health Care Improvement
10 Act).

11 “(ii) PSYCHIATRIC AND REHABILITA-
12 TION DISTINCT PART UNITS.—A facility
13 described in clause (i) may establish a dis-
14 tinct part unit under subparagraph (E)
15 without regard to the limitation on number
16 of beds under clause (ii) of such subpara-
17 graph. The Secretary may not take a dis-
18 tinct part unit so established by such facil-
19 ity into account when determining whether
20 such facility is primarily engaged in pro-
21 viding the services described in section
22 1861(e)(1).”.

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