

S 463

Cancer Care Payment Reform Act of 2017

Congress: 115 (2017–2019, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Feb 28, 2017

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S1502-1504)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S1502-1504)
(Feb 28, 2017)

Official Text: <https://www.congress.gov/bill/115th-congress/senate-bill/463>

Sponsor

Name: Sen. Cornyn, John [R-TX]

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

Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Carper, Thomas R. [D-DE]	D · DE		Feb 28, 2017

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Feb 28, 2017

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
115 HR 1834	Identical bill	Apr 12, 2017: Referred to the Subcommittee on Health.

Cancer Care Payment Reform Act of 2017

This bill amends title XVIII (Medicare) of the Social Security Act to establish the Oncology Medical Home Demonstration Project, through which the Centers for Medicare & Medicaid Services (CMS) shall make special payments to participating oncology practices that coordinate patient care and meet other specified requirements.

During the first two years of the project, CMS shall pay a care coordination management fee to each such practice. After the third, fourth, and fifth years of the project, CMS shall pay a performance incentive payment to each participating practice that meets or exceeds performance standards developed by CMS.

CMS shall assess the performance of each participating oncology practice annually. Performance standards shall address: (1) specified measures related to patient care, resource utilization, survivorship, and end-of-life care; and (2) the patient experience of care, as reflected in surveys submitted by each practice. CMS shall also assess the extent to which a practice has used breakthrough or other best-in-class therapies.

To the extent practicable, CMS shall select practices of varying sizes and geographic areas for participation.

Actions Timeline

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