

Grade	Deadline	PPACA Section(s)	Requirements	Actions Taken, As of October 15, 2011
1.	Sept. 19, 2010	1332(a)	Requires the HHS Secretary to promulgate regulations relating to the state innovation waivers.	HHS published a notice of proposed rulemaking on March 14, 2011, "Application, Review, and Reporting Process for Waivers for State Innovation" (76 Federal Register 13553)
2.	March 23, 2011	1001	Requires the HHS Secretary, by regulation, to develop standards for use by a group health plan and a health insurance issuer offering group or individual health insurance coverage in compiling and providing a summary of benefits and coverage explanation that accurately describes the benefits and coverage. Requires the Secretary, in developing such standards, to consult with the National Association of Insurance Commissioners (NAIC), a working group composed of representatives of health insurance-related consumer advocacy organizations, health insurance issuers, health care professionals, patient advocates including those representing individuals with limited English proficiency, and other qualified individuals.	On December 17, 2010, NAIC submitted its recommendations to the Secretaries of HHS and Labor. The cover letter and attachments are available at http://www.naic.org/documents/committees_b_consumer_information_ppaca_letter_to_sebelius.pdf and http://www.naic.org/documents/committees_b_consumer_information_ppaca_final_materials.pdf
3.	March 23, 2011	1254	Requires the HHS Secretary to submit to Congress a report on the fully-insured and self-insured group health plan markets that compares the characteristics of employers, health plan benefits, financial solvency, capital reserve levels, and the risks of becoming insolvent.	On March 30, 2011, HHS released "Report to Congress on a Study of the Large Group Market." The report is available at http://www.healthcare.gov/center/reports/largegroup03302011a.pdf .
4.	Feb. 7, 2011	2602	Requires the HHS Secretary, as part of the President's budget submission, to issue an annual report to Congress with recommendations for legislative action that would improve care coordination and benefits for dual eligible individuals.	HHS established the Federal Coordinated Health Care Office (FCHC), pursuant to PPACA Sec. 2602(a), and published a statement of its organization, functions, and delegations of authority on December 30, 2010 (75 <i>Federal Register</i> 82405). In fulfillment of the annual reporting requirement, HHS issued a letter to the Vice President and to Congress on March 1, 2011, that reports on early FCHC activities.
5.	Dec. 31, 2010	3012	Requires the Interagency Working Group on Health Care Quality, convened by the	The Interagency Working Group on Health Care Quality has been

			President and chaired by the HHS Secretary, to submit to Congress, and publish on the Internet, a report on its progress and recommendations.	convened, consisting of 23 senior federal officials. The Group held its first meeting on March 4, 2011. No report has been submitted to Congress. See http://www.ahrq.gov/workingforquality/ .
6.	Jan. 1, 2011	3006(f)	Requires the HHS Secretary to develop and submit to Congress a plan that would implement value-based purchasing for ambulatory surgery centers (ASCs).	CMS hosted an open door forum on October 14, 2010, to solicit public comments on the development of the ASC value-based purchasing program. See https://www.cms.gov/OpenDoorForums/Downloads/ASCVBPRReportToCongress101410.pdf . A report has yet to be released.
7.	Jan. 1, 2011	3011	Requires the HHS Secretary to establish and submit to Congress a national strategy to improve the delivery of health care services, patient health outcomes, and population health.	On March 21, 2011, HHS released "Report to Congress: National Strategy for Quality Improvement in Health Care." The report is available at http://www.healthcare.gov/center/reports/nationalqualitystrategy032011.pdf .
8.	Jan. 1, 2011	3011	Requires the HHS Secretary to create a website to make available information regarding: (1) the national priorities for health care quality improvement; (2) the agency-specific strategic plans for health care quality; and (3) other information, as the Secretary determines to be appropriate.	AHRQ has created a webpage called "Working for Quality," which includes information about the Interagency Working Group and the National Quality Strategy. No information about the agency-specific strategic plans is posted. See http://www.ahrq.gov/workingforquality/ .
9.	Jan. 1, 2011	3127	Requires the Medicare Payment Advisory Commission (MedPAC) to study and report to Congress on the adequacy of Medicare payments for rural health care providers and suppliers.	MedPAC has conducted site visits in three states, which were discussed at its November 2010 meeting. At that meeting MedPAC indicated that the report would be issued on June 15, 2012. (The new deadline is pursuant to a written agreement with the congressional committees of jurisdiction.) See http://www.medpac.gov/transcripts/rural%20report%20cover%20sheet.pdf .
10.	March 23, 2011	3507	Requires the HHS Secretary to submit to Congress a report providing the determination of whether the addition of quantitative summaries of the benefits and risks of prescription drugs would improve health care decision making by clinicians and	FDA's Division of Drug Marketing, Advertising, and Communication (DDMAC) has begun its review of research about decision making and cognitive psychology. It is expected that the results from this review will be presented to the agency's Risk

