

Fri 7/31
12:41 pm
B

**AMENDMENT TO THE AMENDMENT IN THE
NATURE OF A SUBSTITUTE TO H.R. 3200
OFFERED BY MR. ROSS OF ARKANSAS**

Add at the end of part 3 of subtitle B of title I of
division B the following:

1 **SEC. ____ . MEDICARE HOME OXYGEN THERAPY.**

2 (a) TREATMENT OF HOME OXYGEN THERAPY SEPA-
3 RATE FROM DURABLE MEDICAL EQUIPMENT.—

4 (1) ELIMINATION FROM DEFINITION OF DURA-
5 BLE MEDICAL EQUIPMENT.—Section 1861(n) of the
6 Social Security Act (42 U.S.C. 1395x(n)) is amend-
7 ed—

8 (A) by striking “oxygen tents,”; and

9 (B) by adding at the end the following new
10 sentence: “Such term does not include oxygen
11 and home oxygen therapy services.”.

12 (2) CONFORMING AMENDMENTS.—

13 (A) Section 1834(a) of the Social Security
14 Act (42 U.S.C. 1395m(a)) is amended—

15 (i) by striking paragraphs (5) and (9);

16 (ii) in paragraph (6), by striking “(4),
17 or (5)” and inserting “or (4)”;

1 (iii) in paragraph (21)(B), by striking
2 “oxygen and oxygen equipment,”.

3 (B) Section 1847(a) of such Act (42
4 U.S.C. 1395w-3(a)) is amended—

5 (i) in paragraph (1)(D)(i)—

6 (I) in subclause (II), by striking
7 “and (IV)” and inserting “, (IV), and
8 (V)”;

9 (II) by striking “and” at the end
10 of subclause (III);

11 (III) by striking the period at the
12 end of subclause (IV) and inserting “;
13 and”; and

14 (IV) by adding at the end the fol-
15 lowing new subclause:

16 “(V) the Secretary shall exclude
17 oxygen and oxygen equipment.”;

18 (ii) in paragraph (2), by inserting
19 “(and do not include oxygen and oxygen
20 equipment)” after “are the following”; and

21 (iii) in paragraph (4)—

22 (I) by striking “AND OXYGEN” in
23 the heading;

1 (II) by striking “and in the case
2 of payment for oxygen under section
3 1834(a)(5)”;

4 (III) by striking “and supply ar-
5 rangements with oxygen suppliers”.

6 (b) COVERAGE OF HOME OXYGEN THERAPY SERV-
7 ICES.—

8 (1) DEFINITIONS.—Section 1861 of the Social
9 Security Act is amended by adding at the end the
10 following new subsection:

11 “Home Oxygen Therapy Services

12 “(hhh)(1) IN GENERAL.—The term ‘home oxygen
13 therapy services’ means services and supplies furnished by
14 a qualified home oxygen therapy provider and includes,
15 with respect to an individual, the following furnished by
16 home oxygen therapy provider (as defined in paragraph
17 (2)).

18 “(A) Conducting an initial evaluation of the in-
19 dividual using a uniform Oxygen Patient Evaluation
20 Form developed, in consultation with the Home Oxy-
21 gen Therapy Advisory Committee, by the Secretary.

22 “(B) Providing written and verbal individual
23 and caregiver education about home oxygen therapy,
24 stationary and portable oxygen therapy options, and
25 oxygen safety (such as evaluating the home environ-

1 ment for safety risks or hazards, including home fire
2 and fall prevention).

3 “(C) Providing appropriate delivery, set-up, and
4 coordination of oxygen (such as delivery of oxygen
5 technology to hospital prior to discharge, delivery
6 and set-up of equipment in the home), as needed, in
7 a timely manner as agreed upon by the individual or
8 caregiver (or both), the home oxygen therapy pro-
9 vider, and the physician.

10 “(D) Evaluating the individual’s ability to oper-
11 ate the oxygen equipment safely and effectively.

12 “(E) Educating and, when necessary, providing
13 assistance with infection control, focusing on keeping
14 oxygen equipment from leading to infection.

15 “(F) Providing equipment-related services con-
16 sistent with the manufacturer specifications and in
17 accordance with all Federal, State, and local laws
18 and regulations, which may include checking oxygen
19 system purity levels and flow rates, changing and
20 cleaning filters, and assuring the integrity of alarms
21 and back-up systems.

