

HR 3144

Field EMS Quality, Innovation, and Cost Effectiveness Improvements Act of 2011

Congress: 112 (2011–2013, Ended)

Chamber: House

Policy Area: Health

Introduced: Oct 7, 2011

Current Status: Referred for a period ending not later than October 12, 2011, (or for a later time if the Chairman s

Latest Action: Referred for a period ending not later than October 12, 2011, (or for a later time if the Chairman so designates) to the Subcommittee on Health, in each case for consideration of such provisions as fall within the jurisdiction of the subcommittee concerned. (Oct 12, 2011)

Official Text: <https://www.congress.gov/bill/112th-congress/house-bill/3144>

Sponsor

Name: Rep. Walz, Timothy J. [D-MN-1]

Party: Democratic • **State:** MN • **Chamber:** House

Cosponsors (6 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Myrick, Sue Wilkins [R-NC-9]	R · NC		Oct 7, 2011
Rep. Heinrich, Martin [D-NM-1]	D · NM		Dec 16, 2011
Rep. Gerlach, Jim [R-PA-6]	R · PA		Apr 17, 2012
Rep. Peterson, Collin C. [D-MN-7]	D · MN		Apr 17, 2012
Rep. Holt, Rush [D-NJ-12]	D · NJ		Aug 2, 2012
Rep. Bucshon, Larry [R-IN-8]	R · IN		Sep 13, 2012

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Oct 7, 2011
Ways and Means Committee	House	Referred to	Oct 12, 2011

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Field EMS Quality, Innovation, and Cost Effectiveness Improvements Act of 2011 - Designates the Department of Health and Human Services (HHS) as the primary federal agency for emergency medical services and trauma care.

Establishes the Office of Emergency Medical Services and Trauma within HHS. Gives the Office responsibilities related to emergency medical services (EMS) and authorizes the Secretary of HHS to delegate additional responsibilities related to EMS.

Requires the Director of the Office to: (1) implement a national EMS strategy; (2) establish the EQUIP grant program to promote excellence, quality, universal access, innovation, and preparedness in field EMS; and (3) the SPIA grant program to improve EMS system performance, integration, and accountability, to ensure preparedness, to enhance oversight and data collection, and to promote standardization of certifications.

Requires the Secretary to improve medical oversight of field EMS, including by: (1) promoting the development and adoption of national guidelines for medical oversight, and (2) convening a Field EMS Medical Oversight Advisory Committee.

Directs the Comptroller General to study issues related to emergency medical care in the field of EMS.

Authorizes the Administrator of the National Highway Traffic Safety Administration (NHTSA) to maintain, improve, and expand the National EMS Information System.

Sets forth reporting requirements relating to data collection and electronic health records.

Declares that the Health Insurance Portability and Accountability Act of 1996 (HIPAA) shall not be construed to prohibit certain exchanges of information between field EMS practitioners, hospital personnel, state EMS offices, and the National EMS Database. Requires the Secretary to establish guidelines for the exchange of information between field EMS practitioners and hospital personnel.

Authorizes the Director of the Office to make grants for the development, availability, and dissemination of field EMS education programs and courses that improve the quality and capability of field EMS personnel.

Requires the Director to conduct or support demonstrations projects relating to alternative dispositions of field EMS patients.

Amends title XI (General Provisions, Peer Review, and Administrative Simplification) of the Social Security Act to include field EMS as a model for testing by the Center for Medicare and Medicaid Innovation.

Amends the Public Health Service Act to require the Secretary to conduct research and evaluation relating to field EMS through the Agency for Healthcare Research and Quality (AHRQ) and the Center for Medicare and Medicaid Innovation.

Requires the Director of AHRQ to establish a Field EMS Evidence-Based Practice Center.

Amends the Internal Revenue Code to: (1) establish the Emergency Medical Services Trust Fund, and (2) allow taxpayers to designate a portion of any income tax overpayment and make additional contributions to finance such Fund.

Actions Timeline

- **Oct 12, 2011:** Referred for a period ending not later than October 12, 2011, (or for a later time if the Chairman so designates) to the Subcommittee on Health, in each case for consideration of such provisions as fall within the jurisdiction of the subcommittee concerned.
- **Oct 7, 2011:** Introduced in House
- **Oct 7, 2011:** Referred to the Subcommittee on Health.
- **Oct 7, 2011:** 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.