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2	United States Court of Appeals
	for the Second Circuit
3	tot the Betono Cittuit
4	A
5	August Term, 2020
6 7	(Argued: September 2, 2020 Decided: April 27, 2021)
8	(Argued: September 2, 2020 Decided: April 27, 2021)
8 9	Docket No. 19-3953
10	Docket No. 17-5755
10	
12	AVON NURSING AND REHABILITATION, BRIGHTONIAN NURSING AND
13	REHABILITATION, WOODSIDE MANOR NURSING AND REHABILITATION,
14	THE SHORE WINDS NURSING AND REHABILITATION, THE HURLBUT
15	NURSING AND REHABILITATION, HORNELL GARDENS NURSING AND
16	REHABILITATION, CONESUS LAKE NURSING AND REHABILITATION,
17	NEWARK MANOR NURSING AND REHABILITATION, PENFIELD PLACE
18	NURSING AND REHABILITATION, HAMILTON MANOR, LATTA ROAD
19	NURSING HOME EAST, LATTA ROAD NURSING HOME WEST, SENECA
20	NURSING AND REHABILITATION, ELDERWOOD AT AMHERST,
21	ELDERWOOD OF LAKESIDE AT BROCKPORT, ELDERWOOD AT
22	CHEEKTOWAGA, ELDERWOOD AT GRAND ISLAND, ELDERWOOD AT
23	HAMBURG, ELDERWOOD OF HORNELL, ELDERWOOD OF UIHLEIN AT
24	LAKE PLACID, ELDERWOOD AT LANCASTER, ELDERWOOD AT
25	LIVERPOOL, ELDERWOOD AT LOCKPORT, ELDERWOOD AT NORTH
26	CREEK, ELDERWOOD AT WAVERLY, ELDERWOOD AT WHEATFIELD,
27	ELDERWOOD AT WILLIAMSVILLE, ELDERWOOD AT RIVERSIDE,
28	ELDERWOOD OF SCALLOP SHELL AT WAKEFIELD, WESTCHESTER
29	CENTER FOR REHABILITATION AND NURSING, HIGHFIELD GARDENS
30	CARE CENTER OF GREAT NECK, SAN SIMEON BY THE SOUND, DRY
31	HARBOR NURSING HOME AND REHABILITATION CENTER,
32	Plaintiffs-Appellants,
33	

1	NEW YORK CENTER FOR REHABILITATION AND NURSING,
2	Plaintiff,
3	V.
4	
5	XAVIER BECERRA, Secretary of the United States
6	Department of Health and Human Services,
7	Defendant-Appellee.*
8	
9 10	Before:
11	KATZMANN, LOHIER, and PARK, Circuit Judges.
12	
13	Plaintiffs-Appellants are a group of nursing homes that participate in both
14	the Medicare and Medicaid programs, making them "dually participating
15	facilities." They challenge the legality of a Final Rule issued by the U.S.
16	Department of Health and Human Services that permits survey teams conducting
17	certain inspections of nursing homes not to include a registered nurse. The United
18	States District Court for the Southern District of New York (Swain, J.) dismissed
19	Plaintiffs' claims, brought under the Medicare and Medicaid Acts, for lack of
20	subject-matter jurisdiction based on claim-channeling and jurisdiction-stripping
21	provisions governing claims arising under the Medicare Act. We conclude,
22	however, that the district court has jurisdiction under 28 U.S.C. §1331 over
23	Plaintiffs' claim arising under the Medicaid Act, which does not incorporate the
24	same claim-channeling and jurisdiction-stripping provisions as the Medicare Act.
25	The Medicare Act's review provisions do not preclude Plaintiffs from challenging
26	the Final Rule in federal court because their challenge is independently rooted in
27	the Medicaid Act. REVERSED and REMANDED for further proceedings.
28	
29	BRIAN MARC FELDMAN, Harter Secrest &
30	Emery LLP, Rochester, NY, for Plaintiffs-
31	Appellants.
32	

 * Under Federal Rule of Appellate Procedure 43, Secretary Xavier Becerra is automatically substituted for former Secretary Alex Azar. The Clerk of Court is respectfully directed to amend the caption accordingly.