22 “(G) Monitoring visits by appropriately trained
23 personnel to evaluate all aspects of the services
24 being provided to the individual by the home oxygen

1 therapy provider, including ensuring that individual
2 is following the prescribed plan of care.

3 “(H) Documenting exception reporting by the
4 home oxygen therapy provider when changes occur
5 in the individual’s compliance with the plan of care
6 to the prescribing physician.

7 “(I) Providing, as needed, continued education
8 regarding appropriate home oxygen equipment main-
9 tenance practices and performance by the individual
10 and caregivers.

11 “(J) Implementing all home oxygen therapy
12 services that are prescribed by the physician’s plan
13 of care.

14 “(K) Providing, as needed, appropriate home
15 oxygen equipment, supplies, including supplemental
16 supplies and emergency oxygen back-ups as appro-
17 priate.

18 “(L) Providing 24-hour on-call coverage to re-
19 spond to individual’s needs with home oxygen ther-
20 apy.

21 “(M) Assisting the individual with the coordina-
22 tion of oxygen equipment, services, and providers if
23 the individual travels outside of the provider’s serv-
24 ice area.

1 If an individual relocates permanently, the new home oxy-
2 gen therapy provider for the individual shall assume re-
3 sponsibility for billing the Medicare program directly. The
4 Secretary is directed to determine which of these covered
5 services must be performed in person.

6 “(2) QUALIFIED HOME OXYGEN THERAPY PRO-
7 VIDER.—

8 “(A) The term ‘qualified home oxygen therapy
9 provider’ means an entity that provides home oxygen
10 therapy services and home oxygen equipment—

11 “(i) furnishes home oxygen therapy serv-
12 ices in compliance with applicable laws, rules,
13 and regulations to individuals in their homes,
14 pursuant to a physician’s order;

15 “(ii) is accredited by an accreditation orga-
16 nization (including organizations deemed as of
17 November 2006 by the Secretary to accredit
18 durable medical equipment suppliers) that of-
19 fers home medical equipment or respiratory
20 service accreditation services;

21 “(iii) complies with the Durable Medical
22 Equipment, Prosthetics, Orthotics and Supplies
23 Quality Standards adopted by the Secretary in
24 October 2008; and

1 “(iv) complies with the Durable Medical
2 Equipment, Prosthetics, Orthotics and Supplies
3 Supplier Standards as set forth at section
4 424.57(c) of title 42, Code of Federal Regula-
5 tions).

6 “(B) A qualified home oxygen therapy provider
7 may determine which oxygen delivery system meets
8 the requirements of the prescribing physician’s order
9 and is appropriate for an individual based upon the
10 physician’s classification of the individual in a pa-
11 tient category.

12 “(C) Nothing in this subsection shall be con-
13 strued to establish a Federal requirement that a
14 qualified home oxygen therapy provider employ or
15 otherwise retain a licensed respiratory therapist to
16 furnish services for which State law does not require
17 them to be furnished by such a licensed respiratory
18 therapist.

19 “(D) Nothing in this title shall be construed as
20 authorizing the Secretary to require an entity that
21 is a qualified home oxygen therapy provider—

22 “(i) to obtain more than one National Pro-
23 vider Identifier for each location in which the
24 provider operates, notwithstanding that the pro-

1 vider also furnishes durable medical equipment
2 under this title;

3 “(ii) to obtain a surety bond if the entity
4 has already posted a surety bond for purposes
5 of meeting such a bond requirement as a sup-
6 plier of durable medical equipment or other
7 lines of business; or

8 “(iii) to accept assignment on claims for
9 home oxygen therapy services or to be a partici-
10 pating supplier with respect to such services.

11 “(3) RETESTING PROCESS.—

12 “(A) IN GENERAL.—The Secretary shall estab-
13 lish a re-testing process that requires qualified home
14 oxygen therapy providers to facilitate re-testing, in
15 accordance with current standards of practice and
16 regulations of the Secretary, of individuals furnished
17 home oxygen therapy services between 60 and 120
18 days of the date on which the services were initiated
19 in the case of individuals who had a diagnosis for
20 whom home oxygen therapy was prescribed for the
21 first time.

