

HR 569

Medicare Patient Access to Preventive and Diagnostic Tests Act of 2003

Congress: 108 (2003–2005, Ended)

Chamber: House

Policy Area: Health

Introduced: Feb 5, 2003

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Feb 14, 2003)

Official Text: <https://www.congress.gov/bill/108th-congress/house-bill/569>

Sponsor

Name: Rep. Dunn, Jennifer [R-WA-8]

Party: Republican • **State:** WA • **Chamber:** House

Cosponsors (19 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Deutsch, Peter [D-FL-20]	D · FL		Feb 5, 2003
Rep. Ferguson, Mike [R-NJ-7]	R · NJ		Feb 5, 2003
Rep. McDermott, Jim [D-WA-7]	D · WA		Feb 5, 2003
Rep. Ramstad, Jim [R-MN-3]	R · MN		Feb 5, 2003
Rep. Emerson, Jo Ann [R-MO-8]	R · MO		Feb 25, 2003
Rep. Green, Mark [R-WI-8]	R · WI		Feb 25, 2003
Rep. Kleczka, Gerald D. [D-WI-4]	D · WI		Feb 25, 2003
Rep. Sessions, Pete [R-TX-32]	R · TX		Feb 25, 2003
Rep. English, Phil [R-PA-3]	R · PA		Feb 27, 2003
Rep. Price, David E. [D-NC-4]	D · NC		Mar 5, 2003
Rep. Rush, Bobby L. [D-IL-1]	D · IL		Mar 20, 2003
Rep. McGovern, James P. [D-MA-3]	D · MA		Apr 10, 2003
Rep. Frank, Barney [D-MA-4]	D · MA		Apr 29, 2003
Rep. Eshoo, Anna G. [D-CA-14]	D · CA		May 8, 2003
Rep. Markey, Edward J. [D-MA-7]	D · MA		May 9, 2003
Rep. Meehan, Martin T. [D-MA-5]	D · MA		Jun 24, 2003
Rep. Reynolds, Thomas M. [R-NY-26]	R · NY		Jun 24, 2003
Rep. Oberstar, James L. [D-MN-8]	D · MN		Jul 14, 2003
Rep. Inslee, Jay [D-WA-1]	D · WA		Sep 3, 2003

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Feb 14, 2003
Ways and Means Committee	House	Referred to	Feb 10, 2003

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Summary (as of Feb 5, 2003)

Medicare Patient Access to Preventive and Diagnostic Tests Act of 2003 - Amends title XVIII (Medicare) of the Social Security Act to direct the Secretary of Health and Human Services to: (1) establish procedures for determining the basis for, and amount of, Medicare payment for any clinical diagnostic laboratory test with respect to which a new or substantially revised Health Care Financing Administration Common Procedure Coding System (HCPCS) code is assigned on or after January 1, 2004; (2) set the national fee schedule amounts for tests performed; and (3) establish a mechanism for review of the adequacy of payment amounts for a particular test.

Prohibits the Secretary from: (1) assigning a code for a new clinical diagnostic laboratory test that differs from the code recommended by the American Medical Association Common Procedure Terminology Editorial Panel and results in lower payment than would be made if the Secretary accepted such recommendation solely on the basis that the test is a test that may be performed by a laboratory with a certificate of waiver under the Public Health Service Act; or (2) substituting for the fee schedule amount otherwise established under the Act for a test a least costly alternative fee schedule amount.

Actions Timeline

- **Feb 14, 2003:** Referred to the Subcommittee on Health.
- **Feb 10, 2003:** Referred to the Subcommittee on Health.
- **Feb 5, 2003:** Introduced in House
- **Feb 5, 2003:** Introduced in House
- **Feb 5, 2003:** Referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.
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