

S 1137

Ambulatory Surgical Center Quality and Access Act of 2013

Congress: 113 (2013–2015, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Jun 11, 2013

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S4215-4216)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S4215-4216)
(Jun 11, 2013)

Official Text: <https://www.congress.gov/bill/113th-congress/senate-bill/1137>

Sponsor

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

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

Cosponsors (7 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Blumenthal, Richard [D-CT]	D · CT		Jun 11, 2013
Sen. Cantwell, Maria [D-WA]	D · WA		Jun 11, 2013
Sen. Crapo, Mike [R-ID]	R · ID		Jun 11, 2013
Sen. Landrieu, Mary L. [D-LA]	D · LA		Jun 11, 2013
Sen. Merkley, Jeff [D-OR]	D · OR		Jun 11, 2013
Sen. Alexander, Lamar [R-TN]	R · TN		Jul 31, 2013
Sen. Isakson, Johnny [R-GA]	R · GA		Jan 28, 2014

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Jun 11, 2013

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
113 HR 2500	Identical bill	Jul 23, 2013: Referred to the Subcommittee on Health.

Ambulatory Surgical Center Quality and Access Act of 2013 - Amends title XVIII (Medicare) of the Social Security Act to require alignment of updates for ambulatory surgical center (ASC) services under a revised prospective payment system (PPS) with updates for hospital outpatient department (OPD) services.

Revises requirements for the reporting and applying of quality measure data by ASCs and hospital OPDs.

Directs the Secretary of Health and Human Services (HHS) to establish an ASC value-based purchasing program under which each ASC that the Secretary determines meets (or exceeds) performance standards established, with respect to selected quality measures, for the performance period for a calendar year is eligible for shared savings in the form of a payment increase determined according to a specified formula.

Revises requirements for the composition of the expert outside advisory panel the Secretary is required to consult during the annual review of the clinical integrity of the groups and payment weights in the PPS for hospital OPD services.

Requires the panel to include suppliers subject to the PPS as well as at least one ASC representative.

Requires the Secretary, when excluding from a final rule updating ASC lists a procedure whose inclusion was requested during the public comment period, to cite in the final rule specific criteria based on which the procedure was excluded.

Requires the Secretary also to identify the peer reviewed research or the evidence upon which the exclusion is based if certain of those criteria are cited for it. Prohibits the Secretary from using or citing as a criterion or a basis for an exclusion that the procedure can only be reported using a Current Procedural Terminology (CPT) unlisted surgical procedure code.

Actions Timeline

- **Jun 11, 2013:** Introduced in Senate
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