

HR 1381

Medicare Nursing Facility Pay-for-Performance Act of 2005

Congress: 109 (2005–2007, Ended)

Chamber: House
Policy Area: Health
Introduced: Mar 17, 2005

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Mar 24, 2005) **Official Text:** https://www.congress.gov/bill/109th-congress/house-bill/1381

Sponsor

Name: Rep. English, Phil [R-PA-3]

Party: Republican • State: PA • Chamber: House

Cosponsors (3 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Tanner, John S. [D-TN-8]	$D \cdot TN$		Mar 17, 2005
Rep. Wilson, Heather [R-NM-1]	$R \cdot NM$		Mar 17, 2005
Rep. Northup, Anne M. [R-KY-3]	$R \cdot KY$		Apr 5, 2005

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred To	Mar 17, 2005
Ways and Means Committee	House	Referred to	Mar 24, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Medicare Nursing Facility Pay-for-Performance Act of 2005 - Amends title XVIII (Medicare) of the Social Security Act (SSA) to direct the Secretary of Health and Human Services, through a contract with a qualified independent party (such as the National Quality Forum), to provide for identification of: (1) between ten and 15 quality measures for the performance of skilled nursing facilities under Medicare; and (2) the data to be reported, including their collection and formatting, on a calendar quarter basis for each such quality measure.

Requires the values obtained for quality measures to be appropriately risk-adjusted as applied to individual skilled nursing facilities in order to increase the likelihood that any differences in such values reflect differences in the care provided by the facilities and not differences in the characteristics of their residents.

Provides for: (1) adjusting payments for skilled nursing facilities based on quality performance, including an increase of two percent for facilities in the top ten percent in quality as well as a decrease of one percent for facilities below the quality threshold; (2) limiting market basket increases to facilities that voluntarily report information; and (3) using FY 2005 payment rates as a floor for subsequent updates.

Establishes the Long-Term Care Financing Commission to analyse and report to Congress on the financing of long-term care.

Actions Timeline

- Mar 24, 2005: Referred to the Subcommittee on Health.
- Mar 17, 2005: Introduced in House
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- Mar 17, 2005: Referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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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