

HR 3309

Flex-IT 2 Act

Congress: 114 (2015–2017, Ended)

Chamber: House

Policy Area: Health

Introduced: Jul 29, 2015

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Aug 12, 2015)

Official Text: <https://www.congress.gov/bill/114th-congress/house-bill/3309>

Sponsor

Name: Rep. Ellmers, Renee L. [R-NC-2]

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

Cosponsors (15 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Heck, Joseph J. [R-NV-3]	R · NV		Sep 8, 2015
Rep. Bishop, Rob [R-UT-1]	R · UT		Sep 17, 2015
Rep. Ashford, Brad [D-NE-2]	D · NE		Sep 24, 2015
Rep. Knight, Stephen [R-CA-25]	R · CA		Sep 24, 2015
Rep. Love, Mia B. [R-UT-4]	R · UT		Sep 24, 2015
Rep. Stewart, Chris [R-UT-2]	R · UT		Sep 24, 2015
Rep. Herrera Beutler, Jaime [R-WA-3]	R · WA		Sep 28, 2015
Rep. Young, David [R-IA-3]	R · IA		Sep 30, 2015
Rep. Walorski, Jackie [R-IN-2]	R · IN		Oct 7, 2015
Rep. Fitzpatrick, Michael G. [R-PA-8]	R · PA		Oct 9, 2015
Rep. Cook, Paul [R-CA-8]	R · CA		Oct 20, 2015
Rep. Russell, Steve [R-OK-5]	R · OK		Oct 27, 2015
Rep. Mooney, Alexander X. [R-WV-2]	R · WV		Nov 17, 2015
Rep. Comstock, Barbara [R-VA-10]	R · VA		Dec 15, 2015
Rep. Jones, Walter B., Jr. [R-NC-3]	R · NC		May 10, 2016

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Jul 31, 2015
Ways and Means Committee	House	Referred to	Aug 12, 2015

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Summary (as of Jul 29, 2015)

Further Flexibility in HIT Reporting and Advancing Interoperability Act or the Flex-IT 2 Act

This bill amends titles XVIII (Medicare) and XIX (Medicaid) of the Social Security Act to modify Medicare and Medicaid program requirements related to electronic health record (EHR) meaningful use programs, which establish incentives to promote EHR meaningful use and the adoption of health information technology (HIT).

Specifically, the bill requires the Centers for Medicare & Medicaid to establish and apply a linear scale to determine meaningful or "partial meaningful" EHR use. In accordance with this linear scale, eligible professionals and hospitals that are partial meaningful EHR users shall: (1) receive certain incentive payments currently available only to meaningful EHR users, and (2) be partially exempt from certain negative payment adjustments.

In addition, the bill: (1) establishes three-month reporting periods for the Medicare and Medicaid EHR incentive payment programs; (2) modifies provisions regarding quality reporting on meaningful EHR use; (3) expands the hardship exception to Medicare EHR payment adjustments; and (4) limits, with respect to timing and frequency, the adoption of more stringent measures of EHR meaningful use under Medicaid and Medicare.

The bill also amends the Public Health Service Act to: (1) require the Department of Health and Human Services (HHS) to pause rulemaking related to EHR meaningful use, unless and until specified conditions are met; and (2) prohibit HHS from proposing the adoption of certain untested standards regarding HIT.

Actions Timeline

- **Aug 12, 2015:** Referred to the Subcommittee on Health.
- **Jul 31, 2015:** Referred to the Subcommittee on Health.
- **Jul 29, 2015:** Introduced in House
- **Jul 29, 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.