

HR 3607

Future of Healthcare--Granting Access to Innovation in America Act (GAIA Act)

Congress: 109 (2005–2007, Ended)

Chamber: House

Policy Area: Health

Introduced: Jul 28, 2005

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Aug 5, 2005)

Official Text: <https://www.congress.gov/bill/109th-congress/house-bill/3607>

Sponsor

Name: Rep. Sweeney, John E. [R-NY-20]

Party: Republican • **State:** NY • **Chamber:** House

Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Rep. McHugh, John M. [R-NY-23]	R · NY		Nov 1, 2005
Rep. McNulty, Michael R. [D-NY-21]	D · NY		Nov 2, 2005
Rep. Kuhl, John R. "Randy", Jr. [R-NY-29]	R · NY		Nov 3, 2005
Rep. Fattah, Chaka [D-PA-2]	D · PA		Nov 9, 2005
Rep. Hinchey, Maurice D. [D-NY-22]	D · NY		Dec 13, 2005

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Aug 5, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

The Future of Healthcare-- Granting Access to Innovation in America Act (GAIA Act) - Authorizes the Secretary of Health and Human Services to make grants to hospitals and skilled nursing facilities to carry out demonstration projects aimed at reducing the rate of medication errors and improving the quality of care by installing or upgrading computerized technology that: (1) provides information on drug-allergy contraindications and drug interactions; (2) ensures that all drug orders are legible; and (3) provides physicians and other clinicians with a menu of medications, complete with default doses and a range of potential doses for each medication.

Requires grant applicants to agree to provide for technology including software that assists clinicians who order prescription drugs and tests in making medication-related decisions and that provides for an electronic medication administration record. Authorizes grant expenditures to purchase, install, and update such technology. Sets forth matching requirements.

Requires each applicant to agree to submit to the Secretary, acting through the National Health Information Technology Coordinator, a report detailing: (1) quantitative reductions in medication errors; (2) the level of staff compliance; (3) the difference between administrative and clinical workflows before and after implementation of the technology; (4) alterations and improvements regarding the workflow in facilities that have the technology; (5) an analysis of the improvement of the quality of care and patient satisfaction within the hospital or skilled nursing facility involved; and (6) the overall economic savings associated with usage of the technology.

Actions Timeline

- **Aug 5, 2005:** Referred to the Subcommittee on Health.
- **Jul 28, 2005:** Introduced in House
- **Jul 28, 2005:** Referred to the House Committee on Energy and Commerce.

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