22 “(B) EXEMPTION.—Such re-testing process
23 shall not apply to individuals whose diagnosis was
24 for chronic respiratory disease, including for chronic
25 conditions that typically require oxygen therapy for

1 an extended period of time, such as chronic obstructive
2 tive pulmonary disease, emphysema, obstructive
3 chronic bronchitis, bronchiectasis, congestive heart
4 failure, pulmonary fibrosis, obstructive sleep apnea,
5 and Alpha-1 Antitrypsin Deficiency (A1AD).”.

6 (2) PAYMENT.—Section 1834 of such Act (42
7 U.S.C. 1395m) is amended by adding at the end the
8 following new subsection:

9 “(n) PAYMENT FOR HOME OXYGEN THERAPY SERV-
10 ICES.—

11 “(1) ESTABLISHMENT OF SINGLE BUNDLED
12 PAYMENT SYSTEM.—Payment for home oxygen ther-
13 apy services under this part shall be based on a sin-
14 gle bundled payment rate for home oxygen therapy
15 services (including equipment and supplies) deter-
16 mined under this subsection. Such a rate shall—

17 “(A) be applied separately for each patient
18 category established under paragraph (2);

19 “(B) be paid on a per-patient-per-month
20 basis;

21 “(C) be initially computed under para-
22 graph (3) in a budget neutral manner based on
23 allowed payments for providing such services
24 (including equipment and supplies);

1 “(D) be annually updated in accordance
2 with paragraph (4); and

3 “(E) be adjusted for its patient services
4 component for geographic factors under para-
5 graph (5).

6 “(2) PATIENT CATEGORIES.—

7 “(A) IN GENERAL.—Under the single bun-
8 dled payment system, individuals receiving
9 home oxygen therapy services shall be classified
10 into one of three patient categories, as follows:

11 “(i) CATEGORY 1.—A first category of
12 individuals (in this subsection referred to
13 as ‘category 1’) who lack mobility or are
14 prescribed oxygen for nocturnal use only.

15 “(ii) CATEGORY 2.—A second category
16 of individuals (in this subsection referred
17 to as ‘category 2’) who have standard port-
18 ability needs for oxygen therapy.

19 “(iii) CATEGORY 3.—A third category
20 of individuals (in this subsection referred
21 to as ‘category 3’) who have high port-
22 ability needs for oxygen therapy.

23 “(B) DEFINITIONS.—In this paragraph:

24 “(i) The term ‘standard portability’
25 means the use of portable oxygen is esti-

1 mated at less than or equal to 40 liter
2 hours per week.

3 “(ii) The term ‘high portability’
4 means the use of portable oxygen is esti-
5 mated at more than 40 liter hours per
6 week.

7 “(iii) The term ‘liter hours per week’
8 means the total liters of oxygen used dur-
9 ing a month divided by 4.3 (weeks per
10 month) divided by liters per minute pre-
11 scribed divided by 60 minutes.

12 “(C) REQUIREMENT FOR ASSESSMENT.—

13 “(i) IN GENERAL.—Subject to clause
14 (ii), on and after January 1, 2010, an indi-
15 vidual may not be furnished home oxygen
16 therapy services under this part unless a
17 physician has assigned an individual into a
18 patient category and indicated such assign-
19 ment on a certificate of medical need that
20 is given to the home oxygen therapy pro-
21 vider.

22 “(ii) GRANDFATHER.—In the case of
23 an individual who is receiving home oxygen
24 therapy as of January 1, 2010, for which
25 payment is being made under this title,

1 clause (i) shall not apply until January 1,
2 2011, and until the date a physician as-
3 signs the individual into a patient category.
4 Before such date, the individual shall be
5 classified based on the individual's pre-
6 scription as in effect on December 31,
7 2009.

8 “(3) INITIAL PAYMENT RATE.—

9 “(A) IN GENERAL.—

10 “(i) The single bundled payment rate
11 for 2010, 2011, and 2012 shall be com-
12 puted annually by the Secretary in a budg-
13 et neutral manner consistent with subpara-
14 graph (D) using the distributions for each
15 category in clause (ii). The Secretary shall
16 not make any prospective adjustments to
17 the payment rates under this reimburse-
18 ment methodology for such years. The base
19 year shall be the latest available calendar
20 year adjusted data.

21 “(ii) For 2010, 2011, and 2012, the
22 Secretary shall establish the single bundled
23 payment rate by assuming the following
24 distribution of individuals among the cat-
25 egories:

1 “(I) In category 1, 30 percent.

