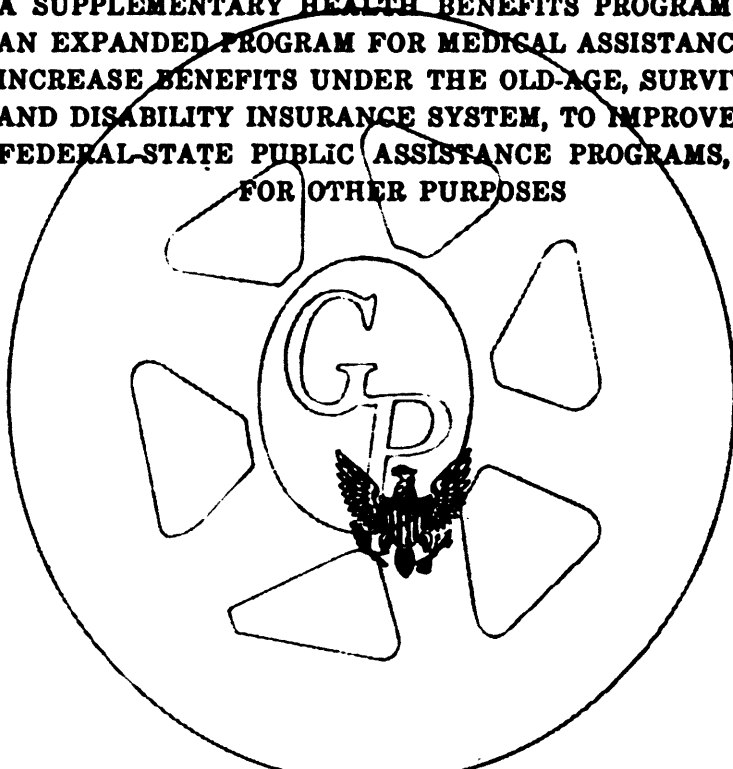


# BRIEF DESCRIPTION OF SENATE AMENDMENTS

TO

## H.R. 6675

AN ACT, TO PROVIDE A HOSPITAL INSURANCE PROGRAM FOR THE AGED UNDER THE SOCIAL SECURITY ACT WITH A SUPPLEMENTARY HEALTH BENEFITS PROGRAM AND AN EXPANDED PROGRAM FOR MEDICAL ASSISTANCE, TO INCREASE BENEFITS UNDER THE OLD-AGE, SURVIVORS, AND DISABILITY INSURANCE SYSTEM, TO IMPROVE THE FEDERAL-STATE PUBLIC ASSISTANCE PROGRAMS, AND FOR OTHER PURPOSES



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## SENATE AMENDMENTS TO H.R. 6675

Bill page	Amendment number	Description
2	(1)	New table of contents.
<b>BASIC HOSPITAL PLAN A</b>		
12	(2)	Conforming with amendment No. 9.
12	(3)	Conforming with amendment No. 50.
12	(4)	Conforming with amendment No. 9.
13	(5)	Conforming with amendment No. 63.
15	(6)	Conforming with amendment No. 9.
15	(7)	Hartke floor amendment—removed durational limit on inpatient hospital days—House bill provided 60 days—see also amendment No. 25 relating to deductible and coinsurance.
15	(8)	Committee amendment—increased posthospital extended care days to 100—House bill provided 20 days with 2 additional days for each unused hospital day but a maximum of 100—see also amendment No. 31 relating to coinsurance.
15	(9)	Committee increased number of home health visits to 175 and Saltonstall floor amendment removed requirement of prior hospitalization—House bill provided 100 visits after 3 days of hospitalization.
16	(10)	Technical and conforming with amendments Nos. 7, 8, and 9.
16	(11)	Technical and conforming with amendment No. 7.
16	(12)	Conforming with amendment No. 8.
	through (14)	
16	(15)	Committee amendment—included under A program inpatient psychiatric hospital services but imposed lifetime limit of 210 days—House bill included them in B program with 180-day lifetime limit.
16	(16)	McCarthy floor amendment removed psychiatric and tubercular exclusion on posthospital extended care in House bill but imposed 210-day limit for posthospital extended care treatment of mental disease with both days of inpatient psychiatric hospital services and extended care days for treatment of mental disease subject to the 210-day maximum. See amendment No. 158 deleting this exclusion.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
17	(17)	Conforming with amendment No. 8 eliminating House unused hospital day—extended care increase mechanism.
18	(18)	Technical—relettering.
18	(19)	Conforming with amendment No. 9.
18	(20)	Technical—relettering.
18	(21)	Conforming amendments Nos. 7 and 15.
18	(22)	Conforming with amendment No. 9.
19	(23)	Technical—relettering.
19	(24)	Technical—editorial.
19	(25)	Committee amendment provided that deductible may be less than \$40 if actual charges are less (or customary charges if greater than actual charges). Committee-administration amendment—removed provision in A plan for crediting outpatient diagnostic deductible against hospital deductible if done in the same hospital within 20 days. Committee amendment provided that there be a coinsurance on hospital benefits equal to one-fourth of hospital deductible (\$10 initially) for each day in excess of 60 in a spell of illness. House bill provided outpatient hospital deductible of \$40 initially, and no days in excess of 60 and also for deduction from hospital deductible of outpatient diagnostic deductible.
20	(26)	Technical—editorial.
20	(27)	Conforming with amendment No. 28.
20	(28)	Committee-administration amendment put a 20-percent coinsurance on the outpatient hospital diagnostic service after deductible in the A program—House bill provided for full payment after deductible.
20	(29)	Technical—editorial.
20	(30)	Technical—editorial.
20	(31)	Committee amendment provided for coinsurance equal to one-eighth of the inpatient hospital deductible (initially \$5) for posthospital extended care days in excess of 20 days. House bill provided full payment for extended care days available. See amendment No. 8.
21	(32)	Committee amendment adjusted inpatient hospital deductible in future years so that the amount shall be rounded to nearest multiple of \$4. House bill provided for rounding to nearest multiple of \$5.
21	(33)	Conforming with amendment No. 32.
	through (35)	
23	(36)	Conforming with amendment No. 37.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
23	(37)	Committee amendment including same special conditions for psychiatric hospitalization which were included under B program in House bill.
23	(38)	Technical—reletting.
24	(39)	Technical—reletting.
24	(40)	Technical—reletting.
24	(41)	Conforming with amendment No. 9.
25	(42)	Conforming with amendment No. 9.
25	(43)	Technical—reletting.
25	(44)	Conforming with amendment No. 37.
25-26	(45)	Technical—renumbering.
	through	
	(47)	
27	(48)	Technical—reletting.
27	(49)	Technical—editorial.
27	(49a)	Technical—reletting.
28	(49b)	Technical—reletting.
29	(50)	Committee amendment to provide for emergency services in a hospital outside the United States when it is closer or substantially more accessible than facility in United States which was adequately equipped to deal with illness or injury. Individual has to be physically present in United States at time of emergency which necessitates hospitalization.
31	(51)	Technical—renumbering and lettering.
31	(52)	Technical—renumbering and lettering.
32	(53)	Technical—renumbering and lettering.
32	(54)	Technical—renumbering and lettering.
34	(55)	Committee-administration amendment granted fiscal intermediary the same immunity from liability for incorrect payments (in absence of gross negligence or intent to defraud) as is made to intermediary's certifying officers in the preceding two subsections which were in the House bill.
34	(56)	Technical—renumbering and reletting.
35	(57)	Technical—renumbering and reletting.
35	(58)	Technical—renumbering and reletting.
36	(59)	Hartke floor amendment authorizes appropriation out of general revenue to trust fund to finance inpatient hospital benefits in excess of 60 days (not intended).
37	(60)	Technical—editorial.
40	(61)	Technical—editorial.
40	(62)	Technical—editorial.

