2005 - 2006 Health IT Legislation Crosswalk

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HUIISS	McHugh - Gonzalez (H.R. 747)	Murphy - Kennedy (H.R. 2234)	Shaw - Cardin (H.R. 2356)	Johnson (H.R. 3617)	Murphy (H.R. 4142)	Johnson/Deal (H.R. 4157)	Frist (S. 4)	Kennedy (S. 16)	Jeffords (S. 544)	Kyl - Stabenow (S. 1081)	Dodd (S. 1223)	Stabenow - Snowe (S.1227)	Grassley - Baucus (S. 1356)	Enzi - Kennedy - Frist - Clinton (S. 1418)	Frist (S. 1503)	Clinton/Obama (S. 1784)	Coleman (S. 1952)
Official Title:	National Health Information Incentive Act of 2005	21st Century Health Information Act of 2005	Preserving Patient Access to Physicians Act of 2005	Medicare Value- Based Purchasing for Physicians' Act of 2005	Medicaid Transaction Grant Act of 2005	Health Information Technology Promotion Act of 2005	Healthy America Act of 2005	Affordable Health Care Act	Patient Safety and Quality Improvement Act of 2005	Preserving Patient Access to Physicians Act of 2005	Information Technology for Health Care Quality Act	Health Information Technology Act of 2005	Medicare Value Purchasing Act of 2005	Wired for Healthcare Quality Act	Healthy America Act of 2005	National Medical Error Disclosure and Compensation (MEDIC) Act of 2005	Critical Access to Health Information Technology Act of 2005
HIMSS Endorsed	TBD	Yes	TBD	Yes	TBD	Yes	TBD	TBD	Yes	TBD	TBD	Yes	TBD	Yes	TBD	TBD	TBD
Co-sponsors	48	33	153	37	1	37	10	18	10	25	2	5	6	34	6	2	3
Status	Referred to Energy & Commerce and Ways & Means	Referred to Energy & Commerce and Ways & Means	Referred to Energy & Commerce and Ways & Means	Referred to Energy & Commerce and Ways & Means	Referred to Energy & Commerce; Rolled into Budget Reconciliation	Referred to Energy & Commerce and Ways & Means	Referred to Finance Committee	Referred to Finance Committee	Signed on 7/29/05 into law as P.L. 109-41	Referred to Finance Committee	Referred to Health Education, Labor & Pensions (HELP)	Referred to Finance Committee	Referred to Finance Committee	Passed by Senate HELP Committee	Referred to Finance Committee	Education, Labor &	Referred to Health Education, Labor & Pensions (HELP)
Codifies ONCHIT	Yes	No	No	No	No	Yes	Yes	Yes	No	No	Yes, within White House	No	No	Yes	Yes	No	No
Promotes Standards Adoption	Yes, adopt trial standards within in 2 years	Yes	No	No	No	Yes	Yes	Yes	Yes	No	Yes, adopt standards within 2 years	Yes	No	Yes	Yes	No	No
Proposes Advisory Body	No	No	No	No	No	Yes	Yes	No	No	No	No	No	No	Yes	Yes	No	No
Promotes Interoperability	No	Yes	No	No	No	Yes	Yes	Yes	Yes	No	Yes	Yes	No	Yes	Yes	No	No
New Funding	No	\$50M for FY06	No	No	Yes, \$50M for FY06 and \$50M FY07	No	\$125M for FY06 and such sums as needed through FY10	No	No	No	\$250M per year for FY06-10	\$4.05B total for FY06- 10 (Healthcare Trust Fund)	\$10M for entity to develop quality measures	\$125M for FY06 and \$150 for FY07	\$125M for FY06 and such sums as needed through FY10		No
Loan Guarantees	No	No	No	No	No	No	No	Yes	No	No	Yes	No	No	No	No	No	No
Grants	Yes	Yes for RHIO Plans	No	No	Yes, \$50M for FY06 and \$50M for FY07	No	Yes	Yes	No	No	Yes, must be matched by 20% non-federal funds	Yes	No	Yes	No	Yes; for IT purchases and patient safety	Yes; up to \$250,000
Matching Requirements	No	No	No	No	No	No	No	\$1/\$5	No	No	\$1/\$5	% of federal grant funding can only be equal to federal income payments	No	Yes, \$1 for \$3	No	No	No
Safe harbor	No	Yes, exemption from Stark and Anti- kickback statute for any equipment and services for approved RHIO plan	No	No	No	Yes	No	No	No	No	No	No	Yes	No	Yes	No	No
CCHIT	No	Yes	No	No	No	Yes	Yes	No	No	No	No	Yes	No	Yes	Yes	No	No
Other Key Attributes	Refundable tax credit equal to 10% of amount paid	National Technical Assistance Center; Adjusted Medicare Payment	Creates Medicare reimbursement increases of at least 2.6% in 2006 and 2007	NA	ICD-9 to ICD-10 by October 1, 2009	Rulemaking to Upgrade ASC X12 and NCPDP Standards and ICD Codes	Study of State laws; HIPAA study	NA	Promoted study to assess impact of technology on improving health care	Creates Medicare reimbursement increases of at least 2.6% in 2006 and 2007	NA	20% of funds reserved for rural areas; Adjusted Medicare Payment; Requires agencies to permit providers to submit data electronically	Value based purchasing; payments reduced 2% if not quality reporting	QIO Assistance and Center for Better Practices; Requires agencies to permit providers to submit data electronically	S. 1503 is also included within S. 4	Creates Office of Patient Safety and Healthcare Quality; establishes a National Patient Safety Database; establishes a national medical error disclosure and compensation program	Rulemaking to Upgrade ASC X12 and NCPDP Standards and ICD Codes