

S 2547

Medicare Hospital Outpatient Department Fair Payment Act of 2002

Congress: 107 (2001–2003, Ended)

Chamber: Senate

Policy Area: Health

Introduced: May 22, 2002

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S4718-4719)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S4718-4719) (May 22, 2002)

Official Text: <https://www.congress.gov/bill/107th-congress/senate-bill/2547>

Sponsor

Name: Sen. Bingaman, Jeff [D-NM]

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

Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Snowe, Olympia J. [R-ME]	R · ME		May 22, 2002
Sen. Murray, Patty [D-WA]	D · WA		Jun 21, 2002
Sen. Schumer, Charles E. [D-NY]	D · NY		Jun 21, 2002
Sen. Torricelli, Robert G. [D-NJ]	D · NJ		Jun 21, 2002
Sen. Clinton, Hillary Rodham [D-NY]	D · NY		Oct 2, 2002

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	May 22, 2002

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
107 HR 5234	Identical bill	Jul 29, 2002: Referred to the Subcommittee on Health.

Summary (as of May 22, 2002)

Medicare Hospital Outpatient Department Fair Payment Act of 2002 - Amends title XVIII (Medicare) of the Social Security Act to revise the Medicare hospital outpatient department (OPD) prospective payment system with regard to: (1) fee schedule amounts for clinic and emergency visits; (2) transitional pass-through for additional costs of innovative medical devices, drugs, and biologicals; (3) OPD fee schedule increase factor; (4) budget neutrality adjustment under requirements for periodic review and adjustments components of the prospective payment system; (4) outlier payments; (5) transitional adjustment to limit decline in payment; and (6) requirement to increase relative payment weights in certain circumstances.

Amends the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000 to provide for permanent extension of provider-based status for any facility or organization that is treated as provider-based in relation to a hospital or critical access hospital under Medicare as of October 1, 2000.

Actions Timeline

- **May 22, 2002:** Introduced in Senate
- **May 22, 2002:** Sponsor introductory remarks on measure. (CR S4716-4717)
- **May 22, 2002:** Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S4718-4719)