

S 2984

Medicaid DSH Integrity Act

Congress: 111 (2009–2011, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Feb 4, 2010

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

Latest Action: Read twice and referred to the Committee on Finance. (Feb 4, 2010)

Official Text: <https://www.congress.gov/bill/111th-congress/senate-bill/2984>

Sponsor

Name: Sen. Landrieu, Mary L. [D-LA]

Party: Democratic • **State:** LA • **Chamber:** Senate

Cosponsors (2 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Vitter, David [R-LA]	R · LA		Feb 4, 2010
Sen. McCaskill, Claire [D-MO]	D · MO		Nov 18, 2010

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Feb 4, 2010

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
111 HR 4250	Identical bill	Dec 10, 2009: Referred to the Subcommittee on Health.

Medicaid DSH Integrity Act - Directs the Secretary of Health and Human Services (HHS) to indicate, in appropriate guidance, that the Centers for Medicare & Medicaid Services (CMS) do not intend to enforce any changes in policy related to calculating the limits on the adjustment in payment under title XIX (Medicaid) of the Social Security Act for inpatient hospital services furnished by disproportionate share hospitals (DSH) that were contained in the Medicaid DSH auditing and reporting regulations the CMS issued pursuant to the Medicare Prescription Drug Improvement and Modernization Act of 2003.

Requires the Secretary to publish an interim final rule to revise such regulations as necessary to: (1) correct such policy changes; (2) provide appropriate guidance for otherwise implementing those auditing and reporting regulations; and (3) provide for specified regulatory changes to be included in the new interim rule.

Requires the CMS, in defining the costs of furnishing services to individuals with no health insurance (or other source of third-party coverage), to permit inclusion of all costs related to services provided to patients with no insurance for the service rendered, even if the patient has insurance that covers other services. Declares that the receipt by a hospital of nominal payments related to a service shall not constitute health insurance or a source of third-party coverage.

Actions Timeline

- **Feb 4, 2010:** Introduced in Senate
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