**SENATE AMENDMENTS TO H.R. 6675—Continued**

Bill page	Amendment number	Description
<b>SUPPLEMENTARY MEDICAL PLAN B</b>		
42	(63)	Committee-administration amendment changed name from Supplementary Health Insurance to Supplementary Medical Insurance.
42	(64)	Conforming—name change.
42	(65)	Conforming—name change.
42	(66)	Committee-administration amendment combines physicians' services into broader term "medical and other health services"—separate in House bill. See amendments Nos. 166 to 176 for new definition of "medical and other health services."
43	(67)	Committee amendment removing psychiatric hospital services from B program.
43	(68)	Technical—relettering.
43	(69)	Technical—relettering.
43	(70)	Conforming amendment with amendments Nos. 66 and 141.
43	(71)	Conforming—name change.
43	(72)	Conforming—name change.
44	(73)	Committee-administration amendment would allow, in the provision of "medical and other health services" (which are on a reasonable charge basis) that an organization which provides such services on a prepayment basis may elect to be paid 80 percent of the reasonable cost of services provided (on behalf of individuals enrolled in such organization) in lieu of 80 percent of the reasonable charges, if the organization charges no more than 20 percent of such reasonable cost apart from the annual deductible. House bill required payment of physicians' services on the basis of reasonable charges.
44	(73)(a)	Technical—relettering.
45	(74)	Committee-administration amendment allowed a deductible for outpatient diagnostic services under the A program to be considered as an incurred expense under the B program for deductible and reimbursement purposes. House bill allowed a credit for outpatient diagnostic deductible against inpatient hospital deductible under Plan A.
45	(75)	Conforming with transfer of psychiatric hospital.
46	(76)	Technical—relettering.
46	(77)	Conforming amendment with amendment No. 74.
46	(78)	Technical—relettering.
46	(79)	Conforming amendment with psychiatric hospital transfer to plan A.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
47	(80)	Technical—relettering.
47	(81)	Technical—relettering.
47	(82)	Conforming amendment with psychiatric hospital transfer to plan A.
48	(83)	Conforming amendment with psychiatric hospital transfer to plan A.
48	(84)	Conforming amendment with psychiatric hospital transfer to plan A.
48	(85)	Conforming amendment with psychiatric hospital transfer to plan A.
48	(86)	Technical—relettering ( <i>italic should be omitted</i> ).
49	(87)	Technical—editorial.
49	(88)	Technical—relettering.
49	(89)	Technical—editorial.
49	(90)	Conforming with transfer of psychiatric hospital in plan A.
50	(91)	Technical—relettering.
51	(92)	Conforming with transfer of psychiatric hospital to plan A.
52	(93 to 95)	Committee amendment added a requirement for aliens of 10 years of continuous residence prior to enrollment in addition to requirement of permanent residence in House bill. See also amendments 215 and 216.
53	(96 through 100)	Committee-administration amendment providing that for people who reach 65 by June 30, 1966 (January 1, 1966, under House bill), would have an enrollment period beginning on April 1 and ending on September 30, 1966 (House bill period began on first day of second month beginning after month of enactment and ending on March 31). Also provided for general enrollment periods October 1 through December 31 of even-numbered years beginning in 1968 (House bill provided for such period in odd-numbered years beginning in 1967).
54	(101)	Committee amendment deferred effective date for B plan benefits from July 1, 1966, under House bill, to January 1, 1967.
54	(102)	Committee-administration amendment provided that coverage would take effect with the month the individual attains age 65 if he enrolls before that month. If he enrolls in the month in which he attains age 65, the insurance would take effect with the following month; if he enrolls the month following the month in which he attains age 65, it would take effect with the second month following the month of enrollment; if he enrolls more than 1 month following the month