2 “(II) In category 2, 50 percent.

3 “(III) In category 3, 20 percent.

4 The Secretary shall base the allowed pay-
5 ments for categories 1 and 3 upon a per-
6 centage relationship to the allowed pay-
7 ment for category 2. Category 3 allowed
8 payment rate should be greater than cat-
9 egory 2 allowed payment rate and category
10 2 allowed payment rate should be greater
11 than category 1.

12 “(B) PAYMENTS FOR YEARS 2013 AND
13 2014.—The single bundled payment rates for
14 2013 and 2014 shall be computed by the Sec-
15 retary in a budget neutral manner consistent
16 with subparagraph (D) using data obtained
17 through the cost reports required under this
18 section.

19 “(C) PAYMENTS FOR YEARS 2015 AND BE-
20 YOND.—The single bundled payment rates for
21 2015 and subsequent years shall be computed
22 by the Secretary using data obtained through
23 the cost reports required under this section.

24 “(D) BUDGET NEUTRALITY.—The Sec-
25 retary shall calculate the single bundled pay-

1 ment rates established under this section for
2 2010, 2011, 2012, 2013, and 2014 such that
3 the total spending for each year is equivalent in
4 the aggregate to the spending that would have
5 been made for home oxygen therapy during
6 such year if the amendments made by the
7 Medicare Home Oxygen Therapy Services Act
8 of 2009 had not been enacted.

9 “(4) ANNUAL UPDATE BY CPI-U.—The pay-
10 ment rates established under this subsection shall be
11 adjusted for each year (beginning with 2011) in a
12 prospective manner by the Secretary and be pub-
13 lished by October 1 of the previous year based on
14 the percentage increase in the consumer price index
15 for all urban consumers (all items; U.S. city aver-
16 age) applicable to the year involved.

17 “(5) APPLICATION OF GEOGRAPHIC ADJUST-
18 MENT.—The payment rates established under this
19 subsection shall be adjusted, in a budget neutral
20 manner, to take into account differences among
21 areas in labor and transportation costs.

22 “(6) INCLUDING PATIENT CATEGORY AND RE-
23 LATED INFORMATION ON CERTIFICATE OF MEDICAL
24 NEED.—The Secretary shall modify the certificate of
25 medical need used under this part for home oxygen

1 therapy services so that an individual's physician
2 would indicate on the form the appropriate patient
3 category for the individual. Any change in an indi-
4 vidual's category would be made by the physician
5 submitting an updated certificate of medical need
6 form indicating the change in the individual's cat-
7 egory.

8 “(7) RESPONSIBILITIES OF QUALIFIED HOME
9 OXYGEN THERAPY PROVIDERS AND PHYSICIANS.—

10 “(A) PROVIDERS.—A qualified home oxy-
11 gen therapy provider is responsible for moni-
12 toring and periodically re-evaluating, using the
13 Oxygen Patient Evaluation Form, each indi-
14 vidual to whom the provider is furnishing home
15 oxygen therapy services under this part and no-
16 tifying the prescribing physician when the re-
17 sults of such an re-evaluation indicate that a re-
18 assignment in a category under this subsection
19 may be warranted due to a change in the indi-
20 vidual's clinical condition or ambulatory status.

21 “(B) PHYSICIANS.—Such an individual's
22 physician is responsible for making any change
23 in such an individual's category placement and
24 for documenting such change in the individual's
25 medical record and providing an updated cer-

1 tificate of medical need to the home oxygen
2 therapy provider.

3 “(8) COST REPORTS.—

4 “(A) IN GENERAL.—The Secretary in con-
5 sultation with the Home Oxygen Therapy Advi-
6 sory Committee established under paragraph
7 (9) shall develop an annual cost report for
8 qualified home oxygen therapy providers with
9 respect to the costs incurred for equipment,
10 supplies, and services furnished to individuals.
11 Qualified home oxygen therapy providers shall
12 submit such report annually to the Secretary
13 and the Secretary shall not require the submis-
14 sion of more than one such cost report for such
15 a provider for each year.

16 “(B) STREAMLINED REPORT FOR SMALL
17 SUPPLIERS.—Qualified home oxygen therapy
18 providers with not more than \$1,000,000 in
19 revenue from the provision of home oxygen
20 therapy services under this part shall be per-
21 mitted to submit a shorter or streamlined re-
22 port under this paragraph.

