

S 133

PATIENTS Act of 2013

Congress: 113 (2013–2015, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Jan 24, 2013

Current Status: Read twice and referred to the Committee on Health, Education, Labor, and Pensions.

Latest Action: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (Jan 24, 2013)

Official Text: <https://www.congress.gov/bill/113th-congress/senate-bill/133>

Sponsor

Name: Sen. Roberts, Pat [R-KS]

Party: Republican • **State:** KS • **Chamber:** Senate

Cosponsors (7 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Barrasso, John [R-WY]	R · WY		Jan 24, 2013
Sen. Coburn, Tom [R-OK]	R · OK		Jan 24, 2013
Sen. Crapo, Mike [R-ID]	R · ID		Jan 24, 2013
Sen. Inhofe, James M. [R-OK]	R · OK		Jan 24, 2013
Sen. Portman, Rob [R-OH]	R · OH		Jan 24, 2013
Sen. Vitter, David [R-LA]	R · LA		Jan 24, 2013
Sen. Johnson, Ron [R-WI]	R · WI		Jan 28, 2013

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Jan 24, 2013

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
113 S 2064	Related bill	Feb 27, 2014: Read twice and referred to the Committee on Finance.

Preserving Access to Targeted, Individualized, and Effective New Treatments and Services (PATIENTS) Act of 2013 or PATIENTS Act of 2013 - Prohibits the Secretary of Health and Human Services (HHS) from using data obtained from comparative effectiveness research, including any conducted or supported using funds appropriated under the American Recovery and Reinvestment Act of 2009 (ARRA) or authorized or appropriated under the Patient Protection and Affordable Care Act, to deny or delay coverage of an item or service under a federal health care program. Requires the Secretary to ensure that comparative effectiveness research conducted or supported by the federal government accounts for factors contributing to differences in the treatment response and preferences of patients, including patient-reported outcomes, genomics and personalized medicine, the unique needs of health disparity populations, and indirect patient benefits.

Actions Timeline

- **Jan 24, 2013:** Introduced in Senate
- **Jan 24, 2013:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions.