

119TH CONGRESS
2D SESSION

H. R. 9336

To amend title XIX of the Social Security Act to require States to take into account performance when assigning individuals to managed care entities under the Medicaid program.

IN THE HOUSE OF REPRESENTATIVES

JUNE 18, 2026

Mr. GOLDMAN of Texas (for himself and Mr. PFLUGER) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title XIX of the Social Security Act to require States to take into account performance when assigning individuals to managed care entities under the Medicaid 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 “Better Care, Better
5 Cost Act”.

1 **SEC. 2. REQUIRING STATES TO TAKE INTO ACCOUNT PER-**
 2 **FORMANCE WHEN ASSIGNING INDIVIDUALS**
 3 **TO MANAGED CARE ENTITIES UNDER THE**
 4 **MEDICAID PROGRAM.**

5 (a) IN GENERAL.—Section 1932(a)(4) of the Social
 6 Security Act (42 U.S.C. 1396u–2(a)(4)) is amended—

7 (1) in subparagraph (D)(ii)(II), by striking
 8 “the equitable” and all that follows through the pe-
 9 riod and inserting “the performance score of such
 10 entities, as determined under the system established
 11 by the State under subparagraph (E).”; and

12 (2) by adding at the end the following new sub-
 13 paragraph:

14 “(E) PERFORMANCE.—

15 “(i) IN GENERAL.—A State shall—

16 “(I) establish a system to evalu-
 17 ate the performance of managed care
 18 entities participating under the State
 19 plan (or wavier of such plan) of such
 20 State; and

21 “(II) on an annual basis, publish
 22 a report—

23 “(aa) evaluating the dif-
 24 ferences in default enrollments
 25 made taking into account the
 26 performance scores of managed

1 care entities under this subpara-
2 graph compared to such enroll-
3 ments that would have been
4 made had such scores not been
5 taken into account; and

6 “(bb) quantifying any esti-
7 mated reduction in expenditures
8 under such plan (or waiver) at-
9 tributable to taking into account
10 such scores in default enroll-
11 ments.

12 “(ii) SCORE.—Under the system es-
13 tablished by a State under clause (i), the
14 State shall assign a performance score for
15 each managed care entity described in such
16 clause based on such cost and outcome
17 measures and such individual satisfaction
18 measures as determined appropriate by the
19 State. Measures used under such system
20 may include, with respect to individuals en-
21 rolled under such entity, measures of the
22 performance of such entity (compared to
23 the risk-adjusted expected performance of
24 such entity) with respect to the following:

1 “(I) Expenditures for medical as-
2 sistance.

3 “(II) Potentially avoidable hos-
4 pital readmissions.

5 “(III) Potentially avoidable emer-
6 gency department visits.

7 “(IV) Potentially avoidable hos-
8 pital admissions.

9 “(V) Satisfaction scores from
10 such individuals and the rate at which
11 such individuals elect to terminate en-
12 rollment with such entity.”.

13 (b) EFFECTIVE DATE.—The amendments made by
14 this section shall apply with respect to the enrollment of
15 individuals in managed care entities under a State plan
16 under title XIX of the Social Security Act (42 U.S.C.
17 1396 et seq.), or under a waiver of such plan, on or after
18 January 1, 2028.

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