23 “(C) IMPLEMENTATION.—The Secretary
24 shall not require the submission of a cost report

1 under this paragraph earlier than January 1,
2 2012.

3 “(9) HOME OXYGEN THERAPY ADVISORY COM-
4 MITTEE.—

5 “(A) IN GENERAL.—The Secretary shall
6 establish and convene an independent, multi-
7 disciplinary, nonpartisan Home Oxygen Ther-
8 apy Advisory Committee (in this paragraph re-
9 ferred to as the ‘Advisory Committee’) (pursu-
10 ant to section 222 of the Public Health Service
11 Act (42 U.S.C. 217a)) not later than 6 months
12 after the date of the enactment of this sub-
13 section.

14 “(B) COMPOSITION.—The Advisory Com-
15 mittee shall consist of such members as the
16 Secretary may appoint and who shall serve for
17 such term as the Secretary may specify. In ap-
18 pointing members, the Secretary shall consult
19 with the home oxygen therapy community. The
20 Advisory Committee shall be comprised of mem-
21 bers of the home oxygen therapy community,
22 including patients, nurses, respiratory thera-
23 pists, physicians, qualified home oxygen therapy
24 providers representing urban and rural markets
25 and the diverse provider community, public

1 health organizations, patient advocates, and
2 manufacturers. In this subparagraph, the term
3 ‘public health organization’ means a private en-
4 tity and does not include a public health agen-
5 cy.

6 “(C) FUNCTIONS.—The Committee shall
7 provide a forum for expert discussion and delib-
8 eration and the formulation of advice and rec-
9 ommendations to the Secretary regarding cov-
10 erage and payment for home oxygen therapy
11 services under this part, including—

12 “(i) selecting, modifying, and updat-
13 ing quality measures;

14 “(ii) developing the objective, evi-
15 dence-based clinical criteria used to define
16 each of the patient categories;

17 “(iii) designing a consensus-based ox-
18 ygen patient evaluation form;

19 “(iv) refining the services included in
20 home oxygen therapy services;

21 “(v) establishing a quality improve-
22 ment program;

23 “(vi) evaluating a comparative effec-
24 tiveness program that also would also in-
25 clude chronic care management; and

1 “(vii) strengthening anti-fraud, abuse,
2 and waste provisions by—

3 “(I) mandating site inspections
4 for all new home oxygen therapy pro-
5 viders;

6 “(II) requiring site inspections
7 for all home oxygen therapy provider
8 renewals;

9 “(III) improving validation of
10 new home oxygen therapy providers
11 by improving the application process
12 for obtaining a National Provider
13 Identifier;

14 “(IV) requiring two additional
15 random, unannounced site visits for
16 all new home oxygen therapy pro-
17 viders during the first year of oper-
18 ation;

19 “(V) requiring a 6-month trial
20 period for new home oxygen therapy
21 providers during which time the pro-
22 vider would receive a preliminary Na-
23 tional Provider Identifier;

24 “(VI) establishing an anti-fraud
25 office within the Centers for Medicare

1 & Medicaid Services to coordinate de-
2 tection and deterrence of fraud and
3 improper payments across the Medi-
4 care and Medicaid programs by ac-
5 cepting and responding to reports of
6 alleged fraud and abuse from physi-
7 cians and providers;

8 “(VII) considering the proper
9 Federal funding levels needed for im-
10 proving fraud prevention;

11 “(VIII) requiring post-payment
12 audit reviews for all new home oxygen
13 therapy providers relying upon 6
14 months’ worth of claims submissions;

15 “(IX) requiring the Centers for
16 Medicare & Medicaid Services to con-
17 duct real-time claims analysis ana-
18 lyzing home oxygen therapy provider
19 claims to identify aberrant billing pat-
20 terns more quickly;

21 “(X) ensuring that all providers
22 are qualified to offer the services for
23 which they submit claims by man-
24 dating cross-checking Medicare and
25 other relevant databases to ensure

1 that home oxygen therapy providers
2 are qualified and accredited for pro-
3 viding home oxygen therapy services;

4 “(XI) establishing written due
5 process procedures for home oxygen
6 therapy providers applying for a Na-
7 tional Provider Identifier, including
8 establishing an administrative appeals
9 process and clear timelines;

10 “(XII) increasing penalties and
11 fines and fraud for activities such as
12 buying or stealing beneficiaries’ Medi-
13 care numbers or physician’s provider
14 numbers; and

15 “(XIII) establishing more rig-
16 orous quality standards.

