

S 1952

Critical Access to Health Information Technology Act of 2005

Congress: 109 (2005–2007, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Nov 2, 2005

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

Latest Action: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S12241-12242) (Nov 2, 2005)

Official Text: <https://www.congress.gov/bill/109th-congress/senate-bill/1952>

Sponsor

Name: Sen. Coleman, Norm [R-MN]

Party: Republican • State: MN • Chamber: Senate

Cosponsors (6 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Bayh, Evan [D-IN]	D · IN		Nov 2, 2005
Sen. Cornyn, John [R-TX]	R · TX		Nov 2, 2005
Sen. Lugar, Richard G. [R-IN]	R · IN		Nov 2, 2005
Sen. Cochran, Thad [R-MS]	R · MS		Nov 17, 2005
Sen. Isakson, Johnny [R-GA]	R · GA		Dec 13, 2005
Sen. Dayton, Mark [D-MN]	D · MN		Mar 30, 2006

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Nov 2, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Critical Access to Health Information Technology Act of 2005 - Requires the Secretary of Health and Human Services to establish a program to award grants to states to increase access to health care in rural areas by improving health information technology.

Requires a state that receives such a grant to designate a lead agency to: (1) administer the grant; (2) develop the state plan for use of grant funds; and (2) coordinate the expenditure of funds and provision of services under the grant with other federal and state health care programs.

Directs the lead agency to award local grants on a competitive basis based on the extent to which an entity: (1) demonstrates a need to improve its health information reporting and health information technology; and (2) will serve a community with a significant low-income or other medically underserved population. Requires each grant recipient to be a government-owned or private nonprofit hospital located in a rural area.

Requires the lead agency to annually report to the Secretary on: (1) the amounts received under the grant; (2) the amounts allocated to state grant recipients; and (3) the types of expenditures made by local grant recipients.

Requires the Secretary to review and monitor state compliance with the requirements of this Act.

Directs the Secretary to promulgate a final rule concerning the replacement of the International Statistical Classification of Diseases, 9th revision, Clinical Modification with the International Statistical Classification of Diseases and Related Health Problems, 10th revision, Clinical Modification and Clinical Modification Coding System. Authorizes the Secretary to adopt specified standards for electronic health care transactions that are recommended in relation to such replacements.

Actions Timeline

- **Nov 2, 2005:** Introduced in Senate
- **Nov 2, 2005:** Sponsor introductory remarks on measure. (CR S12240-12241)
- **Nov 2, 2005:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S12241-12242)