

HR 2389

Physician Availability Act of 2003 Congress: 108 (2003–2005, Ended)

Chamber: House Policy Area: Health Introduced: Jun 5, 2003

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jun 24, 2003) **Official Text:** https://www.congress.gov/bill/108th-congress/house-bill/2389

Sponsor

Name: Rep. Visclosky, Peter J. [D-IN-1]

Party: Democratic • State: IN • Chamber: House

Cosponsors (2 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Emanuel, Rahm [D-IL-5]	D·IL		Sep 25, 2003
Rep. Schakowsky, Janice D. [D-IL-9]	D · IL		Oct 28, 2003

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Jun 24, 2003

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Summary (as of Jun 5, 2003)

Physician Availability Act of 2003 - Requires each non-Federal hospital with a specified participation agreement under title XVIII (Medicare) of the Social Security Act, participating under title XIX (Medicaid) of such Act, or receiving Federal funds, and with at least 100 licensed beds, to have a qualified physician available in the hospital (other than in the emergency department) 24 hours a day, seven days a week to attend to the hospital's inpatients. Provides for enforcement, including through civil penalties and suspension or disqualification from Medicare or Medicaid.

Actions Timeline

- Jun 24, 2003: Referred to the Subcommittee on Health.
- Jun 5, 2003: Introduced in House
- Jun 5, 2003: Introduced in House
- Jun 5, 2003: Referred to the House Committee on Energy and Commerce belongs to the public.