

S 823

Medicare Innovation Responsiveness Act of 2003

Congress: 108 (2003–2005, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Apr 8, 2003

Current Status: Read twice and referred to the Committee on Finance.

Latest Action: Read twice and referred to the Committee on Finance. (Apr 8, 2003)

Official Text: https://www.congress.gov/bill/108th-congress/senate-bill/823

Sponsor

Name: Sen. Santorum, Rick [R-PA]

Party: Republican • State: PA • Chamber: Senate

Cosponsors (8 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Clinton, Hillary Rodham [D-NY]	D · NY		Apr 8, 2003
Sen. Coleman, Norm [R-MN]	R · MN		Apr 8, 2003
Sen. Jeffords, James M. [I-VT]	I · VT		Apr 8, 2003
Sen. Kyl, Jon [R-AZ]	R · AZ		Apr 8, 2003
Sen. Lincoln, Blanche L. [D-AR]	D · AR		Apr 8, 2003
Sen. Smith, Gordon H. [R-OR]	R · OR		Apr 9, 2003
Sen. Chambliss, Saxby [R-GA]	R · GA		Apr 28, 2003
Sen. Bayh, Evan [D-IN]	D · IN		May 5, 2003

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Apr 8, 2003

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
108 HR 941	Identical bill	Mar 10, 2003: Referred to the Subcommittee on Health.

Medicare Innovation Responsiveness Act of 2003 - Amends part D (Miscellaneous Provisions) of title XVIII (Medicare) of the Social Security Act (SSA) to: (1) prescribe criteria for the Secretary of Health and Human Services to use in making national coverage determinations; (2) direct the Secretary to establish a Council for Technology and Innovation within the Centers for Medicare and Medicaid Services to coordinate coverage, coding, and payment processes with respect to new technologies and procedures under Medicare in order to expedite patient access to new technologies and therapies; and (3) revise the Medicare coverage determination appeals process.

Directs the Secretary to establish a process that provides for the assignment of inpatient hospital codes for new medical services and related technologies as of April 1 of each year.

Requires the Secretary to establish a process for the assignment of Health Care Financing Administration Common Procedure Coding System (HCPCS) Level II codes each calendar quarter for new medical services and technologies.

Amends SSA title XI to provide that, if the National Committee on Vital and Health Statistics has not made a recommendation to the Secretary before April 1, 2003, with respect to the adoption of the International Classification of Diseases, 10th Revision, Procedure Coding System (ICD-10-PCS) as a standard for the reporting of inpatient hospital services, the Secretary may adopt ICD-10-PCS as such a standard without receiving such a recommendation.

Revises requirements for the use of internal and external data for annual adjustments to the inpatient hospital prospective payment system (PPS) and outpatient hospital PPS.

Provides for limitation on use of foreign payer data in determining Medicare payment amounts.

Revises requirements for the recognition of the costs of new medical services and technologies under the inpatient hospital PPS.

Establishes requirements for any agreement or contract to perform the function of making local coverage determinations.

Modifies requirements for the use of carriers for administration of benefits with respect to national inherent reasonableness determinations.

Actions Timeline

- **Apr 8, 2003:** Introduced in Senate
- **Apr 8, 2003:** Sponsor introductory remarks on measure. (CR S4972-4973)
- **Apr 8, 2003:** Read twice and referred to the Committee on Finance.