

S 3096

Removing Barriers to Person-Centered Care Act of 2016

Congress: 114 (2015–2017, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Jun 23, 2016

Current Status: Special Committee on Aging. Hearings held. Hearings printed: S.Hrg. 114-844.

Latest Action: Special Committee on Aging. Hearings held. Hearings printed: S.Hrg. 114-844. (Jun 23, 2016)

Official Text: <https://www.congress.gov/bill/114th-congress/senate-bill/3096>

Sponsor

Name: Sen. Whitehouse, Sheldon [D-RI]

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

Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Warren, Elizabeth [D-MA]	D · MA		Jun 23, 2016

Committee Activity

Committee	Chamber	Activity	Date
Aging (Special) Committee	Senate	Hearings By (full committee)	Jun 23, 2016
Finance Committee	Senate	Referred To	Jun 23, 2016

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Removing Barriers to Person-Centered Care Act of 2016

This bill amends title XI (General Provisions) of the Social Security Act to establish an alternative payment model for patient-centered care with respect to Medicare beneficiaries with advanced illnesses. Through the voluntary pilot program, the Centers for Medicare & Medicaid Services (CMS) shall enter into demonstration project agreements with advance care collaboratives to provide Medicare services in a manner that promotes accountability, coordinates services, and encourages investment in infrastructure and redesigned care processes. An "advance care collaborative" is an affiliated group of providers, physicians, or practitioners.

Under the program, a participating advance care collaborative may use a pre-implementation grant to: (1) conduct a needs assessment; (2) modify, upgrade, or purchase health information technology; (3) conduct education and training; (4) hire staff to conduct care management and coordination activities; and (5) conduct other appropriate activities.

With respect to coverage and payment for services provided to a target Medicare beneficiary by a participating collaborative, CMS shall waive specified requirements related to: (1) coverage of curative care with respect to individuals receiving hospice care, (2) alternative certification for home care and hospice care, (3) coverage of skilled nursing services without an inpatient stay, and (4) coverage of home health care without homebound status.

Under the program, a participating collaborative may receive payment for furnishing target Medicare beneficiaries with: (1) inpatient care as an alternative to routine hospice care, and (2) home-based respite care as an alternative to inpatient respite care.

A participating collaborative shall be eligible for shared savings payments.

CMS shall identify and develop a recommended set of advance care quality measures that may be tested in the pilot program.

Actions Timeline

- **Jun 23, 2016:** Introduced in Senate
- **Jun 23, 2016:** Read twice and referred to the Committee on Finance.
- **Jun 23, 2016:** Special Committee on Aging. Hearings held. Hearings printed: S.Hrg. 114-844.