

S 1718

Strengthening Medicare And Repaying Taxpayers Act of 2011

Congress: 112 (2011–2013, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Oct 17, 2011

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S6602-6603)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S6602-6603)
(Oct 17, 2011)

Official Text: <https://www.congress.gov/bill/112th-congress/senate-bill/1718>

Sponsor

Name: Sen. Wyden, Ron [D-OR]

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

Cosponsors (23 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Burr, Richard [R-NC]	R · NC		Oct 17, 2011
Sen. Nelson, Ben [D-NE]	D · NE		Oct 17, 2011
Sen. Portman, Rob [R-OH]	R · OH		Oct 17, 2011
Sen. Bennet, Michael F. [D-CO]	D · CO		Oct 19, 2011
Sen. Thune, John [R-SD]	R · SD		Oct 20, 2011
Sen. Casey, Robert P., Jr. [D-PA]	D · PA		Oct 31, 2011
Sen. Crapo, Mike [R-ID]	R · ID		Oct 31, 2011
Sen. Graham, Lindsey [R-SC]	R · SC		Oct 31, 2011
Sen. Risch, James E. [R-ID]	R · ID		Nov 3, 2011
Sen. Hagan, Kay R. [D-NC]	D · NC		Nov 9, 2011
Sen. Coons, Christopher A. [D-DE]	D · DE		Nov 10, 2011
Sen. Kirk, Mark Steven [R-IL]	R · IL		Dec 5, 2011
Sen. Pryor, Mark L. [D-AR]	D · AR		Dec 7, 2011
Sen. Blunt, Roy [R-MO]	R · MO		Mar 26, 2012
Sen. Wicker, Roger F. [R-MS]	R · MS		Mar 29, 2012
Sen. Kyl, Jon [R-AZ]	R · AZ		Apr 26, 2012
Sen. Johanns, Mike [R-NE]	R · NE		May 10, 2012
Sen. Alexander, Lamar [R-TN]	R · TN		Jun 18, 2012
Sen. McCaskill, Claire [D-MO]	D · MO		Jun 18, 2012
Sen. Murkowski, Lisa [R-AK]	R · AK		Sep 10, 2012
Sen. Stabenow, Debbie [D-MI]	D · MI		Sep 20, 2012
Sen. Landrieu, Mary L. [D-LA]	D · LA		Nov 13, 2012
Sen. Franken, Al [D-MN]	D · MN		Nov 28, 2012

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Oct 17, 2011

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
112 HR 1063	Identical bill	Dec 20, 2012: Reported (Amended) by the Committee on Energy and Commerce. H. Rept. 112-715, Part I.

Strengthening Medicare And Repaying Taxpayers Act of 2011- Amends title XVIII (Medicare) of the Social Security Act with respect to any settlement, judgment, award, or other payment between a Medicare claimant and an applicable plan involving a payment made for items and services by the Secretary of Health and Human Services (HHS).

Declares that, in the case of a payment to the claimant by the Secretary, and beginning 120 days before the reasonably expected date of a settlement, judgment, award, or other payment, the claimant or applicable plan may at any time but only once: (1) notify the Secretary that a payment is reasonably expected, and (2) request a statement of the conditional payment reimbursement amount for any payments subject to the required reimbursement.

Requires the Secretary to respond to such a request, within 65 days after receiving it, with a statement of reimbursement amount.

Prescribes procedures for the claimant, an applicable plan, or specified related entities to follow if the Secretary fails to provide such a statement.

Specifies circumstances: (1) in which the claimant, an applicable plan, or specified related entities are shielded from liability for certain payments; and (2) in which the Secretary shall be exempt from any obligation for a statement of reimbursement.

Directs the Secretary to promulgate regulations establishing a right of appeal and appeals process, with respect to any determination for a payment made under such title for an item or service under a primary plan, under which the applicable plan involved, or an attorney, agent, or third party administrator on behalf of such applicable play, may appeal such determination.

Exempts a primary plan, and an entity receiving payment from a primary plan, from any obligation to reimburse the appropriate Trust Fund for a Medicare payment by the Secretary with respect to any settlement, judgment, award, or other payment by an applicable plan constituting a total payment obligation to a claimant of not more than the single threshold amount calculated by the Chief Actuary of the Centers for Medicare & Medicaid Services (CMS). Requires the Chief Actuary to calculate and publish the single threshold amount annually.

Makes discretionary rather than mandatory the current civil money penalty for an applicable plan's noncompliance with requirements to submit insurance information about a claimant. Requires the severity of each penalty to be based on the knowing, willful, and repeated nature of the violation.

Prescribes requirements for the specification of practices for which sanctions will not be imposed on a plan (safe harbors).

Directs the Secretary to modify insurance information reporting requirements so that a plan, in complying with them, is permitted but not required to access or report beneficiary Social Security account numbers or health identification claim numbers.

Sets a three-year statute of limitations on a Medicare secondary payer claim by the Secretary for reimbursement against an applicable plan that becomes a Medicare primary payer pursuant to a settlement, judgment, award, or other judicial action.

Actions Timeline

- **Oct 17, 2011:** Introduced in Senate
- **Oct 17, 2011:** Sponsor introductory remarks on measure. (CR S6602)
- **Oct 17, 2011:** Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S6602-6603)

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