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1		CHRISTOPHER CONNOLLY (Arastu K.
2		Chaudhury, on the brief), for Audrey Strauss,
3		United States Attorney for the Southern
4		District of New York, New York, NY, for
5		Defendant-Appellee.
6		
7		James F. Segroves, Reed Smith LLP,
8		Washington, DC, for Amicus Curiae American
9		Health Care Association.
10	PARK, Circuit Judge:	
11	Distriction American to a	no a success of accurate a bound of the transition at a in both

Plaintiffs-Appellants are a group of nursing homes that participate in both the Medicare and Medicaid programs, making them "dually participating facilities." They challenge the legality of a U.S. Department of Health and Human Services ("HHS") regulation that permits survey teams conducting certain inspections of nursing homes not to include a registered nurse. *See* Survey Team Composition, 82 Fed. Reg. 36,530, 36,623–25, 36,635–36 (Aug. 4, 2017) (the "Final Rule").

The United States District Court for the Southern District of New York (Swain, J.) dismissed Plaintiffs' claims for lack of subject-matter jurisdiction based on claim-channeling and jurisdiction-stripping provisions governing claims arising under the Medicare Act. We conclude, however, that the district court has jurisdiction under 28 U.S.C. § 1331 over Plaintiffs' claim arising under the Medicaid Act, which does not incorporate the same claim-channeling and

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1	jurisdiction-stripping provisions as the Medicare Act. The Medicare Act's review
2	provisions do not preclude Plaintiffs from challenging the Final Rule in federal
3	court because their challenge is independently rooted in the Medicaid Act.
4	We reverse the judgment of the district court and remand for further
5	proceedings.
6	I. BACKGROUND
7	A. <u>Statutory Context and the Final Rule</u>
8	Congress created the Medicare and Medicaid programs in 1965. See Social
9	Security Amendments of 1965, Pub. L. No. 89-97, §§ 102, 121, 79 Stat. 286, 291, 343.
10	Medicare, set forth in subchapter XVIII of the Social Security Act, is a federally
11	funded health-insurance program for the aged and disabled. 42 U.S.C. § 1395c.
12	Medicaid, set forth in subchapter XIX, is a cooperative federal-state medical
13	assistance program for individuals "whose income and resources are insufficient
14	to meet the costs of necessary medical services." Id. §§ 1396-1, 1396a. The
15	programs cover certain stays in nursing facilities, and the vast majority of nursing

facilities participate in both Medicare and Medicaid, ¹ making them "[d]ually
participating facilit[ies]." 42 C.F.R. § 488.301.

3	State health agencies are responsible for conducting periodic inspections, or
4	"surveys," and "certifying the compliance of" nursing facilities with the
5	requirements of the Medicare and Medicaid Acts. 42 U.S.C. §§ 1395i-3(g)(1)(A),
6	1396r(g)(1)(A). ² Both Acts direct States to "maintain procedures and adequate
7	staff to investigate complaints of violations of requirements by" nursing
8	facilities. Id. §§ 1395i-3(g)(4), 1396r(g)(4). "A State may maintain and utilize a
9	specialized team (including an attorney, an auditor, and appropriate health care
10	professionals) for the purpose of identifying, surveying, gathering and preserving
11	evidence, and carrying out appropriate enforcement actions against substandard"

¹ See Nat'l Ctr. for Health Stats., U.S. Dep't of Health & Hum. Servs., Long-term Care Providers and Services Users in the United States, 2015–2016, at 9–10 (2019), https://www.cdc.gov/nchs/data/series/sr_03/sr03_43-508.pdf (stating that 97.5% of nursing facilities are certified under Medicare and 95.2% are certified under Medicaid).

² The Medicare and Medicaid Acts identify three types of surveys conducted by State agencies: (1) "standard" surveys, which occur annually to evaluate the quality of care furnished by a facility, *id.* §§ 1395i-3(g)(2)(A), 1396r(g)(2)(A); (2) "extended" surveys, which are conducted after a standard survey reveals substandard care, *id.* §§ 1395i-3(g)(2)(B), 1396r(g)(2)(B); and (3) "special" surveys, which may include standard or "abbreviated standard" surveys, *id.* §§ 1395i-3(g)(2)(A)(II), 1396r(g)(2)(A)(II), and up until the Final Rule's publication, *see* 82 Fed. Reg. at 36,624, included "survey[s] conducted for the purpose of investigating a complaint against a facility," 59 Fed. Reg. 56,116, 56,158 (Nov. 10, 1994). The Secretary may also conduct "validation surveys" to evaluate the adequacy of a State agency's survey results. 42 U.S.C. §§ 1395i-3(g)(3), 1396r(g)(3).

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