

HR 5545

Ensuring the Future Physician Workforce Act of 2008

Congress: 110 (2007–2009, Ended)

Chamber: House

Policy Area: Health

Introduced: Mar 6, 2008

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Mar 6, 2008)

Official Text: <https://www.congress.gov/bill/110th-congress/house-bill/5545>

Sponsor

Name: Rep. Burgess, Michael C. [R-TX-26]

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

Cosponsors (6 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Sessions, Pete [R-TX-32]	R · TX		Apr 8, 2008
Rep. Brady, Kevin [R-TX-8]	R · TX		Apr 10, 2008
Rep. Jackson-Lee, Sheila [D-TX-18]	D · TX		Apr 22, 2008
Rep. McCotter, Thaddeus G. [R-MI-11]	R · MI		Apr 29, 2008
Rep. Smith, Lamar [R-TX-21]	R · TX		May 19, 2008
Rep. Granger, Kay [R-TX-12]	R · TX		Jul 22, 2008

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Mar 6, 2008
Ways and Means Committee	House	Referred To	Mar 6, 2008

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
110 S 2729	Identical bill	Mar 6, 2008: Read twice and referred to the Committee on Finance.
110 HR 2585	Related bill	Oct 2, 2007: Sponsor introductory remarks on measure. (CR H11149-11155)

Ensuring the Future Physician Workforce Act of 2008 - Amends title XVIII (Medicare) of the Social Security Act (SSA), as amended by the Medicare, Medicaid, and SCHIP Extension Act of 2007 (the Act), with respect to the formula for calculating payments for physicians' services. Resets to 2007 the base year for application of the sustainable growth rate formula, which shall be eliminated in 2010.

Amends the Tax Relief and Health Care Act of 2006, as amended by the Act, to extend the current transitional bonus payments.

Directs the Secretary of Health and Human Services to establish a reporting system for quality measures relating to physicians' services that focus on disease-specific high cost conditions.

Amends SSA title XVIII to direct the Secretary to create standards for health information technology (HIT) payment incentives.

Amends SSA title XI to create safe harbors to antikickback and civil and criminal penalties for provision of HIT and training services.

Directs the Secretary to study and report to Congress on the impact of such safe harbors.

Amends SSA title XVIII to create an exception to the limitation on certain physician referrals for the provision of HIT and training services to health care professionals.

Directs the Secretary to report annually to: (1) each physician information on the physician's total Medicare billings; and (2) each individual entitled to benefits under Medicare part A (Hospital Insurance) and part B (Supplementary Medical Insurance) on the amount of Medicare payments made to or on behalf of the individual during the year involved.

Directs the Secretary to collect data on annual savings in expenditures in the Medicare program due to physicians' services that resulted in hospital or in-patient diversion.

Requires the Board of Trustees of the Federal Hospital Insurance Trust Fund and of the Federal Supplementary Medical Insurance Trust Fund to monitor and examine the extent to which the different funding mechanisms under Medicare parts A, B, and D (Voluntary Prescription Drug Benefit Program) provide an appropriate alignment with the program goals of the respective parts.

Directs the Secretary to arrange for a study of price inputs and relative values for physicians' services recommended by the AMA/Specialty Society Relative Value Unit Scale Update Committee process.

Requires the Secretary to provide for a study of, and report to Congress on, health care disparities in high-risk health condition areas and minority communities with respect to the impact reporting requirements may have on physician penetration in such communities.

Actions Timeline

- **Mar 6, 2008:** Introduced in House
- **Mar 6, 2008:** Referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.
- **Mar 6, 2008:** Referred to the Subcommittee on Health.