

S 3344

Immunization Improvements Act of 2012

Congress: 112 (2011–2013, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Jun 27, 2012

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

Latest Action: Read twice and referred to the Committee on Finance. (Jun 27, 2012)

Official Text: <https://www.congress.gov/bill/112th-congress/senate-bill/3344>

Sponsor

Name: Sen. Reed, Jack [D-RI]

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

Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Blumenthal, Richard [D-CT]	D · CT		Jun 27, 2012
Sen. Durbin, Richard J. [D-IL]	D · IL		Jun 27, 2012
Sen. Johnson, Tim [D-SD]	D · SD		Jun 27, 2012
Sen. Whitehouse, Sheldon [D-RI]	D · RI		Jun 27, 2012
Sen. Wyden, Ron [D-OR]	D · OR		Jul 30, 2012

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Jun 27, 2012

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Immunization Improvements Act of 2012 - Directs the Secretary of Health and Human Services (HHS) to establish a demonstration project under title XVIII (Medicare) of the Social Security Act (SSA) to evaluate the ability of state and local health departments to act as providers in the purchase and reimbursement of influenza and pneumococcal vaccinations for Medicare beneficiaries.

Covers vaccines recommended for routine use by the Advisory Committee on Immunizations Practices and their administration under part B (Child and Family Services) of the Medicare program with no beneficiary cost-sharing.

Directs the Administrator of the Centers for Medicare and Medicaid Services and the Director of the Centers for Disease Control and Prevention (CDC) to jointly: (1) review the regional maximum charge for vaccine administration for each state established under the Vaccines for Children program to determine the appropriateness and adequacy of such rates; (2) update such rates, as appropriate, based on the results of such review and taking into account all appropriate administrative costs; and (3) establish the regional minimum charge for vaccine administration for each state.

Requires the state, for purposes of a provider who imposes a fee for the administration of a qualified pediatric vaccine, to pay such provider an amount equal to the administrative fee established under the state plan, which shall not be less than the regional minimum charge for vaccine administration for such state, as established by the Secretary.

Directs the Secretary to pay each state amounts necessary for the state to reimburse each program-registered provider in the state for an administration fee imposed for the administration of a qualified pediatric vaccine to a federally vaccine-eligible child who is not otherwise eligible under SSA title XIX (Medicaid).

Includes as a hospital for purposes of payment under Medicare an institution which develops an active surveillance program to track and record disaggregated influenza vaccination levels among health care workers, including vaccinations obtained outside of the facility, and reports those levels annually to the Secretary.

Requires skilled nursing facilities (SNFs) and nursing facilities to develop such an active surveillance program.

Actions Timeline

- **Jun 27, 2012:** Introduced in Senate
- **Jun 27, 2012:** Sponsor introductory remarks on measure. (CR S4675-4676)
- **Jun 27, 2012:** Read twice and referred to the Committee on Finance.