

HR 4878

Better Care, Lower Cost Act

Congress: 114 (2015–2017, Ended)

Chamber: House

Policy Area: Health

Introduced: Mar 23, 2016

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Mar 29, 2016)

Official Text: <https://www.congress.gov/bill/114th-congress/house-bill/4878>

Sponsor

Name: Rep. Paulsen, Erik [R-MN-3]

Party: Republican • State: MN • Chamber: House

Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Welch, Peter [D-VT-At Large]	D · VT		Mar 23, 2016

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Mar 25, 2016
Ways and Means Committee	House	Referred to	Mar 29, 2016

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

## **Better Care, Lower Cost Act**

This bill amends titles XVIII (Medicare) and XIX (Medicaid) of the Social Security Act to establish an integrated chronic care delivery program through which qualified "Better Care Programs" (BCPs) shall: (1) promote accountability and better care management for chronically ill patient populations, (2) coordinate items and services under Medicare, and (3) encourage investment in infrastructure and redesigned care processes. A health plan (including a Medicare Advantage plan) or group of providers may participate as a BCP if certified to do so by the Department of Health and Human Services (HHS).

The program shall focus on containing long-term costs and improving the overall health of the Medicare population by implementing, through qualified BCPs, strategies that prevent, delay, or minimize the progression of illness or disability associated with chronic conditions.

With respect to a BCP enrollee who is dually eligible for both Medicare and Medicaid, Medicare shall be the primary payor.

A Medigap policy (supplemental insurance that covers health care costs not covered by Medicare) may not provide for coverage of cost-sharing for Medicare services furnished to a BCP enrollee by a provider that is not a qualified BCP professional.

HHS, acting through the Agency for Healthcare Research and Quality, shall designate and provide core funding for at least three Chronic Care Innovation Centers. To be eligible for such designation and funding, an eligible entity must partner with other specified entities to develop new, evidence-based curricula that addresses the need for chronic care management.

## **Actions Timeline**

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- **Mar 29, 2016:** Referred to the Subcommittee on Health.
- **Mar 25, 2016:** Referred to the Subcommittee on Health.
- **Mar 23, 2016:** Introduced in House
- **Mar 23, 2016:** 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.