

S 1784

National MEDiC Act

Congress: 109 (2005–2007, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Sep 28, 2005

Current Status: Read twice and referred to the Committee on Health, Education, Labor, and Pensions.

Latest Action: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (Sep 28, 2005)

Official Text: <https://www.congress.gov/bill/109th-congress/senate-bill/1784>

Sponsor

Name: Sen. Clinton, Hillary Rodham [D-NY]

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

Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Obama, Barack [D-IL]	D · IL		Sep 28, 2005

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Sep 28, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

National Medical Error Disclosure and Compensation Act or the National MEDiC Act - Amends the Public Health Service Act to require the Secretary of Health and Human Services to establish the Office of Patient Safety and Health Care Quality to improve patient safety and reduce medical errors across the health care system.

Requires the Director of the Office to establish and maintain a National Patient Safety Database to receive nonidentifiable patient safety work product.

Requires the Secretary, acting through the Director, to establish the National Medical Error Disclosure and Compensation (MEDiC) Program to provide for the confidential disclosure of medical errors and patient safety events, reduce preventable medical errors, ensure patient access to fair compensation for medical injury due to medical error, negligence, or malpractice, and reduce the cost of medical liability for health care providers. Requires Program participants to: (1) spend savings from the Program on reducing medical liability premiums or on activities to reduce medical errors; (2) report to a patient safety officer any medical error or patient safety event or any legal action related to the medical liability of a health care provider; (3) report to the patient any medical error that resulted in harm; and (4) offer to negotiate compensation with the patient and offer to provide an apology.

Requires the Director to award grants to facilitate the reporting, collection, and analysis of patient safety data and the development and dissemination of training guidelines and other recommendations to reduce medical errors and improve patient safety and quality of care.

Requires the Director to analyze: (1) patient safety data to determine performance and systems standards, tools, and best practices for health care providers; (2) the medical liability insurance market to determine legal costs related to medical liability, factors leading to such legal costs, and the success of any state reforms; and (3) patient safety data to examine cases that were not successfully negotiated through the Program.

Actions Timeline

- **Sep 28, 2005:** Introduced in Senate
- **Sep 28, 2005:** Sponsor introductory remarks on measure. (CR S10599)
- **Sep 28, 2005:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions.