

107TH CONGRESS  
1ST SESSION

# H. R. 1354

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.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 3, 2001

Mr. KING (for himself, Mr. GRAHAM, Mr. WEINER, Ms. SLAUGHTER, Mr. BLAGOJEVICH, Mrs. MCCARTHY of New York, Mrs. MYRICK, Mrs. MALONEY of New York, Mr. SHOWS, Ms. ESHOO, Mr. THOMPSON of Mississippi, Mr. LANGEVIN, Mr. TRAFICANT, Mr. ISRAEL, Mr. SERRANO, Mr. ANDREWS, Ms. HOOLEY of Oregon, Mr. NADLER, Mrs. ROUKEMA, Ms. JACKSON-LEE of Texas, Mr. BRADY of Pennsylvania, Mrs. THURMAN, Mr. McNULTY, and Mrs. KELLY) introduced the following bill; which was 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

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## 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,*

1 **SECTION 1. SHORT TITLE.**

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

4 **TITLE I—ENHANCED REIM-**  
5 **BURSEMENT FOR SCREENING**  
6 **MAMMOGRAPHY UNDER THE**  
7 **MEDICARE PROGRAM**

8 **SEC. 101. ENHANCED REIMBURSEMENT UNDER THE MEDI-**  
9 **CARE PROGRAM FOR SCREENING**  
10 **MAMMOGRAPHIES FURNISHED IN 2002.**

11 (a) ONE-YEAR DELAY OF INCLUSION OF PAYMENT  
12 FOR SCREENING MAMMOGRAPHY IN PHYSICIAN FEE  
13 SCHEDULE.—Section 104(c) of the Medicare, Medicaid,  
14 and SCHIP Benefits Improvement and Protection Act of  
15 2000 (as enacted into law by section 1(a)(6) of Public Law  
16 106–554) is amended by striking “January 1, 2002” and  
17 inserting “January 1, 2003”.

18 (b) CHANGE IN PAYMENT AMOUNT.—Section  
19 1834(c)(3)(A) of the Social Security Act (42 U.S.C.  
20 1395m(c)(3)(A)) is amended—

21 (1) in the heading, by striking “\$55, IN-  
22 DEXED.—” and inserting “IN GENERAL.—”;

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

24 (3) in clause (ii)—

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

1 (B) by striking “that subsequent year.”  
2 and inserting “that year, and”; and

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

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

7 (c) EFFECTIVE DATES.—

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

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

17 (d) CONSTRUCTION.—Nothing in this section shall be  
18 construed as affecting the provisions of section 104(d) of  
19 the Medicare, Medicaid, and SCHIP Benefits Improve-  
20 ment and Protection Act of 2000 (as enacted into law by  
21 section 1(a)(6) of Public Law 106–554) (relating to pay-  
22 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—

11 (1) the relative value units established by the  
12 Secretary of Health and Human Services under the  
13 medicare physician fee schedule under section 1848  
14 of the Social Security Act (42 U.S.C. 1395w-4) for  
15 physicians' services that are gender-specific; and

16 (2) adjustments to payment amounts under the  
17 prospective payment systems for inpatient hospital  
18 services (under section 1886(d) of such Act (42  
19 U.S.C. 1395ww(d))) and for covered skilled nursing  
20 facility services (under section 1888(e) of such Act  
21 (42 U.S.C. 1395yy(e))) that are gender specific.

22 (b) REPORT.—Not later than December 31, 2001,  
23 the Comptroller General shall submit to Congress a report  
24 on the study conducted under subsection (a), together with  
25 such recommendations regarding the appropriateness of

1 adjusting the relative value units for physicians' services  
2 or the prospective payment amounts for inpatient hospital  
3 services or covered skilled nursing facility services that are  
4 gender-specific, as the Comptroller General determines ap-  
5 propriate.

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

8 (a) STUDY.—The Medicare Payment Advisory Com-  
9 mission shall conduct a study of the relative value units  
10 established by the Secretary of Health and Human Serv-  
11 ices under the medicare physician fee schedule under sec-  
12 tion 1848 of the Social Security Act (42 U.S.C. 1395w-  
13 4) for screening services that are reimbursed under such  
14 fee schedule.

15 (b) REPORT.—Not later than March 1, 2002, the  
16 Commission shall submit to Congress a report on the  
17 study conducted under subsection (a), together with such  
18 recommendations regarding the appropriateness of adjust-  
19 ing the relative value units for screening services that are  
20 reimbursed under the physician fee schedule as the Com-  
21 mission determines appropriate.

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