

HR 3415

Megan Rondini Act

Congress: 115 (2017–2019, Ended)

Chamber: House

Policy Area: Health

Introduced: Jul 26, 2017

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jul 28, 2017)

Official Text: <https://www.congress.gov/bill/115th-congress/house-bill/3415>

Sponsor

Name: Rep. Poe, Ted [R-TX-2]

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

Cosponsors (42 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Maloney, Carolyn B. [D-NY-12]	D · NY		Jul 26, 2017
Rep. Sewell, Terri A. [D-AL-7]	D · AL		Jul 28, 2017
Rep. Kuster, Ann M. [D-NH-2]	D · NH		Sep 25, 2017
Rep. Schiff, Adam B. [D-CA-28]	D · CA		Sep 25, 2017
Rep. Conyers, John, Jr. [D-MI-13]	D · MI		Oct 10, 2017
Rep. Tsongas, Niki [D-MA-3]	D · MA		Oct 10, 2017
Rep. Wasserman Schultz, Debbie [D-FL-23]	D · FL		Oct 10, 2017
Rep. Wagner, Ann [R-MO-2]	R · MO		Oct 25, 2017
Rep. Issa, Darrell E. [R-CA-49]	R · CA		Nov 28, 2017
Rep. Donovan, Daniel M., Jr. [R-NY-11]	R · NY		Dec 18, 2017
Rep. Khanna, Ro [D-CA-17]	D · CA		Mar 13, 2018
Rep. Olson, Pete [R-TX-22]	R · TX		Apr 26, 2018
Rep. Rooney, Thomas J. [R-FL-17]	R · FL		Jul 16, 2018
Rep. Carter, John R. [R-TX-31]	R · TX		Jul 24, 2018
Rep. Cohen, Steve [D-TN-9]	D · TN		Jul 24, 2018
Rep. DesJarlais, Scott [R-TN-4]	R · TN		Jul 24, 2018
Rep. Granger, Kay [R-TX-12]	R · TX		Jul 24, 2018
Rep. Green, Gene [D-TX-29]	D · TX		Jul 24, 2018
Rep. Meeks, Gregory W. [D-NY-5]	D · NY		Jul 24, 2018
Rep. Paulsen, Erik [R-MN-3]	R · MN		Jul 24, 2018
Rep. Babin, Brian [R-TX-36]	R · TX		Jul 26, 2018
Rep. Boyle, Brendan F. [D-PA-13]	D · PA		Jul 26, 2018
Rep. Carter, Earl L. "Buddy" [R-GA-1]	R · GA		Jul 26, 2018
Rep. Cuellar, Henry [D-TX-28]	D · TX		Jul 26, 2018
Rep. Diaz-Balart, Mario [R-FL-25]	R · FL		Jul 26, 2018
Rep. Duncan, Jeff [R-SC-3]	R · SC		Jul 26, 2018
Rep. Duncan, John J., Jr. [R-TN-2]	R · TN		Jul 26, 2018
Rep. Fitzpatrick, Brian K. [R-PA-8]	R · PA		Jul 26, 2018
Rep. Kustoff, David [R-TN-8]	R · TN		Jul 26, 2018
Rep. MacArthur, Thomas [R-NJ-3]	R · NJ		Jul 26, 2018
Rep. McCaul, Michael T. [R-TX-10]	R · TX		Jul 26, 2018
Rep. Ros-Lehtinen, Ileana [R-FL-27]	R · FL		Jul 26, 2018
Rep. Sinema, Kyrsten [D-AZ-9]	D · AZ		Jul 26, 2018
Rep. Upton, Fred [R-MI-6]	R · MI		Jul 26, 2018
Rep. Weber, Randy K., Sr. [R-TX-14]	R · TX		Jul 26, 2018
Rep. Chu, Judy [D-CA-27]	D · CA		Jul 31, 2018
Rep. Lofgren, Zoe [D-CA-19]	D · CA		Jul 31, 2018
Rep. Nolan, Richard M. [D-MN-8]	D · MN		Jul 31, 2018
Rep. Speier, Jackie [D-CA-14]	D · CA		Jul 31, 2018
Rep. Wilson, Frederica S. [D-FL-24]	D · FL		Jul 31, 2018
Rep. Bishop, Mike [R-MI-8]	R · MI		Sep 28, 2018

Cosponsor	Party / State	Role	Date Joined
Rep. Black, Diane [R-TN-6]	R · TN		Nov 30, 2018

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Jul 28, 2017
Ways and Means Committee	House	Referred To	Jul 26, 2017

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Summary (as of Jul 26, 2017)

Megan Rondini Act

This bill amends title XVIII (Medicare) of the Social Security Act to require the Department of Health and Human Services to designate a hospital as a "SAFE-ready facility" if the hospital: (1) employs or contracts with a sexual-assault forensic examiner, or (2) uses a telemedicine system of such examiners. Subject to civil penalties, and as a condition of participation in the Medicare program, a hospital that has an emergency department but is not designated as a SAFE-ready facility must meet certain requirements. Specifically, with respect to an individual who comes to the hospital's emergency department for treatment relating to sexual assault, the hospital must (regardless of whether the individual is eligible for Medicare):

- inform the individual that the hospital is not a SAFE-ready facility;
- provide the name and location of the nearest SAFE-ready facility;
- inform the individual that the individual may elect either to receive treatment at the hospital or to be stabilized and transferred to the nearest SAFE-ready facility; and
- if the individual elects to be transferred, obtain the individual's written consent for the transfer, contact the nearest SAFE-ready facility to confirm that a sexual-assault forensic examiner or telemedicine system is available, and stabilize and transfer the individual.

In addition, a hospital with an emergency department must develop and implement a plan to train relevant personnel on sexual-assault forensic-evidence collection.

Actions Timeline

- **Jul 28, 2017:** Referred to the Subcommittee on Health.
- **Jul 26, 2017:** Introduced in House
- **Jul 26, 2017:** Referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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.