

MEDICARE PROVISIONS IN RECONCILIATION

ISSUE	POSITION
Home Health Reallocation	Support immediate transfer since gains 2 years of Trust Fund solvency Fallback: None; if have to accept, use Senate (House has technical prob.)
High-Income Premium	Support if: Administered through Treasury (not on the tax form), income thresholds are indexed, and phases out at 75% of costs. Fallback: Accept 100% phase out; change thresholds
Private Fee-For-Service Plans	Oppose because allows balance billing, risk segmentation Fallback: Add balance billing and premium protections
Private Physician Contracting	Oppose because it allows physicians to say that they will only treat beneficiaries if they agree to pay the full amount with no Medicare payment. Fallback: Require beneficiaries to sign an attestation to raise awareness.
MSAs	Support if: Limit to 100,000 or below; adopts Senate's use of Kassebaum-Kennedy cost sharing structure; time limited. Fallback: 250,000; nationwide; longer time
Medicare Commission	Support if: Even numbers; outside experts; President chooses chair; super majority; non-binding; report in 1999; uses Admin Actuaries not CBO. Fallback: No super majority; jointly chosen chair.
GME/DSH Carve Out	Support carving payments out of managed care payments assure that these facilities receive these funds. Oppose excluding DSH. Fallback: Study and then carve out if deemed necessary.
DSH Cut	Oppose since these hospitals serve a critical need in their communities Fallback: No compromise
Hospital transfer	Support transfers policy for all post-acute care settings. Fallback: Transfers for SNF only.
Prudent Purchasing	Support including: Senate's competitive bidding demonstration and inherent reasonableness; House's centers of excellence. Fallback: Demo w/ trigger for broader authority; 20% inherent reasonableness; no compromise on centers on excellence
Mammography	Oppose cost sharing. Waive the deductible & coinsurance in all settings. Fallback: Waive all cost sharing only for screening mammography.
Medigap	Support Senate's open enrollment for disabled beneficiaries & trial period for managed care enrollees. Fallback: Conference with guaranteed issue for disabled.
Office of Competition	Oppose inclusion Fallback: No compromise