

HR 6352

Resident Physician Shortage Reduction and Graduate Medical Education Accountability and Transparency Act

Congress: 112 (2011–2013, Ended)

Chamber: House

Policy Area: Health

Introduced: Aug 2, 2012

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Aug 3, 2012)

Official Text: <https://www.congress.gov/bill/112th-congress/house-bill/6352>

Sponsor

Name: Rep. Schock, Aaron [R-IL-18]

Party: Republican • **State:** IL • **Chamber:** House

Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Schwartz, Allyson Y. [D-PA-13]	D · PA		Aug 2, 2012
Rep. Latham, Tom [R-IA-4]	R · IA		Sep 11, 2012
Rep. McGovern, James P. [D-MA-3]	D · MA		Sep 11, 2012
Rep. Coble, Howard [R-NC-6]	R · NC		Sep 19, 2012
Rep. Shuler, Heath [D-NC-11]	D · NC		Sep 21, 2012

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Aug 3, 2012
Ways and Means Committee	House	Referred To	Aug 2, 2012

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
112 HR 6562	Related bill	Sep 25, 2012: Referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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.
112 S 3201	Related bill	May 17, 2012: Read twice and referred to the Committee on Finance.
112 S 1627	Related bill	Sep 23, 2011: Read twice and referred to the Committee on Finance.

Resident Physician Shortage Reduction and Graduate Medical Education Accountability and Transparency Act - Amends title XVIII (Medicare) of the Social Security Act with respect to distribution of additional resident positions as they affect calculation of payments for direct graduate medical education (DME) costs.

Directs the Secretary of Health and Human Services (HHS), for each of FY2013-FY2017 (and each succeeding fiscal year if additional residency positions are available to distribute), to increase the otherwise applicable resident limit for each qualifying hospital.

Directs the Secretary to determine the total number of additional residency positions available for distribution, in accordance with guidelines for allocating 33% to hospitals already operating over the resident limit, and generally setting the aggregate number of increases in the resident limit to 3,000 in each year.

Specifies the process for distributing positions.

Directs the Secretary to establish and implement procedures under which the amount of payments that a hospital would otherwise receive for indirect medical education (IME) costs for discharges occurring during a fiscal year is adjusted based on the reporting of measures and the performance of the hospital on measures of patient care priorities specified by the Secretary.

Directs the Secretary to report to Congress and the National Health Care Workforce Commission on the graduate medical education (GME) payments, including both direct GME payments and IME payments, that hospitals receive under the Medicare program.

Directs the Comptroller General to study: (1) the physician workforce, and (2) strategies for increasing the diversity of the health profession workforce.

Actions Timeline

- **Aug 3, 2012:** Referred to the Subcommittee on Health.
- **Aug 2, 2012:** Introduced in House
- **Aug 2, 2012:** Referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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.

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