



H.R. 7931, The Preserving Emergency Access in Key Sites (PEAKS) Act *Rep. Miller (R-WV), Rep. Caraveo (D-CO)*

Medicare's treatment of Critical Access Hospitals Ambulance Services in mountainous areas is misaligned.

- Critical Access Hospitals (CAHs) are important rural hospitals that, due to their unique location and patient population, are reimbursed by Medicare at the cost of providing medical services, which is higher than most other hospitals.
- Under current law, to be eligible for the CAH designation, a hospital must be a **35-mile** drive from another hospital or a **15-mile** drive if the hospital is accessible only by secondary roads or located in mountainous areas.
- Medicare pays the CAH rate for ambulance services provided by a CAH-owned ambulance provider, but only if it is the sole provider within **35 miles**.
 - There is no **15-mile** permission, unlike the general eligibility requirements.
 - Without a **15-mile** permission, access is harmed for seniors in mountainous areas.

Solution: The Preserving Emergency Access in Key Sites (PEAKS) Act (H.R. 7931).

- Permanently aligns Medicare's ambulance reimbursement policy with existing CAH general eligibility requirements.
 - Clarifies that Medicare will pay the CAH rate for CAH-owned ambulances located a **15-mile** drive away in mountainous areas or areas accessible only by secondary roads.
- Ensures existing CAHs in mountainous areas can maintain their CAH status should other hospitals encroach on their 15-mile radius.