

116TH CONGRESS
1ST SESSION

H. R. 1955

To require the Administrator of the Centers for Medicare & Medicaid Services to conduct a study on antipsychotic prescribing practices in nonnursing home settings under the Medicare program, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 28, 2019

Ms. KUSTER of New Hampshire (for herself, Mr. SMITH of New Jersey, and Ms. WATERS) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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

A BILL

To require the Administrator of the Centers for Medicare & Medicaid Services to conduct a study on antipsychotic prescribing practices in nonnursing home settings 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,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Understanding Appro-
5 priate Alzheimer’s Care Act of 2019”.

1 **SEC. 2. REQUIREMENT OF ADMINISTRATOR OF CENTERS**
2 **FOR MEDICARE & MEDICAID SERVICES TO**
3 **CONDUCT STUDY ON ANTIPSYCHOTIC PRE-**
4 **SCRIBING PRACTICES IN NONNURSING HOME**
5 **SETTINGS UNDER MEDICARE PROGRAM.**

6 Not later than the date that is 18 months after the
7 date of the enactment of this Act, the Administrator of
8 the Centers for Medicare & Medicaid Services shall, in co-
9 ordination with the heads of other entities within the De-
10 partment of Health and Human Services (as determined
11 appropriate by the Secretary of Health and Human Serv-
12 ices) and the Comptroller General of the United States—

13 (1) conduct a study on antipsychotic prescribing
14 practices in nonnursing home settings under the
15 Medicare program under title XVIII of the Social
16 Security Act (42 U.S.C. 1395 et seq.) that as-
17 sesses—

18 (A) whether antipsychotic prescribing prac-
19 tices in such nonnursing home settings are ap-
20 propriate or inappropriate;

21 (B) whether individuals who have been
22 prescribed antipsychotic medications in such
23 nonnursing home settings have had improved
24 health outcomes, taking into account the dura-
25 tion of any such prescription;

26 (C) whether physicians—

1 (i) are aware of the health risks of
2 antipsychotic medications for individuals
3 with Alzheimer’s disease; and

4 (ii) attempt to use nonpharma-
5 cological interventions before prescribing
6 such medications for such individuals; and

7 (D) whether individuals who have been
8 prescribed antipsychotic medications in such
9 nonnursing home settings, and the families of
10 such individuals, are aware of the health risks
11 of such medications; and

12 (2) submit to Congress and the Secretary of
13 Health and Human Services, and make publicly
14 available, a report on the findings of such study, in-
15 cluding recommendations for how inappropriate
16 antipsychotic prescribing practices in such non-
17 nursing home settings may be reduced.

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