

S 608

SCREEN Act of 2013

Congress: 113 (2013–2015, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Mar 19, 2013

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

Latest Action: Read twice and referred to the Committee on Finance. (Mar 19, 2013)

Official Text: <https://www.congress.gov/bill/113th-congress/senate-bill/608>

Sponsor

Name: Sen. Cardin, Benjamin L. [D-MD]

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

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Mar 19, 2013

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
113 HR 1320	Related bill	Apr 9, 2013: Referred to the Subcommittee on Health.

Supporting Colorectal Examination and Education Now Act of 2013 or SCREEN Act of 2013 - Increases Medicare payments to qualifying Medicare providers by 10% for cancer screening tests recommended by the U.S. Preventive Services Task Force. Terminates the increase for a test when it reaches a 75% utilization rate for beneficiaries for whom such screening is recommended. Makes a Medicare provider eligible for such increased payment only if the provider: (1) participates in a nationally recognized quality improvement registry with respect to such test, and (2) demonstrates that the tests were provided in accordance with accepted outcomes-based quality measures.

Amends title XVIII (Medicare) of the Social Security Act to waive cost-sharing for colorectal cancer screening tests.

Extends Medicare coverage to include an outpatient office visit or consultation prior to a colorectal cancer test consisting of a screening colonoscopy, or in conjunction with an individual's decision regarding the performance of such a test on the individual, for the purpose of beneficiary education, assuring selection of the proper screening test, and securing information relating to the procedure and the sedation of the individual.

Requires the Secretary of Health and Human Services (HHS) to reduce the conversion factors for purposes of payment to physicians and hospital outpatient departments under Medicare to offset the additional expenditures under this Act.

Amends the Public Health Service Act to require health plans to cover, with no cost-sharing, activities related to certain covered preventive services that are part of the same clinical encounter, such as conducting a biopsy or removing a lesion or growth.

Actions Timeline

- **Mar 19, 2013:** Introduced in Senate
- **Mar 19, 2013:** Sponsor introductory remarks on measure. (CR S1953-1954)
- **Mar 19, 2013:** Read twice and referred to the Committee on Finance.

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