

109TH CONGRESS
2^D SESSION

S. 2606

To amend title XVIII of the Social Security Act to make publicly available on the official Medicare Internet site medicare payment rates for frequently reimbursed hospital inpatient procedures, hospital outpatient procedures, and physicians' services.

IN THE SENATE OF THE UNITED STATES

APRIL 7, 2006

Mr. BROWNBACK (for himself and Mr. COBURN) 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 make publicly available on the official Medicare Internet site medicare payment rates for frequently reimbursed hospital inpatient procedures, hospital outpatient procedures, and physicians' services.

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 "Medicare Payment
5 Rate Disclosure Act of 2006".

1 **SEC. 2. PUBLIC INTERNET AVAILABILITY OF MEDICARE**
 2 **PAYMENT RATES FOR FREQUENTLY REIM-**
 3 **BURSED PROCEDURES AND SERVICES.**

4 Title XVIII of the Social Security Act is amended by
 5 adding at the end the following new section:

6 **“SEC. 1898. PUBLIC INTERNET AVAILABILITY OF MEDICARE**
 7 **PAYMENT RATES FOR FREQUENTLY REIM-**
 8 **BURSED PROCEDURES AND SERVICES.**

9 “(a) IN GENERAL.—

10 “(1) INITIAL POSTING.—During the initial pe-
 11 riod beginning on a date not later than 120 days
 12 after the date of the enactment of this section and
 13 ending on the date that is 240 days after such start-
 14 ing date, the Secretary shall make publicly available
 15 on the official Medicare Internet site the following:

16 “(A) PAYMENT RATES FOR HOSPITAL IN-
 17 PATIENT PROCEDURES.—For each procedure
 18 selected under subsection (b)(1)(A)(i) and for
 19 each Metropolitan Statistical Area or other pay-
 20 ment area used for purposes of section 1886(d),
 21 the average rate of payment under such section
 22 for the procedure, determined without regard to
 23 the application of any deduction or coinsurance
 24 amount or any adjustment under subparagraph
 25 (B), (D), (F), or (G) of paragraph (5) of such
 26 section.

1 “(B) PAYMENT RATES FOR HOSPITAL OUT-
2 PATIENT PROCEDURES.—For each procedure
3 selected under subsection (b)(1)(A)(ii) and for
4 each county or other payment area used for
5 purposes of section 1833(t), the average rate of
6 payment under such section for the procedure,
7 determined without regard to the application of
8 any deductible or coinsurance.

9 “(C) PHYSICIAN PAYMENT RATES FOR
10 PHYSICIANS’ SERVICES.—For each physicians’
11 service selected under subsection (b)(1)(A)(iii)
12 and for each fee schedule area under section
13 1848, the average payment amount determined
14 under the fee schedule under such section for
15 the service, determined without regard to the
16 application of any deductible or coinsurance.

17 “(D) PERIOD FOR WHICH PAYMENT RATES
18 ARE APPLICABLE.—A description of the period
19 for which each payment rate or amount under
20 subparagraph (A), (B), or (C) is applicable.

21 “(E) SERVICES INCLUDED IN PROCE-
22 DURES.—A description of the items and serv-
23 ices included in each procedure selected under
24 clauses (i) and (ii) of subsection (b)(1)(A).

1 “(F) NOTICE.—A statement that the aver-
2 age payment rates and average payment
3 amounts described in subparagraphs (A)
4 through (C) are only applicable to the medicare
5 program under this title and may not be avail-
6 able for an individual who is not purchasing
7 such a procedure or service under such pro-
8 gram.

9 “(2) POSTING OF EXPANDED SELECTION.—
10 During the period beginning on the date that is one
11 day after the last day of the initial period described
12 in paragraph (1), the Secretary shall make publicly
13 available on the official Medicare Internet site the
14 following:

15 “(A) PAYMENT RATES FOR HOSPITAL IN-
16 PATIENT PROCEDURES.—For each procedure
17 selected under subsection (b)(1)(B)(i) and for
18 each Metropolitan Statistical Area or other pay-
19 ment area used for purposes of section 1886(d),
20 the average rate of payment described in para-
21 graph (1)(A) for the procedure.