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		in which he attains age 65, the insurance would take effect with the third month following the month in which he enrolls. Under the House bill, the supplementary insurance would be effective with the first day of the third month following the month in which he enrolls (but not earlier than the effective date for benefit payments under the program).
56	(103)	Committee-administration amendment set premium at \$3 for every month before 1969 (1968 in House bill) with Secretary setting new premium amount between July 1 and October 1, 1968 (1967 in House bill), and each even-numbered year thereafter (odd-numbered year in House bill).
	to (106)	
56	(107)	Conforming amendment—name change.
through	to	
58	(112)	
59	(113)	Committee-administration amendment added provision that if a civil service annuitant enrolled under the B plan, his premium amount would be withheld from his monthly annuity. If spouse of annuitant enrolled, her premium would be withheld from his annuity if he agreed to it.
through		
61		
61	(114)	Technical—renumbering.
61	(115)	Conforming amendment with amendment No. 113.
61	(116)	Technical or conforming.
through	to	
62	(125)	
66	(126)	Conforming amendment with amendment No. 113. Reimbursement of Civil Service Commission for costs of making deductions from premiums.
66	(127)	Committee-administration amendment as to use of carriers in administration—substitutes the following language:
through		
67		“In order to provide for the administration of the benefits under this part with maximum efficiency and convenience for individuals entitled to benefits under this part and for providers of services and other persons furnishing services to such individuals, and with a view to furthering coordination of the administration of the benefits under part A and under this part, the Secretary is authorized to enter into contracts with carriers, including carriers with which agreements under section 1816 are in effect, which will perform some or all of the following functions (or, to the extent provided in such contracts, will secure performance thereof by other organizations); and, with



## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		respect to any of the following functions which involve payments for physicians' services, the Secretary shall to the extent possible enter into such contracts:"
		The House bill provided, "In order to provide for the administration of the benefits under this part, the Secretary shall to the extent possible enter into contracts with carrier which will undertake to perform the following functions or, to the extent provided in such contracts, to secure such performance by other organizations:"
69	(127)(a)	Technical—relettering.
70	(128)	Committee amendment wrote into bill House report language that "In determining the reasonable charge for services for purposes of this paragraph, there shall be taken into consideration the customary charges for similar services generally made by the physician or other person furnishing such services, as well as the prevailing charges in the locality for similar services."
71	(129)	Committee-administration amendment granted carrier the same immunity from liability for incorrect payments (in absence of gross negligence or intent to defraud) that is granted carriers certifying or disbursing officers.
72	(130) through (135)	Conforming amendments—new name and change in effective date.
<b>MISCELLANEOUS PROVISIONS—A AND B PROGRAMS</b>		
76	(136)	Conforming amendment—new name.
76	(137) and (138)	Committee-administration amendment removed House requirement of appropriation of contingency reserve during fiscal 1966 for use during fiscal 1967—would provide for appropriation at any time to remain available through calendar 1968.
76	(139)	Conforming amendment to new effective date.
76 through 77	(140)	Technical amendment inasmuch as no hospital and extended care services remain in part B.
78	(141)	Committee amendment—covered M.D. services provided in the field of pathology, radiology, physiatry, or anesthesiology in part A. Douglas floor amendment added terminology "under arrangements by the hospital with them." McCarthy floor amendment added the word "professional" before "services." House bill provided these services exclusively under part B but did cover the services of the non-M.D. technicians of these specialties in part A.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
78	(142)	Technical—editorial.
79	(143)	Committee amendment—included as hospital services under the A program services in a hospital or osteopathic hospital performed by an intern, or resident in training in the field of dentistry, approved by the Council on Dental Education of the American Dental Association.
79	(144)	Conforming amendment with amendment No. 9.
80	(145)	Technical—editorial.
81	(146)	Conforming with amendment No. 9.
81	(147)	Conforming—transfer of psychiatric hospital.
	and	
	(148)	
81	(149)	Technical—editorial.
81		
through	(150)	Technical—editorial.
82		
82	(151)	Conforming amendment—transfer of psychiatric hospital.
83	(152)	Technical—editorial.
	through	
	(155)	
86	(156)	Committee-administration amendment—allowed readmittance to any qualified extended care facility if within 14 days after discharge. House bill provided for readmittance only to same extended care facility.
88	(157)	Technical—editorial.
88	(158)	Conforming with amendment No. 16 by striking exclusion of extended care facilities primarily for mental diseases and tuberculosis.
88	(159)	Committee amendment included within definition of extended care facility an institution operated as a Christian Science nursing home.
92	(160)	Allott floor amendment which, as to provision which allows State agencies to qualify extended care facilities if, in good faith, they have attempted to enter into an agreement with a hospital—specified that such hospital could be “within the State or otherwise.”
94	(161)	Conforming with amendment No. 9.
95	(161a)	Technical—relettering.
96	(162)	Committee amendment qualified a Christian Science visiting nurse service as a home health agency.
97-98	(162a)	Technical—relettering.
	(162b)	
	(162c)	

