## An Act

Heat counted by the Sensie and House of Representatives of the United States of America in Google

SECTION 1. SHORT TITLE.

## THIS ACT MAY BE CITED AS THE "HEALTHCARE RESEARCH AND QUALITY ACT OF 1999".

SEC, ZAMENDNIKKY TO THE PUBLIC HEALTH SERVICE ACT.

(1) In Concept.—Tele 20 of the Public Hould, Service Act (12 U.S.C. 229 et aug.) is atmosfed to

"TITLE IX-AGENCY FOR HEALTHCARE RESEARCH AND QUALITY "PART A-ESTABLISHMENT AND GENERAL DUTIES

SEC. 801, MISSION AND DUTTES

PUBLIC LAW 106-129-DEC. 6, 1999

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JOCESS TO ENSURE APPROPRIATE, RESEARCH.-The Du. s to ensure that the requirements of paragraph (1) are reflected in the o search conducted and supported by the Agency.

\*(3) OFFICE OF PRIORITY POPULATIONS.—The Director shall establish an C Priority Populations to assist in carrying out the requirements of paragraph (1).

## SEC. 913. INFORMATION ON QUALITY AND COST OF CARE.

"(a) IN GENERAL .-- The Director shall-

"(1) conduct a survey to collect data on a nationally representative sample of the population on the cost, use and, for fiscal year 2001 and subsequent fiscal years, quality of health care, including the types of health care services Americans use, their access to health care services, frequency of use, how much is paid for the services used, the source of those payments, the types and costs of private health insurance, access, satisfaction, and quality of care for the general population including rural residents and also for populations identified in section 901(c); and

"(2) develop databases and tools that provide information to States on the quality, access, and use of health care services provided to their residents.

"(b) QUALITY AND OUTCOMES INFORMATION.-"(1) In General.—Beginning in fiscal year 2001, the Director shall ensure that the survey conducted under subsection (a)(1) will-

"(A) identify determinants of health outcomes and functional status, including the health care needs of populations identified in section 901(c), provide data to study the relationships between health care quality, outcomes, access, use, and cost, measure changes over time, and monitor the overall national impact of Federal and State policy changes on health care;

"(B) provide information on the quality of care and patient outcomes for frequently occurring clinical conditions for a nationally representative sample of the population including rural residents; and

"(C) provide reliable national estimates for children and persons with special health care needs through the use of supplements or periodic expansions of the survey. In expanding the Medical Expenditure Panel Survey, as in existence on the date of the enact-

ment of this title in fiscal year 2001 to collect information on the quality of care, the Director shall take into account any outcome measurements generally collected by private sector accreditation egunizations.

2) ANNUAL REPORT.—Beginning in fiscal year 2003, the Secretary, acting throhall submit to Congress an annual report on national trends in the quality of the American people.