

## S 898

### Patient Navigator Outreach and Chronic Disease Prevention Act of 2005

**Congress:** 109 (2005–2007, Ended)

**Chamber:** Senate

**Policy Area:** Health

**Introduced:** Apr 25, 2005

**Current Status:** Placed on Senate Legislative Calendar under General Orders. Calendar No. 115.

**Latest Action:** Placed on Senate Legislative Calendar under General Orders. Calendar No. 115. (May 25, 2005)

**Official Text:** <https://www.congress.gov/bill/109th-congress/senate-bill/898>

### Sponsor

**Name:** Sen. Hutchison, Kay Bailey [R-TX]

**Party:** Republican • **State:** TX • **Chamber:** Senate

### Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Bingaman, Jeff [D-NM]	D · NM		Apr 25, 2005
Sen. Brownback, Sam [R-KS]	R · KS		Apr 25, 2005
Sen. Cochran, Thad [R-MS]	R · MS		Apr 25, 2005
Sen. Kennedy, Edward M. [D-MA]	D · MA		Apr 25, 2005
Sen. Talent, Jim [R-MO]	R · MO		Jun 22, 2005

### Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Reported By	May 25, 2005

### Subjects & Policy Tags

#### Policy Area:

Health

### Related Bills

Bill	Relationship	Last Action
109 HR 1812	Related bill	<b>Jun 29, 2005:</b> Became Public Law No: 109-18.

Patient Navigator Outreach and Chronic Disease Prevention Act of 2005 - (Sec. 2) Amends the Public Health Service Act to authorize the Secretary of Health and Human Services, acting through the Administrator of the Health Resources and Services Administration (HRSA), to make grants to eligible entities for the development and operation of demonstration programs to provide patient navigator services to improve health care outcomes. Requires the Secretary to coordinate with, and ensure the participation of, the Indian Health Service, the National Cancer Institute, and the Office of Rural Health Policy.

Requires that each grantee agree to recruit, assign, train, and employ patient navigators who have direct knowledge of the communities they serve to facilitate the care of individuals, including by: (1) acting as contacts for individuals seeking prevention or early detection services for cancer or other chronic diseases; (2) facilitating the involvement of community organizations to provide better access to high-quality health care services to individuals at risk for, or who have, cancer or other chronic diseases; (3) coordinating with the relevant health insurance ombudsman programs to provide information to such individuals about health coverage; (4) notifying individuals of clinical trials; (5) helping patients overcome barriers within the health care system to ensure prompt diagnostic and treatment resolution of an abnormal finding of cancer or other chronic disease; and (6) conducting ongoing outreach to health disparity populations.

Requires the Secretary to: (1) require each grant recipient to prohibit patient navigators from accepting anything of value in return for referring an individual to a particular health care provider; and (2) prohibit the use of any grant funds to pay any fees or costs resulting from any proceeding to resolve a legal dispute. Allows the Secretary to grant awards for a period of no more than three years, with a one-year extension.

Requires the Secretary to: (1) direct that each grant application outline how the eligible entity will establish baseline measures and benchmarks that meet the Secretary's requirements to evaluate program outcomes; (2) establish uniform baseline measures to properly evaluate the impact of the demonstration projects; (3) give preference to those entities that demonstrate plans to utilize patient navigator services to overcome significant barriers to improve health care outcomes within their respective communities; and (4) ensure coordination of the grant programs under this Act with existing authorized programs to facilitate access to high-quality health care services.

Requires the Secretary to study the program and report to Congress on the results, including an evaluation of program outcomes and recommendations as to whether such programs could be used to improve patient outcomes in other public health areas.

Sets forth reporting requirements.

Authorizes appropriations.

### **Actions Timeline**

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- **May 25, 2005:** Committee on Health, Education, Labor, and Pensions. Reported by Senator Enzi with an amendment in the nature of a substitute. With written report No. 109-73.
- **May 25, 2005:** Placed on Senate Legislative Calendar under General Orders. Calendar No. 115.
- **Apr 27, 2005:** Committee on Health, Education, Labor, and Pensions. Ordered to be reported with an amendment in the nature of a substitute favorably.
- **Apr 25, 2005:** Introduced in Senate
- **Apr 25, 2005:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S4191-4192)

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