

S 1589

Medicare Chronic Care Improvement Act of 2001

Congress: 107 (2001–2003, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Oct 30, 2001

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S11207-11213)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S11207-11213) (Oct 30, 2001)

Official Text: <https://www.congress.gov/bill/107th-congress/senate-bill/1589>

Sponsor

Name: Sen. Rockefeller, John D., IV [D-WV]

Party: Democratic • **State:** WV • **Chamber:** Senate

Cosponsors (3 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Baucus, Max [D-MT]	D · MT		Oct 30, 2001
Sen. Wellstone, Paul D. [D-MN]	D · MN		Oct 30, 2001
Sen. Graham, Bob [D-FL]	D · FL		Nov 1, 2001

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Oct 30, 2001

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
107 HR 3188	Identical bill	Nov 14, 2001: Referred to the Subcommittee on Health.

Medicare Chronic Care Improvement Act of 2001 - Amends title XVIII (Medicare) of the Social Security Act (SSA) to declare that the Secretary of Health and Human Services shall not require the payment of deductibles and coinsurance for existing preventive benefits under Medicare part B (Supplementary Medical Insurance).

Provides for fast-track consideration of prevention benefit legislation.

Directs the Secretary to conduct demonstration projects for the purpose of promoting disease self-management for conditions identified, and appropriately prioritized, by the Secretary for specified at-risk target individuals.

Amends SSA title XVIII to require the Secretary to establish a comprehensive and systematic model for delivering health promotion and disease prevention services, and conduct demonstration projects to develop it.

Provides for coverage of care coordination and assessment services furnished by a care coordinator as a Medicare part B medical service.

Directs the Secretary to provide for appropriate adjustments to specified payment systems to take into account the additional costs incurred in providing items and services under the Medicare program to Medicare beneficiaries who suffer from serious and disabling chronic conditions.

Requires the Secretary to: (1) revise the risk adjustment methodology under SSA title XVIII part C (Medicare+Choice) applicable to payments to Medicare+Choice organizations offering specialized programs for frail elderly and at-risk beneficiaries to take into account variations in costs incurred by such organizations; and (2) establish a demonstration program under which additional payments may be made to such an organization, if certain requirements are met.

Directs the Secretary to: (1) study and report to Congress on chronic condition trends of Medicare beneficiaries and associated service utilization, quality indicators, and cumulative costs; and (2) contract with the Institute of Medicine of the National Academy of Sciences to make a Medicare chronic condition care improvement study and report.

Actions Timeline

- **Oct 30, 2001:** Introduced in Senate
- **Oct 30, 2001:** Sponsor introductory remarks on measure. (CR S11206-11207, S11213)
- **Oct 30, 2001:** Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S11207-11213)