17 “(D) REPORT.—The Committee shall pro-
18 vide the Secretary with periodic reports that
19 summarize the Committee’s activities and its
20 recommendations for such legislation and ad-
21 ministrative action as it considers appropriate.

22 “(E) AUTHORIZATION OF APPROPRIA-
23 TIONS.—There are authorized to be appro-
24 priated such sums as may be necessary to carry
25 out the purposes of this paragraph.

1 “(10) CLAIMS PROCESSING.—The Secretary
2 shall provide for processing of claims for home oxy-
3 gen therapy services from home oxygen therapy pro-
4 viders to be conducted through the administrative
5 contractors under this title for durable medical
6 equipment.

7 “(11) BENEFICIARY RIGHTS.—The Secretary
8 shall establish through regulation the following pro-
9 tections for individuals receiving home oxygen ther-
10 apy services under this part:

11 “(A) To choose the individual’s local pro-
12 vider of such services from among qualified
13 home oxygen therapy service providers and to
14 change such provider.

15 “(B) To receive communications from the
16 home oxygen therapy provider in a clear and
17 understandable manner.

18 “(C) To privacy and confidentiality in all
19 aspects of treatment and their personal health
20 information consistent with Federal and State
21 laws.

22 “(D) To be informed by the home oxygen
23 therapy provider about and participate, if de-
24 sired, in all aspects of the oxygen therapy serv-
25 ices being furnished to the individual by the

1 provider, and be informed by such provider of
2 the right to refuse treatment, to discontinue
3 treatment, and to refuse to participate in exper-
4 imental research.

5 “(E) To be informed by the home oxygen
6 therapy provider of policies and expectations of
7 the provider regarding patient conduct and re-
8 sponsibilities.

9 “(F) To be informed by the home oxygen
10 therapy provider about the individual’s right to
11 execute advance directives.

12 “(G) To be informed by the home oxygen
13 therapy provider about treatment modalities
14 and categories of equipment relating to home
15 oxygen therapy services for use by the indi-
16 vidual and offered by the provider.

17 “(H) To be informed of the home oxygen
18 therapy provider’s policies regarding 24-hour
19 on-call coverage.

20 “(I) To be informed by the home oxygen
21 therapy provider of the individual’s financial re-
22 sponsibilities with regard to such services.

23 “(J) To be provided with the clinically ap-
24 propriate oxygen equipment and services as
25 agreed upon by the individual (or the individ-

1 ual's representative), the provider, and the pre-
2 scribing physician.

3 “(K) To be informed by the home oxygen
4 therapy provider of any potential changes to the
5 individual's equipment or services regarding
6 home oxygen therapy services and the right to
7 consult with individual's physician regarding
8 such changes to ensure they are appropriate
9 and necessary and the exceptions as specified
10 by the Secretary when a home oxygen therapy
11 provider may change an individual's oxygen
12 equipment.

13 “(L) To be informed by the home oxygen
14 therapy provider of the provider's internal and
15 external grievance processes (as well as how to
16 contact Medicare through the hotline or Bene-
17 ficiary Ombudsman), including the individual's
18 right to file internal or external grievances or
19 both without retaliation or denial of services
20 and the right to file them personally or through
21 a representative of the individual's choosing.

22 “(M) To receive from the home oxygen
23 therapy provider written notice 30 days in ad-
24 vance of an involuntary termination, after the
25 home oxygen therapy provider follows estab-

1 lished involuntary discharge procedures; how-
2 ever, in the case of immediate threats to the
3 health and safety of others, the Secretary may
4 permit the home oxygen therapy provider to use
5 an abbreviated termination procedure.

6 “(N) To be assisted by the home oxygen
7 therapy provider in obtaining the equipment
8 and supplies for home oxygen therapy services
9 prescribed by individual’s treating physician
10 when the individual is traveling.

11 “(O) To receive from the home oxygen
12 therapy provider oxygen supplies, refills, and
13 emergency back-up equipment and refills as ap-
14 propriate.”.

15 (c) EFFECTIVE DATE.—The amendments made by
16 this section shall apply to services and supplies furnished
17 on or after January 1, 2010.