			patients.	Communication Advisory Committee in November 2011. The Committee's recommendations will be incorporated into a report to Congress on the addition of quantitative summaries of benefit and risk information on prescription drug labels and advertisements. See http://www.fda.gov/AboutFDA/Transparency/track/ucm242928.htm .
11.	May 22, 2010	10413	Requires the HHS Secretary to establish an advisory committee to assist in creating and conducting required education campaigns regarding young women's breast health.	CDC published a notice of establishment of the committee on June 24, 2010 (<i>75 Federal Register</i> 36098).
12.	July 7, 2010	4205	Requires the HHS Secretary to publish a Federal Register notice specifying terms and conditions (pending promulgation of regulations) for restaurants and vending machine operators to voluntarily elect to be subject to certain nutrition labeling requirements.	On July 23, 2010, FDA published a notice, "Voluntary Registration by Authorized Officials of Non-Covered Retail Food Establishments and Vending Machine Operators Electing To Be Subject to the Menu and Vending Machine Labeling Requirements Established by the Patient Protection and Affordable Care Act" (<i>75 Federal Register</i> 43182).
13.	March 23, 2011	4001(g)	Requires the chairperson of the National Prevention, Health Promotion and Public Health Council to publish a national prevention, health promotion and public health strategy.	A national strategy has yet to be published. A draft framework to guide the development of a "National Prevention Strategy" was made available for public comment from October 1, 2010, through January 18, 2011. See http://www.healthcare.gov/center/committees/nphpphc/index.html .
14.	March 23, 2011	4205	Requires the HHS Secretary to "promulgate proposed" nutrition labeling regulations for chain restaurants and vending machines.	FDA filed two proposed rules with the Office of the Federal Register on April 1, 2011: "Food Labeling; Calorie Labeling of Articles of Food in Vending Machines;" and "Nutrition Labeling of Standard Menu Items in Restaurants and Similar Retail Food Establishments." Both are due to be published on April 6, 2011. See http://www.ofr.gov/inspection.aspx
15.	April 1, 2010; May 7, 2010; June 1, 2010; July 1, 2010	5602	Requires the HHS Secretary to appoint a negotiated rulemaking committee to establish a methodology and criteria for designating medically underserved populations and health professions shortage areas. By May 7, 2010, the Secretary must publish a notice announcing the intent to form such a	No reports have been released. HRSA published a notice of intent to form the negotiated rulemaking committee on May 11, 2010 (<i>75 Federal Register</i> 26167-26171). The committee members were appointed on July 9, 2010, and the committee has been meeting monthly

