

HR 487

Primary Care Workforce Access Improvement Act of 2013

Congress: 113 (2013–2015, Ended)

Chamber: House

Policy Area: Health

Introduced: Feb 4, 2013

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Feb 14, 2013)

Official Text: <https://www.congress.gov/bill/113th-congress/house-bill/487>

Sponsor

Name: Rep. McMorris Rodgers, Cathy [R-WA-5]

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

Cosponsors (11 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Thompson, Mike [D-CA-5]	D · CA		Feb 4, 2013
Rep. Davis, Rodney [R-IL-13]	R · IL		Mar 4, 2013
Rep. Stivers, Steve [R-OH-15]	R · OH		Mar 13, 2013
Rep. Amodei, Mark E. [R-NV-2]	R · NV		Apr 9, 2013
Rep. Doggett, Lloyd [D-TX-35]	D · TX		Apr 9, 2013
Rep. Tiberi, Patrick J. [R-OH-12]	R · OH		Apr 9, 2013
Rep. Connolly, Gerald E. [D-VA-11]	D · VA		May 7, 2013
Rep. Roe, David P. [R-TN-1]	R · TN		Jun 12, 2013
Rep. Lowenthal, Alan S. [D-CA-47]	D · CA		Oct 3, 2013
Rep. Schakowsky, Janice D. [D-IL-9]	D · IL		Mar 24, 2014
Rep. Polis, Jared [D-CO-2]	D · CO		Jun 20, 2014

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Feb 8, 2013
Ways and Means Committee	House	Referred to	Feb 14, 2013

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Primary Care Workforce Access Improvement Act of 2013 - Directs the Secretary of Health and Human Services (HHS) to conduct a pilot project under title XVIII (Medicare) of the Social Security Act to test models for providing payment for direct graduate medical education (GME) and indirect medical education (IME) to medical education entities (MEEs), not otherwise eligible to receive such payments, for the costs of training primary care residents.

Requires testing of two of the following model MEEs: (1) a community-based independent corporate entity collaborating with two or more hospitals to operate one or more primary care graduate medical residency training programs (training hospitals); (2) a MEE, with at least one community representative on its board, which is established by two or more training hospitals which may be the sole corporate members of the MEE; (3) a hospital subsidiary or independent corporation, with community participation in its governance, that operates one or more training programs for a hospital; or (4) a MEE (including a university or school of medicine) independent of any hospital but collaborating with one in operating one or more primary care graduate medical residency training programs.

Actions Timeline

- **Feb 14, 2013:** Referred to the Subcommittee on Health.
- **Feb 8, 2013:** Referred to the Subcommittee on Health.
- **Feb 4, 2013:** Introduced in House
- **Feb 4, 2013:** 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.