

HR 2824

Doctor-Patient Relationship and Research Protection Act

Congress: 111 (2009–2011, Ended)

Chamber: House

Policy Area: Health

Introduced: Jun 11, 2009

Current Status: Referred to the Subcommittee on Military Personnel.

Latest Action: Referred to the Subcommittee on Military Personnel. (Jun 24, 2009)

Official Text: <https://www.congress.gov/bill/111th-congress/house-bill/2824>

Sponsor

Name: Del. Christensen, Donna M. [D-VI-At Large]

Party: Democratic • State: VI • Chamber: House

Cosponsors (6 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Boustany, Charles W., Jr. [R-LA-7]	R · LA		Jun 11, 2009
Rep. Herger, Wally [R-CA-2]	R · CA		Jun 11, 2009
Rep. Reichert, David G. [R-WA-8]	R · WA		Jul 31, 2009
Rep. Heller, Dean [R-NV-2]	R · NV		Oct 8, 2009
Rep. Tiberi, Patrick J. [R-OH-12]	R · OH		Oct 8, 2009
Rep. Lee, Christopher J. [R-NY-26]	R · NY		Mar 2, 2010

Committee Activity

Committee	Chamber	Activity	Date
Armed Services Committee	House	Referred to	Jun 24, 2009
Energy and Commerce Committee	House	Referred to	Jun 12, 2009
Veterans' Affairs Committee	House	Referred to	Jun 12, 2009
Ways and Means Committee	House	Referred To	Jun 11, 2009

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Doctor-Patient Relationship and Research Protection Act - Amends the American Recovery and Reinvestment Act of 2009 to: (1) expand the membership of the Federal Coordinating Council for Comparative Effectiveness Research; and (2) require the Council to provide for a public comment period prior to obligating funds for comparative effectiveness research, support increased public awareness of such research, and identify conflicts of interest in appointing members of the Council.

Prohibits the Administrator of the Centers for Medicare & Medicaid Services from using federally funded clinical comparative effectiveness research data to make coverage determinations under Medicare for medical treatments, services, and items on the basis of cost.

Provides for expedited appeals of Medicare coverage determinations using federally funded comparative effectiveness research.

Denies federal funding for clinical comparative effectiveness research that does not consider racial, ethnic, gender, and geographic differences within patient subpopulations.

Actions Timeline

- **Jun 24, 2009:** Referred to the Subcommittee on Military Personnel.
- **Jun 12, 2009:** Referred to the Subcommittee on Health.
- **Jun 11, 2009:** Introduced in House
- **Jun 11, 2009:** Referred to House Energy and Commerce
- **Jun 11, 2009:** Referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, Armed Services, and Veterans' Affairs, 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.
- **Jun 11, 2009:** Referred to House Ways and Means
- **Jun 11, 2009:** Referred to House Armed Services
- **Jun 11, 2009:** Referred to House Veterans' Affairs