

S 2260

Patients Before Profits Act of 2006

Congress: 109 (2005–2007, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Feb 8, 2006

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

Latest Action: Read twice and referred to the Committee on Finance. (Feb 8, 2006)

Official Text: <https://www.congress.gov/bill/109th-congress/senate-bill/2260>

Sponsor

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

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

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Feb 8, 2006

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
109 HR 5064	Related bill	Apr 19, 2006: Referred to the Subcommittee on Health, for a period to be subsequently determined by the Chairman .
109 HR 4719	Identical bill	Feb 17, 2006: Referred to the Subcommittee on Health.

Patients Before Profits Act of 2006 - Amends title XVIII (Medicare) of the Social Security Act (SSA), as amended by the Deficit Reduction Act of 2005, with respect to the health status adjustment to certain monthly payments to Medicare+Choice organizations. Repeals the limitation to 2008, 2009, and 2010 of the requirement that, in applying such adjustment to payment amounts, the Secretary of Health and Human Services ensure that it reflects changes in treatment and coding practices in the fee-for-service sector, and reflects any differences in coding patterns between Medicare Advantage (MA) plans and Medicare providers under parts A and B. Requires the Secretary's analysis of such differences to be completed in time to ensure that the results are incorporated into the risk scores for 2008 and subsequent years (currently, only the risk scores for 2008, 2009, and 2010).

Amends SSA title XVIII to repeal the requirement that the Secretary establish an MA Regional Plan Stabilization Fund.

Amends SSA title XVIII, as amended by the Deficit Reduction Act of 2005, to repeal: (1) the state option for alternative premiums and cost sharing; (2) certain special rules for cost sharing for prescription drugs; (3) a state option for permitting hospitals to impose cost sharing for non-emergency care furnished in an emergency department; (2) the state option to provide benchmark benefit packages; and (3) the authority and mandate to establish Health Opportunity Accounts demonstrations.

Actions Timeline

- **Feb 8, 2006:** Introduced in Senate
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