

107TH CONGRESS
1ST SESSION

S. 548

To amend title XVIII of the Social Security Act to provide enhanced reimbursement for, and expanded capacity to, mammography services under the medicare program, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MARCH 15, 2001

Mr. HARKIN (for himself, Ms. SNOWE, Ms. MIKULSKI, Mr. MURKOWSKI, Mrs. MURRAY, Mr. SCHUMER, and Mr. REID) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to provide enhanced reimbursement for, and expanded capacity to, mammography services under the medicare program, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Assure Access to Mam-
5 mography Act of 2001”.

1 **TITLE I—ENHANCED REIM-**
 2 **BURSEMENT FOR SCREENING**
 3 **MAMMOGRAPHY UNDER THE**
 4 **MEDICARE PROGRAM**

5 **SEC. 101. ENHANCED REIMBURSEMENT UNDER THE MEDI-**
 6 **CARE PROGRAM FOR SCREENING**
 7 **MAMMOGRAPHIES FURNISHED IN 2002.**

8 (a) ONE-YEAR DELAY OF INCLUSION OF PAYMENT
 9 FOR SCREENING MAMMOGRAPHY IN PHYSICIAN FEE
 10 SCHEDULE.—Section 104(c) of the Medicare, Medicaid,
 11 and SCHIP Benefits Improvement and Protection Act of
 12 2000 (as enacted into law by section 1(a)(6) of Public Law
 13 106–554) is amended by striking “January 1, 2002” and
 14 inserting “January 1, 2003”.

15 (b) CHANGE IN PAYMENT AMOUNT.—Section
 16 1834(c)(3)(A) of the Social Security Act (42 U.S.C.
 17 1395m(c)(3)(A)) is amended—

18 (1) in the heading, by striking “\$55, IN-

19 DEXED.—” and inserting “IN GENERAL.—”;

20 (2) in clause (i), by striking “and” at the end;

21 (3) in clause (ii)—

22 (A) by striking “a subsequent year” and
 23 inserting “1992 through 2001,”; and

24 (B) by striking “that subsequent year.”
 25 and inserting “that year, and”; and

1 (4) by adding at the end the following new
2 clause:

3 “(iii) for screening mammography
4 performed in 2002, is \$90.”.

5 (c) EFFECTIVE DATES.—

6 (1) BIPA AMENDMENT.—The amendment
7 made by subsection (a) shall take effect as if in-
8 cluded in the enactment of section 104 of the Medi-
9 care, Medicaid, and SCHIP Benefits Improvement
10 and Protection Act of 2000 (as enacted into law by
11 section 1(a)(6) of Public Law 106–554).

12 (2) MAMMOGRAPHY IN 2002.—The amendments
13 made by subsection (b) shall apply with respect to
14 screening mammographies furnished during 2002.

15 (d) CONSTRUCTION.—Nothing in this section shall be
16 construed as affecting the provisions of section 104(d) of
17 the Medicare, Medicaid, and SCHIP Benefits Improve-
18 ment and Protection Act of 2000 (as enacted into law by
19 section 1(a)(6) of Public Law 106–554) (relating to pay-
20 ment for new technologies).

1 **TITLE II—EXPANDED CAPACITY**
 2 **FOR MAMMOGRAPHY SERVICES**

3 **SEC. 201. NOT COUNTING CERTAIN RADIOLOGY RESIDENTS**
 4 **AGAINST GRADUATE MEDICAL EDUCATION**
 5 **LIMITATIONS.**

6 For cost reporting periods beginning on or after Oc-
 7 tober 1, 2001, and before October 1, 2006, in applying
 8 the limitations regarding the total number of full-time
 9 equivalent residents in the field of allopathic or osteo-
 10 pathic medicine under subsections (d)(5)(B)(v) and
 11 (h)(4)(F) of section 1886 of the Social Security Act (42
 12 U.S.C. 1395ww) for a hospital, the Secretary of Health
 13 and Human Services shall not take into account a max-
 14 imum of 3 residents in the field of radiology to the extent
 15 the hospital increases the number of radiology residents
 16 above the number of such residents for the hospital's most
 17 recent cost reporting period ending before October 1,
 18 2001.

19 **SEC. 202. ALLIED HEALTH PROFESSIONAL FUNDING.**

20 Section 757 of the Public Health Service Act (42
 21 U.S.C. 294g) is amended—

22 (1) by striking subsection (a) and inserting the
 23 following new subsection:

24 “(a) IN GENERAL.—There are authorized to be ap-
 25 propriated to carry out this part—

1 “(1) \$55,600,000 for fiscal year 1998;

2 “(2) such sums as may be necessary for each
3 of the fiscal years 1999 through 2001;

4 “(3) \$70,600,000 for fiscal year 2002; and

5 “(4) such sums as may be necessary for fiscal
6 year 2003 and each subsequent fiscal year.”; and

7 (2) in subsection (b)(1)—

8 (A) in subparagraph (B), by striking
9 “and” at the end;

10 (B) in subparagraph (C), by striking “,
11 754, and 755.” and inserting “and 754; and”;
12 and

13 (C) by adding at the end the following new
14 subparagraph:

15 “(D) not less than \$15,000,000 for awards
16 of grants and contracts under section 755.”.

1 **TITLE III—STUDIES AND RE-**
 2 **PORTS ON MEDICARE REIM-**
 3 **BURSEMENT FOR GENDER-**
 4 **SPECIFIC AND SCREENING**
 5 **SERVICES**

6 **SEC. 301. GAO STUDY AND REPORT ON MEDICARE REIM-**
 7 **BURSEMENT FOR GENDER-SPECIFIC SERV-**
 8 **ICES.**

9 (a) STUDY.—The Comptroller General of the United
 10 States shall conduct a study of the relative value units
 11 established by the Secretary of Health and Human Serv-
 12 ices under the medicare physician fee schedule under sec-
 13 tion 1848 of the Social Security Act (42 U.S.C. 1395w-
 14 4) for physicians' services that are gender-specific.

15 (b) REPORT.—Not later than December 31, 2001,
 16 the Comptroller General shall submit to Congress a report
 17 on the study conducted under subsection (a), together with
 18 such recommendations regarding the appropriateness of
 19 adjusting the relative value units for physicians' services
 20 that are gender-specific as the Comptroller General deter-
 21 mines appropriate.

22 **SEC. 302. MEDPAC STUDY AND REPORT ON MEDICARE RE-**
 23 **IMBURSEMENT FOR SCREENING SERVICES.**

24 (a) STUDY.—The Medicare Payment Advisory Com-
 25 mission shall conduct a study of the relative value units

1 established by the Secretary of Health and Human Serv-
2 ices under the medicare physician fee schedule under sec-
3 tion 1848 of the Social Security Act (42 U.S.C. 1395w-
4 4) for screening services that are reimbursed under such
5 fee schedule.

6 (b) REPORT.—Not later than March 1, 2002, the
7 Commission shall submit to Congress a report on the
8 study conducted under subsection (a), together with such
9 recommendations regarding the appropriateness of adjust-
10 ing the relative value units for screening services that are
11 reimbursed under the physician fee schedule as the Comp-
12 troller General determines appropriate.

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