22 “(B) PAYMENT RATES FOR HOSPITAL OUT-
23 PATIENT PROCEDURES.—For each procedure
24 selected under subsection (b)(1)(B)(ii) and for
25 each county or other payment area used for

1 purposes of section 1833(t), the average rate of
2 payment described in paragraph (1)(B) for the
3 procedure.

4 “(C) PHYSICIAN PAYMENT RATES FOR
5 PHYSICIANS’ SERVICES.—For each physicians’
6 service selected under subsection (b)(1)(B)(iii)
7 and for each fee schedule area under section
8 1848, the average payment amount described in
9 paragraph (1)(C) for the physicians’ service.

10 “(D) PERIOD FOR WHICH PAYMENT RATES
11 ARE APPLICABLE.—A description of the period
12 for which each payment rate or amount under
13 subparagraph (A), (B), or (C) is applicable.

14 “(E) SERVICES INCLUDED IN PROCE-
15 DURES.—A description of the items and serv-
16 ices included in each procedure selected under
17 clauses (i) and (ii) of subsection (b)(1)(B).

18 “(F) NOTICE.—A statement that the aver-
19 age payment rates and average payment
20 amounts described in subparagraphs (A)
21 through (C) are only applicable to the medicare
22 program under this title and may not be avail-
23 able for an individual who is not purchasing
24 such a procedure or service under such pro-
25 gram.

1 “(b) SELECTION OF PROCEDURES AND SERVICES.—

2 “(1) IN GENERAL.—

3 “(A) INITIAL SELECTION.—For purposes
4 of subsection (a)(1) and based on the most re-
5 cent national data available, the Secretary shall
6 select the following:

7 “(i) At least the 30 hospital inpatient
8 procedures for which payment is most fre-
9 quently provided under section 1886(d).

10 “(ii) At least the 30 hospital out-
11 patient procedures for which payment is
12 most frequently provided under section
13 1833(t).

14 “(iii) At least the 30 physicians’ serv-
15 ices (as defined in section 1861(q)) for
16 which payment is most frequently provided
17 under section 1848.

18 “(B) EXPANDED SELECTION.—For pur-
19 poses of subsection (a)(2) and based on the
20 most recent national data available, the Sec-
21 retary shall select the following:

22 “(i) At least the 100 hospital inpa-
23 tient procedures for which payment is most
24 frequently provided under section 1886(d).

1 “(ii) At least the 100 hospital out-
2 patient procedures for which payment is
3 most frequently provided under section
4 1833(t).

5 “(iii) At least the 100 physicians’
6 services (as defined in section 1861(q)) for
7 which payment is most frequently provided
8 under section 1848.

9 “(2) UPDATING EXPANDED SELECTION.—The
10 Secretary shall periodically update the procedures
11 and services selected under paragraph (1)(B).

12 “(3) FURTHER EXPANSION OF SELECTION.—
13 The Secretary shall expand the number of proce-
14 dures and services selected under paragraph (1)(B)
15 to include as many procedures and services as may
16 be useful for an individual not entitled to benefits
17 under part A or enrolled under part B in the pur-
18 chase of such procedures and services.

19 “(c) AUTHORITY TO POST ADDITIONAL INFORMA-
20 TION.—The Secretary may make publicly available on the
21 official Medicare website such information on the payment
22 rate or payment amount under this title for a procedure,
23 item, or service not selected under subsection (b) as may
24 be useful for an individual not entitled to benefits under
25 part A or enrolled under part B in the purchase of the

1 procedure, item, or service. To the extent practicable, such
2 information shall be provided for each payment area in-
3 volved.

4 “(d) ADMINISTRATIVE PROVISIONS.—

5 “(1) USE OF MOST RECENT NATIONAL DATA.—

6 The information described in paragraphs (1) of sub-
7 section (b) and subsection (c) shall be based on the
8 most recent national data available.

9 “(2) ACCESSIBILITY BY ZIP CODE.—Such infor-
10 mation for an applicable payment area shall be ac-
11 cessible by any zip code included in such area.”.

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