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
98	(163)	Committee-Administration amendment defined "physician" as "a doctor of medicine or osteopathy". Under House bill "physician" defined as "an individual legally authorized to practice medicine and surgery by the State * * *"
98	(164)	Committee amendment included within the term "physician" a doctor of dentistry or of dental or oral surgery who is legally authorized to practice dentistry by the State in which he performs such function but only with respect to (a) surgery related to the jaw or any structure contiguous to the jaw or (b) the reduction of any fracture of the jaw or any facial bone."
98	(164a)	Technical—relettering.
98	(165)	Conforming with amendment No. 166.
98	(166)	Committee-administration amendment made physician's services a subcategory of "medical and other health services." Committee amendment added services under part B of chiropractors and podiatrists.
98-99	(167)	Committee-administration amendment included services and supplies furnished as an incident to provision of physician's professional services if commonly furnished in physician's offices and are commonly rendered without charge or included in the physician's bills, and hospital services incidental to physicians' services rendered to outpatients; drugs and biologicals which cannot be self-administered are included.
99	(168)	Technical—renumbering.
99	(169)	Committee-administration amendment struck specific diagnostic tests and included them under the more general heading "other diagnostic tests."
99	(170)	Technical—renumbering.
	through	
	(175)	
100	(176)	Committee-administration amendment provided that no diagnostic test performed in any laboratory, independent of a physician's office or hospital, shall qualify under the B program unless the laboratory is licensed pursuant to State law or is approved by a State or local agency responsible for licensing establishments of this nature, and meets such other standards relating to the health and safety of tests as the Secretary may find necessary. The House bill contained no provisions for such licensing.
100	(176a)	Technical—relettering.
100	(177)	Technical—renumbering.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
100	(178)	Committee-administration amendment inserted language "(or approved for inclusion)" to provide for coverage of drugs which do not yet appear in the listed formularies.
101	(179)	Technical—editorial.
101	(180)	Committee amendment added the United States Homeopathic Pharmacopoeia to list of approved formularies.
101	(181)	Committee-administration amendment added provision to include combination drugs if their principal ingredient is listed in the above formularies.
101	(182)	Committee-administration amendment added to the provision qualifying drugs approved by hospital pharmacy and drug therapeutics committee the terminology "for use in such hospital."
101	(182a)	Technical—relettering.
101	(182b)	Technical—relettering.
103-104	(182c)	All conforming with transfer of psychiatric hospitals.
	(185)	
104-105	(185a)	Technical—relettering.
	(185b)	
105	(186)	Committee amendment defined "chiropractor" as an "individual who is licensed under State law to practice as a chiropractor in the State, and the term "chiropractors' services" to be services "performed by a chiropractor within the scope of his license." Also defined "podiatrist" as an individual "who is licensed under State law to practice as a podiatrist"; and the term "podiatrists' services" to mean "services performed by a podiatrist within the scope of his license."
106	(187)	Committee amendment modified the exclusion under part A and part B of expenses which are paid for directly or indirectly by a government entity so that benefits under a health or insurance plan established for employees of such entity would not be excluded.
106	(188)	Conforming with amendment No. 50.
107	(189)	Technical—editorial.
107	(190)	Technical—editorial.
107	(191)	Committee amendment provided new exclusion where expenses are for services in connection with the care, treatment, filling, removal, or replacement of teeth or structures directly supporting teeth.
108	(192) and (193)	Kennedy (New York) floor amendment struck requirement that standards set by State agencies for hospitals cannot be higher than comparable

