

S 1549

Care Planning Act of 2015

Congress: 114 (2015–2017, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Jun 10, 2015

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

Latest Action: Read twice and referred to the Committee on Finance. (Jun 10, 2015)

Official Text: <https://www.congress.gov/bill/114th-congress/senate-bill/1549>

Sponsor

Name: Sen. Warner, Mark R. [D-VA]

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

Cosponsors (5 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Baldwin, Tammy [D-WI]	D · WI		Jun 10, 2015
Sen. Capito, Shelley Moore [R-WV]	R · WV		Jun 10, 2015
Sen. Collins, Susan M. [R-ME]	R · ME		Jun 10, 2015
Sen. Isakson, Johnny [R-GA]	R · GA		Jun 10, 2015
Sen. Klobuchar, Amy [D-MN]	D · MN		Jun 10, 2015

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Jun 10, 2015

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Care Planning Act of 2015

Amends titles XVIII (Medicare) of the Social Security Act (SSAct) to cover advanced illness planning and coordination services furnished to an eligible individual with progressive illness, including Alzheimer's disease, by a hospice or other provider through an interdisciplinary team.

Amends SSAct title XI with respect to the Center for Medicare and Medicaid Innovation and its selection for Phase I testing of innovative payment and service delivery models to reduce Medicare and Medicaid expenditures while preserving or enhancing the quality of care. Adds a model for payments to providers that furnish advanced illness care coordination services to eligible individuals who are entitled to, or enrolled for, benefits under Medicare part A (Hospital Insurance) and enrolled under part B (Supplementary Medical Insurance), but not enrolled under Medicare part C (Medicare+Choice).

Amends the Public Health Service Act to require the Department of Health and Human Services, in awarding grants, contracts, or agreements under provisions for quality measure development, to give priority to the development of quality measures that allow the assessment of various specified factors including the effectiveness, patient-centeredness (and, where relevant, family caregiver-centeredness), and accuracy of care plans, including documentation of individual goals, preferences, and values.

Amends SSAct title XVIII (Medicare) to require inclusion of information on advanced care planning materials in the "Medicare and You Handbook."

Revises requirements for the use under Medicare of advanced directives, portable treatment orders, and other treatment directions from an individual or legally authorized representative.

Amends the Assisted Suicide Funding Restriction Act of 1997 with respect to advanced directives.

Establishes additional requirements under Medicare for hospitals, skilled nursing facilities, home health agencies, and hospice programs with respect to completion before discharge of care plan documentation.

Authorizes the Secretary to award grants to certain entities to:

- develop online training modules, decision support tools, and instructional materials for individuals, family caregivers, and health care providers;
- establish a website and telephone hotline to disseminate such resources and any materials designed by the HHS Center for Faith-Based and Neighborhood Partnerships for faith communities; and
- conduct a national public education campaign to raise public awareness of advance care planning and advanced illness care.

Actions Timeline

- **Jun 10, 2015:** Introduced in Senate
- **Jun 10, 2015:** Read twice and referred to the Committee on Finance.