			committee to negotiate and develop a proposed rule, and setting the target date for publication of the rule as July 1, 2010. The committee is required to provide a status report to the Secretary by April 1, 2010. A final committee report is due by June 1, 2010.	since September 2010. For more details about the committee, see http://www.hrsa.gov/advisorycommittees/shortage/About/index.html .
16.	May 22, 2010	10501(l)	Requires the HHS Secretary to define by regulation "underserved rural community" for a new rural physician training grant program.	HRSA published an interim final rule on May 26, 2010 (75 <i>Federal Register</i> 29447).
17.	Sept. 19, 2010	6401(a)	Requires the HHS Secretary to establish provider and supplier screening procedures for Medicare, Medicaid, and CHIP. The procedures are phased in, with new providers and suppliers being subject to additional screening and other enrollment requirements first, then current providers later.	CMS published a proposed rule with guidance on implementing this requirement on September 23, 2010 (75 <i>Federal Register</i> 58204), and published a final rule with comment on February 2, 2011 (76 <i>Federal Register</i> 5862).
18.	March 23, 2011	6103	With certain exceptions, requires the HHS Secretary to establish a process to modify or revamp the Nursing Home Compare Medicare website or a successor website in accordance with the website's review, including additional disclosure information and a consumer rights information page.	CMS issued a letter to State Survey Agency Directors on March 18, 2011, announcing planned changes to the Nursing Home Compare Medicare website scheduled for April 23, 2011 and July 21, 2011. The April 23, 2011 changes to the Nursing Home Compare website will include additional disclosure and consumer rights features. See https://www.cms.gov/surveycertificationgeninfo/downloads/SCLetter11_17.pdf .
19.	March 23, 2011	6105	Requires the HHS Secretary to develop and make available a standardized complaint form to be used by residents (or their representatives) in filing complaints against a SNF or nursing facility (NF).	CMS issued a letter to State Survey Agency Directors on March 18, 2011, announcing planned changes to the Nursing Home Compare Medicare website scheduled for April 23, 2011 and July 21, 2011. The April 23, 2011 changes will include a standardized complaint form and links to state complaint websites. See https://www.cms.gov/surveycertificationgeninfo/downloads/SCLetter11_17.pdf .
20.	June 21, 2010	10221	Requires the HHS Secretary to develop a plan to increase IHS's behavioral health care staff by 500 positions (200 of which will be devoted to child, adolescent and family services) within 5 years of enactment.	No public information located.

21.	Sept. 19, 2010	7102	Requires the HHS Secretary to promulgate regulations regarding the PHSA section 340B drug pricing program to (1) establish and implement an administrative process for the resolution of claims by covered entities that they have been overcharged for drugs purchased under the program, and manufacturers' post-audit claims of violations related to drug rebates or resale; and (2) establish CMPs for noncompliant drug manufacturers.	On September 20, 2010, HRSA published two Advance Notices of Proposed Rulemaking: (1) 340B Drug Pricing Program Administrative Dispute Resolution Process (75 <i>Federal Register</i> 57233-57235); and (2) 340B Drug Pricing Program Manufacturer Civil Monetary Penalties (75 <i>Federal Register</i> 57230-57232).
22.	March 23, 2011	10221	Requires the HHS Secretary, acting through the IHS, to assess the need for, availability, and cost of inpatient mental health care for Indians.	No public information located.
23.	March 23, 2011	10221	Requires the HHS Secretary and the Secretary of the Interior to enter into a Memorandum of Agreement (MOA) regarding mental illness and self-destructive behavior among Indians and strategies for addressing unmet needs.	No public information located. [Note: A MOA that addressed alcohol and substance abuse has been in effect since 1987. See 52 <i>Federal Register</i> 9709.]
24.	March 23, 2011	10221	Requires the HHS Secretary to establish protocols, policies, and procedures for IHS programs for victims of domestic or sexual violence.	No public information located. [Note: Prior to PPACA, IHS had developed some domestic violence and sexual assault protocols. See http://www.ihs.gov/MedicalPrograms/MCH/V/DV01.cfm .]
25.	June 1, 2011	4204(e)	Requires the Comptroller General to submit to Congress a report on Medicare beneficiaries' access to recommended vaccines covered under Part D.	GAO has not yet published the report. It is recorded in the GAO database of active assignments (#290877) with an anticipated completion date of Nov. 30, 2011.
26.	July 1, 2011	3113	Requires the HHS Secretary to begin a 2-year, \$100 million demonstration under Part B that will make separate payments to labs for complex diagnostic tests provided to Medicare beneficiaries.	On July 5, 2011, CMS published a notice of an opportunity to participate in the demonstration, "Medicare Program; Section 3113: The Treatment of Certain Complex Diagnostic Laboratory Tests Demonstration" See http://www.cms.gov/DemoProjectsEv alRpts/MD/itemdetail.asp?itemID=CMS1240611 .
27.	Oct. 1, 2011	3006(a) & (b)	Requires the HHS Secretary to submit to Congress plans for implementing a value-based purchasing program for Medicare payments to skilled nursing facilities (SNF) and home health agencies.	CMS has not yet released the SNF and home health value-based purchasing plans.
28.	Sept. 23, 2011	4302(b)	Requires the HHS Secretary to submit to Congress a report	On Sept. 29, 2011, HHS released "Report to Congress: Approaches