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		requirements prescribed for accreditation by the Joint Commission on the Accreditation of Hospitals; and provided that in the case of any State or political subdivision of the State that imposes higher requirements as a condition to the purchase of services under a State plan approved under titles I, XVI, or XIX, the conditions so prescribed may not be lower than those requirements imposed on the institutions in the above welfare programs.
109	(194)	Conforming with amendment No. 176.
109	(195)	Miller floor amendment struck House provision which allows the Secretary, to the extent that he finds it appropriate, to use State agency certification that an institution is a hospital, extended care facility, or a home health agency. Amendment would require that State agency certification shall qualify facility or agencies under the act, provided that, in the event the Secretary determines that the hospital, facility, or agency is so inadequate as to endanger the life or health of the people it services, gives notice of such determination to the certifying State agency, and provides an opportunity for hearing thereon to the State agency.
111	(196)	Technical—editorial.
111	(196a)	Technical—relettering.
112	(197)	Conforming amendment with transfer of psychiatric hospital.
112	(198)	Conforming amendment with amendment No. 31 (coinsurance—extended care).
112	(199)	Conforming amendment with amendment No. 28 (coinsurance—extended care).
113	(200)	Conforming amendment with transfer of psychiatric hospital.
114	(201)	Technical—editorial.
116	(202)	Technical—editorial.
120	(203)	Kennedy (Massachusetts) floor amendment reduced House \$1,000 amount of claim requirement in right to appeal to hearings examiner and judicial review to \$100 in A program.
121	(204)	Committee-administration amendments set up more detailed procedures than House bill for dealing with overpayments particularly where the overpaid person is still alive, and for adjustment of benefits where party subject to adjustment is without fault.
124	(205)	
	(206)	
126	(207)	Technical—editorial.
127	(208)	Conforming amendment with amendment No. 8.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Admendment number	Description
127	(209)	Technical—editorial.
127	(210)	Javits floor amendment authorizing the Secretary to study methods that could be used in providing, under part B, for prescription drugs. The Secretary shall report to the Congress on or before June 30, 1966, indicating his recommendations as to the best approach to covering drug costs under part B and the feasibility of adopting this approach.
128	(211)	Conforming amendments—grace period for extension of effective date of B program.
	through (213)	
129	(214)	Inouye floor amendment added, as to qualification of uninsured individuals under transitional provision, the requirement that an alien must be lawfully admitted for permanent residence, but reduced the House requirement from 10 years of residence to 6 months immediately prior to filing application.
	through (216)	
130	(217)	Committee-administration amendment would allow an uninsured individual to file an application for benefits 3 months prior to reaching age 65. Under House bill an individual must file an application no earlier than the month he attains age 65.
131	(218)	Committee amendment restricted exclusion of individuals under transitional provision for the
	and (219)	uninsured to those actually covered by an enrollment in a health benefits plan under the Federal Employee's Health Benefits Act of 1959. Under House bill, exclusion extended to persons who could have been covered if they, or some other individual, had the opportunity to enroll them under the plan.
131	(220)	Committee-administration amendment as to
and	through	payments from the general fund to the hospital
132	(223)	trust fund for uninsured persons, authorized payment of the full amount for a fiscal year at the beginning of the fiscal year as well as during such fiscal year.
133	(224)	Technical—relettering.
	and (225)	
134	(226)	Technical—editorial.
	through (234)	
136	(227)	Committee amendment deleted House provision which would have limited the deduction for medical care expense if taxpayers (or dependent parents) aged 65 or over to the amount in excess of 3 percent of adjusted gross income and

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		which would have limited the amount of medicine and drug costs included in medical care expenses to the amount in excess of 1 percent of adjusted gross income. Also deleted was the provision which would have allowed all taxpayers to deduct one-half of the cost of medical-care insurance outside the regular medical expense category.
137	(228) through (233)	Committee amendment deleted the provision in the House bill which required insurance companies to state in the policy that portion of the multipurpose premium which is used for medical care (and therefore is deductible), would permit this information alternatively to be reported to the insured in a separate statement.
139	(234)	Mansfield floor amendment eliminates all maximum limitations on the medical expense deduction. Taxpayers under age 65 will be allowed to deduct all their medical expenses which are in excess of 3 percent of their adjusted gross income; those age 65 or over could deduct all their medical expenses.
140	(235)	Technical—renumbering.
141-143	(236) through (239)	Conforming amendments with new name for B program.
143	(240)	Case floor amendment added provision that, as soon as practicable after enactment, the Secretary shall appoint an Advisory Council on Social Security for the purposes stated in amendment No. 247.
143	(241) through (245)	Conforming amendment with new name for B program and amendment No. 247.
146	(246)	Technical—editorial.
146	(247)	Case floor amendment provided that the Advisory Council on Social Security (amendment No. 240) shall make a comprehensive study of nursing home and other extended care facilities in relation to extended care services under part A, including the availability of such facilities and the types and quality of care provided in such facilities; to report its findings and make recommendations based thereon with a view to action necessary for their maximum use and to provide high-quality care in such facilities; the report to be transmitted to the Congress not later than 1 year after date of enactment, after which the Council shall cease to exist.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
147-161	(248)	Committee amendment amends various amendments to House bill vesting the Railroad Retirement Board with authority to determine the rights to hospital insurance benefits of railroad retirement annuitants and pensioners under part A. The Board's authority with respect to these beneficiaries would be the same as that of the Secretary of HEW with respect to other beneficiaries. Payments to railroad beneficiaries would be made from the railroad retirement account. The financial interchange mechanism would be extended to cover hospital insurance benefit funds. Any agreement with a hospital entered into by the Secretary of HEW would also be entered into on behalf of the Railroad Retirement Board but the Board would have authority to enter agreements with certain hospitals in Canada. These provisions would only become effective if the Railroad Retirement Act is amended by increasing the maximum amount of taxable monthly compensation to a level comparable to the level of maximum wages under FICA, otherwise House bill provisions would remain in effect; the effective date of the amendments would be January 1 of the year following the year that this requirement is met by October 1.
160	(249)	Committee amendment authorized an additional Under Secretary of Health, Education, and Welfare and two additional Assistant Secretaries.
<b>GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS</b>		
162	(250)	Javits' floor amendment offered alternative to House requirement that, effective July 1, 1970, States provide all the non-Federal share—the alternative to provide for distribution of Federal and State funds on an equalization or other basis which will assure that lack of adequate funds from local sources will not result in lowering the amount, duration, scope, and quality of services available under the plan.
163-164	(251)	Committee amendment would allow any single State agency to administer the medical assistance plan as long as the determination of eligibility would be made by the State or local agency administering the State plan under title I or XVI. Under House provision, the single State agency administering the plan had to be the



## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		agency administering the plan under title I or XVI.
165	(252)	Technical—relettering.
	(253)	Technical—editorial.
165	(254)	Committee amendment provided that, after June 30, 1967, a State plan shall include requirements contained in standards established by the Secretary of Health, Education, and Welfare, relating to protection against fire and other hazards to the health and safety of individuals in private or public institutions providing services under the plan.
165	(255)	Committee-administration amendment exempted from comparability requirement, inpatient hospital services and skilled nursing services in institutions for treatment of mental diseases or tuberculosis, dental services for minors, and skilled nursing home services for adults.
166	(256)	Committee-administration amendment substituted the terminology "or remedial care and services" for "medical assistance" to use proper terminology in describing those services not falling under the term "medical assistance."
	(256)	
166	(258)	Conforming amendment with amendment No. 255.
166-7	(259)	Committee-administration amendment substituted the terminology "or remedial care and services" for "medical assistance," to use proper terminology in describing those not falling under the term "medical assistance."
	(260)	
	and	
	(261)	
171	(262)	Committee-administration amendment deleted special requirement as to patients in tuberculosis institutions.
	and	
	(263)	
172-173	(264)	Technical—editorial.
	and	
	(265)	
173	(266)	Committee-administration amendment added a requirement that the State plan include a description of the kinds, numbers, and responsibilities of professional medical personnel, the standards to be used by standard-setting authorities for institutions, the cooperative arrangements with State health and vocational rehabilitation agencies, and other standards and methods to be used to assure provision of medical or remedial care and that services are of high quality.
174	(267)	Williams floor amendment provided that any individual entitled to medical assistance may obtain such from any institution, agency, or per-

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		son qualified to perform such services who undertakes to provide him such services.
174	(268) and (269)	Conforming amendments with amendment No. 251.
176	(270)	Committee-administration amendment extended the 75 percent matching to the training of skilled professional medical personnel and supporting staff in State agencies. House bill 75 percent matching limited to compensation of such personnel.
177	(271)	Conforming amendment with amendment No. 262.
180-181	(272)	Committee-administration amendment substituted, compliance date of 10 years following effective date of plan for furnishing comprehensive care and services to substantially all individuals who meet the plan's eligibility standards with respect to income and resources in lieu of House compliance date of July 1, 1975.
182	(273) and (274)	Ribicoff floor amendment expanded definition of "medical assistance" to include all individuals who are under the age of 21 and adults caring for them. Under House bill, dependent children under the age of 21 could be included even though they did not meet the State AFDC plan requirements for need and age, but were otherwise qualified.
182	(275)	Committee-administration amendment excluded from required inpatient hospital services, services in an institution for tuberculosis or mental diseases.
182	(276)	Committee amendment excluded from required services—skilled nursing home services, services in an institution for tuberculosis or mental diseases and such services for individuals under 21 years of age. Makes dental services for individuals under 21 required services.
183	(277)	Committee amendment made optional skilled nursing home services and dental services which are not mandatory under the preceding amendment.
183	(278)	Technical—editorial.
183	(279)	Committee-administration amendment made optional inpatient hospital services and skilled nursing home services in an institution for tuberculosis or mental diseases.
183	(280)	Technical—renumbering.
185	(281)	Committee amendment eliminated House bill termination date of June 30, 1967, for existing medical vendor provisions.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
185-186	(282)	Committee-administration amendment expanded House bill provision which stated that any amount which was disregarded in determining eligibility in any of the public assistance titles could not be taken into account in determining eligibility or amount of medical assistance under title XIX, so that any amount so disregarded under any program could not be taken into account under any other public assistance program.
186	(283)	Conforming amendment with name change, part B.
186	(284)	Technical—editorial.
186-189	(285)	Cooper floor amendment required the Secretary of Health, Education, and Welfare to provide personal notice to each individual who, after June 1966, becomes entitled to benefits, containing information and data as to benefits provided under parts A and B and those not provided and information on the class of persons eligible; in addition the Secretary is required to utilize to the fullest extent feasible other media of communications in the notification process.
<b>OTHER AMENDMENTS RELATING TO HEALTH CARE</b>		
190	(286) and (287)	Technical—editorial.
193	(288) (289) and (290)	Committee amendment increased authorization for special projects grants for health of school and preschool children by \$5 million for fiscal 1966, 1967, 1968, and 1969 (for emotionally disturbed children).
194	(291) and (292)	Technical—editorial.
194-195	(293)	Committee amendment authorized grants to a State health, mental health, or public welfare agency and with the consent of the appropriate State agency to the health, mental health, or public welfare agency of any political subdivision of the State, and to any public or nonprofit private agency or institution to pay not to exceed 75 percent of the cost of projects providing for the identification, care, and treatment of children who are or are in danger of becoming emotionally disturbed.
195	(294)	Technical—relettering.

**SENATE AMENDMENTS TO H.R. 6675—Continued**

Bill page	Amendment number	Description
196	(295)	Committee amendment increased authorization for child welfare services to same level as the maternal and child health and crippled children's programs under the House bill. An increase of \$5 million for 1966 and for most subsequent years.
196	(296)	Committee amendment eliminated provision for day-care services. Conforming adjustment of allotment formula.
199	(297)	Technical—editorial.
200-202	(298)	Conforming with amendment No. 262, eliminating special requirements for TB patients.
	(299)	and
	(300)	
204	(301)	Technical—editorial.
204-207	(302)	Conforming with amendment No. 262, eliminating special requirements for TB patients.
	(303)	and
	(304)	
209-210	(305)	Committee amendment authorized \$500,000 for fiscal 1966 and 1967 for grants for studies as to the prevention, diagnosis, and treatment of emotionally disturbed children.

