

MEDICARE CHRONIC CARE IMPROVEMENT ACT OF 2001
S. 1589, Sen. Rockefeller and H.R. 3183, Rep. Stark

TITLE I – Expansion of Benefits to Prevent, Delay, and Minimize the Progression of Chronic Conditions

- **Improve Access to Preventive Services**
 - Eliminate deductibles and co-insurance for Medicare covered preventive services.
 - Streamline process of approving preventive benefits by directing the Secretary of Health and Human Services to contract with the Institute of Medicine (IOM) to investigate and recommend new preventive benefits every 3 years. Grant the Secretary the authority to implement these recommendations, and fast-track the recommendations through Congress if the Secretary chooses not to act upon this authority.
- **Expand Access to Health Promotion Services**
 - Establish demonstration projects to promote disease self-management.
 - Implement a Medicare health education and risk appraisal program no later than 18 months after a series of demonstration projects conclude.
- **Expand Coverage for Care Coordination and Assessment Services**
 - Create a new benefit that covers assessment, care coordination, counseling, and education assistance for individuals with serious and disabling chronic conditions. Services could be provided by health care professionals, including physicians, social workers, and nurses.
 - Examples of items and services to be covered include: initial and periodic health screening and assessments; management and referral for medical and other health services; medication management; and patient and family caregiver education and counseling.

Title II – Establish Payment Incentives for Furnishing Quality Services to Individuals with Serious and Disabling Chronic Conditions

- **Improve Medicare Financing Methods**
 - Direct the Secretary to refine Medicare prospective payment systems for skilled nursing facility (SNF), home health, therapy, partial hospitalization, end stage renal dialysis (ESRD), and outpatient hospital services and refine resource-based relative value scale (RBRVS) payment methods for physicians to ensure appropriate payment for serving individuals with serious and disabling chronic conditions.
 - Direct the Secretary to refine Medicare+Choice risk adjustment methodology to provide adequate payment for plans with specialized programs for frail elderly and at-risk beneficiaries.
 - Until the refined risk adjustment methodology is implemented, direct the Secretary to continue current payment methodologies for existing specialized programs for frail elderly and at-risk beneficiaries.
 - Create a demonstration program to provide additional payments to Medicare+Choice plans that provide a specialized program of care for beneficiaries with serious and disabling chronic conditions. These plans must exclusively serve such beneficiaries or serve a disproportionate share of such beneficiaries. The demonstration program would expire one year after the refined risk adjustment methodology is implemented.

Title III – Study and Report on Effective Chronic Condition Care

- **Evaluate Medicare Policies Regarding Chronic Condition Care**
 - Direct the Secretary to study chronic condition trends and associated service utilization, cumulative costs, and quality indicators in Medicare.

- Direct the Secretary to report the study results to Congress every 3 years. The report must include recommendations on improving care for Medicare beneficiaries with chronic conditions, reducing chronic conditions, and reducing related medical expenses.
- **Identify Improvements in Medicare to Ensure Effective Chronic Condition Care**
 - Direct the Secretary to contract with the IOM to investigate and identify barriers and facilitators to effective care for Medicare beneficiaries with chronic conditions, including inconsistent clinical, financial, or administrative requirements across care settings. The IOM's report must include recommendations to improve access to effective care.

Definitions:

- "Chronic condition" means one or more physical or mental conditions which are likely to last for an unspecified period of time, or for the duration of an individual's life, for which there is no known cure, and which may affect an individual's ability to carry out basic activities of daily living (ADLs), instrumental activities of daily living (IADLs), or both.
- "Serious and disabling chronic condition(s)" means the individual has one or more physical or mental conditions and has been certified by a licensed health care practitioner within the preceding 12 months as
 - having a level of disability such that the individual, for at least 90 days, is unable to perform at least 2 ADLs or a number of IADLs or other measure indicating an equivalent level of disability or
 - requiring substantial supervision due to severe cognitive impairment.