

S 338

Medicare Long-Term Care Hospital Improvement Act of 2007

Congress: 110 (2007–2009, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Jan 18, 2007

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

Latest Action: Read twice and referred to the Committee on Finance. (Jan 18, 2007)

Official Text: <https://www.congress.gov/bill/110th-congress/senate-bill/338>

Sponsor

Name: Sen. Conrad, Kent [D-ND]

Party: Democratic • State: ND • Chamber: Senate

Cosponsors (7 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Dorgan, Byron L. [D-ND]	D · ND		Jan 18, 2007
Sen. Hatch, Orrin G. [R-UT]	R · UT		Jan 18, 2007
Sen. Lincoln, Blanche L. [D-AR]	D · AR		Jan 18, 2007
Sen. Vitter, David [R-LA]	R · LA		Jan 18, 2007
Sen. Wyden, Ron [D-OR]	D · OR		Jan 18, 2007
Sen. Specter, Arlen [R-PA]	R · PA		Apr 17, 2007
Sen. Johnson, Tim [D-SD]	D · SD		Sep 18, 2007

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Jan 18, 2007

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
110 HR 863	Text similarities	Feb 23, 2007: Referred to the Subcommittee on Emergency Communications, Preparedness, and Response.

Medicare Long-Term Care Hospital Improvement Act of 2007 - Amends title XVIII (Medicare) of the Social Security Act to prescribe requirements for a long-term care hospital (LTCH) and patient criteria for prospective payment to an LTCH.

Directs the Secretary of Health and Human Services to: (1) determine a list of medical conditions associated with a high severity of illness of patients who are appropriate for treatment in long-term care hospitals, as indicated by the presence of clinical comorbidities in accordance with a methodology specified by the Secretary; and (2) study and report to Congress on appropriate quality measures for Medicare beneficiaries receiving care in LTCHs.

Directs the Secretary to choose three quality measures from the study for LTCHs to report.

Amends the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000 to require annual updates of LTCH base rates and wage indices and the reweighting of LTCH-DRGs.

Prohibits the Secretary from extending application of the 25% (or applicable percentage) patient threshold payment adjustment to freestanding LTCHs.

Directs the Secretary to permit up to 75% of the discharged Medicare inpatient population: (1) of an applicable hospital to be admitted from a co-located urban single or co-located MSA dominant hospital without adjustment to the hospital's LTCH prospective payment system payment in a specified manner; and (2) of an applicable hospital located in a rural area to be admitted from a co-located hospital without such an adjustment, either.

Actions Timeline

- **Jan 18, 2007:** Introduced in Senate
- **Jan 18, 2007:** Sponsor introductory remarks on measure. (CR S765)
- **Jan 18, 2007:** Read twice and referred to the Committee on Finance.