**SOCIAL SECURITY AMENDMENTS**

211-212	(306)	Committee amendment updated benefit tables to provide for \$6,600 earnings base which is effective January 1, 1966, rather than House two-stage earnings base: \$5,600 in 1966 and \$6,600 in 1971.
	(309)	
222	(310)	Technical—editorial.
224	(311)	Committee-administration amendment repealed provision for dropout recomputation in 1954 amendments.
224-266	(312)	Committee amendment provided for payment of disability benefits for worker who has been, or can be expected to be, totally disabled for 12 calendar months or whose disability can be expected to result in death. The House bill eliminated the requirement of present law that a worker's disability must be expected to result in death or to be of long continued and indefinite duration, and provided that a worker would be eligible for disability insurance benefits if he has been totally disabled for a continuous period of 6 full calendar months.
226	(313)	Committee bill amended House bill to retain termination provisions of present law, so that benefits shall not be paid after the second month following the month disability ceases. The House bill retained the termination provision in

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		present law for cases of long-term disability (disability which lasts at least 18 months) but provided, in the case of disabilities which have lasted less than 18 months, for payment in the month of cessation and for only 1 additional month's benefits.
226-227	(314) through (316)	Technical amendment conforming with amendment No. 312.
228-230	(317)	Committee amendment changed provision of House bill so as to retain waiting period requirements of present law. House bill provided for the payment of disability insurance benefits beginning with the last month of the 6-month waiting period rather than with the first month after the 6-month waiting period.
230	(318)	Technical—relettering.
230-231	(319)	Committee-administration amendment provided additional point for conversion of a disability insurance benefit to an old-age insurance benefit.
231	(320)	Technical—relettering.
	through (322)	
232	(323)	Technical amendment conforming with amendment No. 312.
232-233	(324)	Committee-administration amendment provided effective date as to change in amendment No. 319.
233-234	(325)	Committee-administration amendment provided an election between old-age insurance benefits or disability insurance benefits as to which to take in simultaneous entitlement situation (under age 65).
236-238	(326) through (328)	Technical—editorial.
239	(329) through (330)	Committee amendment changed allocation for disability insurance trust fund to 0.76 percent of wages and 0.525 percent of self-employment income (three-fourths and nine-sixteenths percent respectively in House bill).
239-244	(331) through (335)	Committee amendment provided for disabled child's benefits if he comes under a disability which began before he attained the age of 22. Under present law disability must begin before age 18.
246-250	(336) through (350)	Technical and conforming.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
250	(351)	Provided effective date for disabled child's benefit (second month following month of enactment).
256	(352)	Committee-administration amendment substituted the terminology "is not married" for the House language "has not remarried" in the case of entitlement for an aged divorced wife.
258	(353)	Technical amendment, conforming with amendment No. 352.
258	(354)	Technical—renumbering.
259	(355)	Committee-administration amendment substituted the terminology "is not married" for the House language "has not remarried" in the case of entitlement of a widow or surviving divorced wife.
260	(356)	Committee-administration amendment provided that surviving divorced wife will not have to meet support requirement if she was entitled to a divorced wife's benefits for the month before the month the wage earner died.
261-263	(357)	Committee-administration amendment eliminated House bill provision relating to special treatment in cases where a divorced woman remarries (since this is taken care of by amendments Nos. 352 and 355).
264-267	(358) through (361)	Committee-administration amendments made changes similar to amendments Nos. 352 and 355 in the case of entitlement of a surviving divorced mother who remarries.
270	(362)	Committee amendment exempted first \$1,800 a year of earnings, with \$1 reduction in benefits for each \$2 of annual earnings between \$1,800 and \$3,000 and of \$1 for each \$1 of earnings above \$3,000. The House bill retained the present exemption of \$1,200 a year of earnings, with the \$1 reduction in benefits for each \$2 of annual earnings applying between \$1,200 and \$2,400, and \$1 for each \$1 of earnings above \$2,400.
273	(363)	Committee amendment moved up the effective date for coverage of doctors of medicine to taxable years ending on or after December 31, 1965. The House made the effective date for taxable years ending after December 31, 1965.
274-284	(364)	Committee amendment covered cash tips received by an employee in the course of his employment as income from self-employment for social security tax and benefit purposes, except that tips which are covered as wages under present law would continue to be covered as