			evaluating health care disparities data collection under Medicaid and CHIP.	for Identifying, Collecting, and Evaluating Data on Health Care Disparities in Medicaid and CHIP.” See http://www.healthcare.gov/law/resources/reports/disparities09292011a.pdf .
29.	April 1, 2011	5101	Requires the National Health Care Workforce Commission to submit to Congress a report containing a review of, and recommendations on, high-priority health care workforce issues.	The 15-member commission was appointed in 2010, but has received no funding and has not produced any reports. See http://www.cq.com/doc/hbnews-3962182?wr=bzR2QWhQbmtjMG1HalczZVVpWTNiZw .
30.	Oct. 1, 2011	5101	Requires the National Health Care Workforce Commission to submit to Congress a report containing a review of, and recommendations on, national health care workforce priorities, goals, and policies.	The 15-member commission was appointed in 2010, but has received no funding and has not produced any reports. See http://www.cq.com/doc/hbnews-3962182?wr=bzR2QWhQbmtjMG1HalczZVVpWTNiZw .
31.	Sept. 23, 2011	5507(a)	Requires the HHS Secretary to award 3-year demonstration grants to states for developing core training competencies and certification programs for personal or home care aides. PPACA appropriated a total of \$15 million for the grant program over the period FY2010-FY2012.	On Sept. 30, 2010, HRSA awarded six Personal and Home Care Aide State Training (PHCAST) Program grants totaling \$4.5 million for FY2010. See http://bhpr.hrsa.gov/nursing/grants/phcast.html .
32.	July 1, 2011	5602	Requires the HHS Secretary to publish a final rule (incorporating public comment on an earlier interim final rule) on a comprehensive methodology and criteria for designating medically underserved populations and health professions shortage areas.	A final rule has yet to be published. See the entry for PPACA Sec. 5602 in Table 1 for the status of HHS actions taken towards meeting this final rule deadline.
33.	Sept. 23, 2011	6703(c)	Requires the HHS Secretary to submit to the Elder Justice Coordinating Council and to Congress a report containing the findings and recommendations of a study on establishing a national nurse aide registry.	The Elder Justice Coordinating Council has received no funding. No report has been submitted.
34.	Sept. 23, 2011	10221	Requires the HHS Secretary to submit a report to Congress on protocols, policies, procedures, and other programs for victims of domestic or sexual violence. [IHCA Sec. 181]	IHS informed CRS that the report will be submitted to the relevant congressional committees in November 2011.
35.	Sept. 23, 2011	10221	Requires the HHS Secretary to submit a report describing the	IHS informed CRS that the report will be submitted to the relevant

			specified elements of the prescription drug monitoring program. [IHCA Sec. 196]	congressional committees in November 2011.
36.	Sept. 23, 2011	10221	Requires the Attorney General (AG) to submit a report to Congress describing certain factors regarding the AG's responsibility related to prescription drug abuse in Indian communities. [IHCA Sec. 196]	In October 2011, the Department of Justice released "Indian Health Care Improvement Act, Report Required by 25 U.S.C. 1680q(b)(2)." See http://www.justice.gov/tribal/docs/ihia-pdmp-rpt-to-congress.pdf .
37.	Sept. 23, 2011	10221	Requires the HHS Secretary to submit a report to Congress describing disease and injury prevention activities by IHS and other federal agencies. [IHCA Sec. 198]	IHS informed CRS that the report will be submitted to the relevant congressional committees in November 2011.
38.	Sept. 23, 2011	10221	Requires GAO to submit a report to Congress containing the results and recommendations resulting from a study evaluating the effectiveness of the coordination of health care services provided to Indians either through Medicare, Medicaid, or CHIP, with those provided by IHS, with funding from state or local governments or Indian tribes. [IHCA Sec. 199]	GAO negotiated the priority order of the various PPACA mandates with relevant congressional committees. With agreement from the committees, work on this report will commence after the completion of the CHS report.