

HR 2599

Rural Health Quality Advisory Commission Act of 2009

Congress: 111 (2009–2011, Ended)

Chamber: House

Policy Area: Health

Introduced: May 21, 2009

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jun 2, 2009)

Official Text: <https://www.congress.gov/bill/111th-congress/house-bill/2599>

Sponsor

Name: Rep. Herseth Sandlin, Stephanie [D-SD-At Large]

Party: Democratic • State: SD • Chamber: House

Cosponsors (2 total)

| Cosponsor | Party / State | Role | Date Joined |
|------------------------------------|---------------|------|--------------|
| Rep. Pomeroy, Earl [D-ND-At Large] | D · ND | | May 21, 2009 |
| Rep. Walden, Greg [R-OR-2] | R · OR | | May 21, 2009 |

Committee Activity

| Committee | Chamber | Activity | Date |
|-------------------------------|---------|-------------|-------------|
| Energy and Commerce Committee | House | Referred to | Jun 2, 2009 |

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Rural Health Quality Advisory Commission Act of 2009 - Directs the Secretary of Health and Human Services (HHS) to establish the Rural Health Quality Advisory Commission to develop, coordinate, and facilitate implementation of a national plan for rural health quality improvements. Requires that such plan: (1) identify objectives for rural health quality improvement; (2) identify strategies to eliminate known gaps in rural health system capacity and improve rural health quality; and (3) provide for federal programs to identify opportunities for strengthening and aligning policies and programs to improve rural health quality.

Directs the Commission to: (1) design demonstration projects to test alternative models for rural health quality improvement, including with respect to both personal and population health; and (2) monitor progress towards identified objectives.

Requires the Secretary to make grants for demonstration projects to implement and evaluate methods for improving the quality of health care in rural communities that include: (1) alternative community models; (2) innovative approaches to the financing and delivery of health services; and (3) the development of quality improvement support structures to assist rural health systems and professionals. Directs the Secretary to: (1) expedite Medicaid and Medicare waivers as necessary to carry out such demonstration projects; and (2) provide for an independent evaluation of such projects.

Actions Timeline

- **Jun 2, 2009:** Referred to the Subcommittee on Health.
- **May 21, 2009:** Introduced in House
- **May 21, 2009:** Referred to the House Committee on Energy and Commerce.