

HR 2298

Medicare Patient Safety and Drug Abuse Prevention Act

Congress: 114 (2015–2017, Ended)

Chamber: House

Policy Area: Health

Introduced: May 13, 2015

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jun 1, 2015)

Official Text: <https://www.congress.gov/bill/114th-congress/house-bill/2298>

Sponsor

Name: Rep. Bilirakis, Gus M. [R-FL-12]

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

Cosponsors (3 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Long, Billy [R-MO-7]	R · MO		May 13, 2015
Rep. Lujan, Ben Ray [D-NM-3]	D · NM		May 13, 2015
Rep. Rogers, Harold [R-KY-5]	R · KY		May 14, 2015

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	May 15, 2015
Ways and Means Committee	House	Referred to	Jun 1, 2015

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
114 HR 5189	Related bill	Jun 7, 2016: Referred to the Subcommittee on Military Personnel.
114 S 1913	Related bill	Jul 30, 2015: Read twice and referred to the Committee on Finance.
114 HR 6	Related bill	Jul 13, 2015: Received in the Senate and Read twice and referred to the Committee on Health, Education, Labor, and Pensions.
114 HR 1021	Related bill	Mar 19, 2015: Referred to the Subcommittee on Health.

Medicare Patient Safety and Drug Abuse Prevention Act

Amends part D (Voluntary Prescription Drug Benefit Program) of title XVIII (Medicare) of the Social Security Act to authorize a prescription drug plan (PDP) sponsor to establish a drug management program for at-risk beneficiaries.

Requires a PDP sponsor, with respect to covered part D drugs, to have in place, directly or through appropriate arrangements, a utilization management tool designed to prevent: (1) the abuse of frequently abused drugs by individuals, and (2) the diversion of such drugs at pharmacies.

Directs the Department of Health and Human Services (HHS) to authorize Medicare drug integrity contractors (MEDICs) to accept directly an individual's prescription and necessary medical records from pharmacies, PDPs, and physicians in order for MEDICs to provide information relevant to determining whether the individual is an at-risk beneficiary.

Requires the Inspector General of HHS to study the effectiveness of MEDICs in identifying, combating, and preventing fraud under the Medicare program.

Expresses the sense of Congress that Medicare Advantage organizations and PDP sponsors should consider using e-prescribing and other health information technology tools to support combating fraud under MA-PD plans and prescription drug plans under parts C (Medicare+Choice) and D.

Actions Timeline

- **Jun 1, 2015:** Referred to the Subcommittee on Health.
- **May 15, 2015:** Referred to the Subcommittee on Health.
- **May 13, 2015:** Introduced in House
- **May 13, 2015:** Referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, 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.

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