**SENATE AMENDMENTS TO H.R. 6675—Continued**

Bill page	Amendment number	Description
		wages. In computing the tipped employee's net earnings from self-employment, only business expenses attributable to tips covered as income from self-employment are to be deducted. Effective for taxable years beginning after 1965. The House bill covers tips as wages which an employee receives on his own behalf in the course of his employment for an employer, whether the tips are received directly from a customer or through the employer. However, cash tips of less than \$20 received by an employee in a calendar month in the course of his employment for one employer and all noncash tips are excluded.
284	(365)	Committee amendment deleted "Kentucky" from the House bill providing coverage for State and local employees of that State under the split-system provision.
284	(366)	Technical—editorial.
285-287	(367)	Committee-Treasury amendment, as to retroactive coverage for nonprofit organizations gave those employees to whom additional retroactive coverage is made applicable an individual choice of such coverage.
290	(368)	Committee-administration amendment permits certain employees whose wages were erroneously reported by a nonprofit organization during the period the organization's waiver certificate was in effect to validate such erroneously reported wages.
295	(369)	Technical—conforming amendment to Senate committee earnings base change.
	through (371)	
305-309	(372)	Committee amendment provided earnings base of \$6,600 for years after 1965. House bill provided earnings base of \$5,600 for 1966-70 and \$6,600 after 1970.
	through (406)	
310-136	(407)	Committee amendments revised tax schedules as follows:
	through (449)	

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	House bill	Senate bill
<b>Taxable years beginning in—</b>		
1966-68.....	6.0	5.8
1969-72.....	6.6	6.8
1973 and thereafter.....	7.0	7.0
<b>Employer-employee:</b>		
<b>Calendar years:</b>		
1966-68.....	4.0	3.85
1969-72.....	4.4	4.50
1973 and thereafter.....	4.8	4.95

**SENATE AMENDMENTS TO H.R. 6675—Continued***Basic hospital insurance program*

(Combined employer-employee rate: self-employed pay 50 percent thereof)

Year	Basic hospital insurance program	
	Under Senate bill	Under House bill
1965.....		
1966.....	0.65	0.70
1967.....	1.00	1.00
1968.....	1.00	1.00
1969-70.....	1.00	1.00
1971-72.....	1.10	1.00
1973-75.....	1.30	1.10
1976-79.....	1.40	1.20
1980-86.....	1.60	1.40
1987 and after.....	1.70	1.00

Bill page	Amendment number	Description
319	(450)	Committee-administration clarifying amendment limited application of provision for adoption of child by retired worker to cases in which a child is adopted after worker becomes entitled to benefits.
320	(451)	Conforming amendment to amendment No. 450.
	through (453)	
325	(454)	Conforming amendments for Senate committee earnings base change.
	through (456)	
326-7	(457)	Committee-administration amendment extended life of applications for social security benefits to the date of final decision thereon by the Secretary. Under existing law the life of application for benefits is 3 months (9 months for disability benefits).
327-329	(458)	Committee-administration amendment facilitated the recovery of overpayments and provided specific authority, lacking in present law, for the Secretary to settle all underpayments of benefits.
329-330	(459)	Committee-administration amendment authorized the Secretary to make a temporary overpayment so as to permit a surviving spouse to cash a benefit check issued jointly to a husband and wife if one of them dies before the check is negotiated; any overpayment resulting from the cashing of the joint check would be recovered.
330-334	(460)	Committee-administration amendment provided that social security credit can be obtained for the earnings of certain ministers which were reported but which cannot be credited under present law.



## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
334-335	(461)	Committee-administration amendment would permit a court that renders a judgment favorable to a claimant in an action arising under the social security program to set a reasonable fee (not in excess of 25 percent of past due benefits which become payable by reason of the judgment) for an attorney who successfully represented the claimant. The Secretary would be permitted to certify payment of the fee to the attorney out of such past due benefits.
335-337	(462)	Committee amendment provided that benefits would be payable to widows aged 60 or over and to widowers aged 62 or over who remarry—the amount of the benefit to be equal to 50 percent of the primary benefit of the deceased spouse if that amount is higher than her wife's benefit as a result of the remarriage.
338-340	(463)	Committee-administration amendment provided an exception to the 1-year-duration requirement as to social security benefits for any widow, wife, husband, or widower who was, in the month before marriage, actually or potentially entitled to railroad retirement benefits as a widow, widower, parent, or disabled adult child.
340-346	(464)	Committee amendment provided that the social security disability benefit for any month for which a worker is receiving a workmen's compensation benefit will be reduced to the extent that the total benefits payable to him and his dependents under both programs exceed 80 percent of his average monthly earnings prior to the onset of disability, but with the reduction periodically adjusted to take account of changes in national average earnings levels. The offset provision will be applicable with respect to benefits payable for months after December 1965 based on applications filed after December 1965.
346-347	(465)	Committee amendment authorized the Secretary (rather than State agency) to make determinations of disability or cessation of disability where medical and other information supplied or designated by the individual, or evidence of remunerative work activities, indicates that the individual is under a disability or that the disability has ceased.
347-351	(466)	Committee amendment provided that State vocational rehabilitation agencies will be reimbursed from the social security trust funds for the cost of rehabilitation services furnished to indi-

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		viduals who are entitled to disability insurance benefits or to a disabled child's benefits. The total amount of the funds that could be made available from the trust funds for purposes of reimbursing State agencies for such services could not, in any year, exceed 1 percent of the social security disability benefits paid in the previous year.
351	(467)	Committee amendment reopened until July 1, 1970, a provision of law permitting the State of Maine to treat teaching and nonteaching employees actually in the same retirement system as though they were in separate retirement systems for social security coverage purposes.
351-352	(468)	Committee amendment authorized the State of Iowa and the State of North Dakota to modify their coverage agreements to exclude from social security coverage certain service performed in any calendar quarter in the employ of a school, college, or university by a student if the remuneration for such service is less than \$50.
352-355	(469)	Committee amendment included in definition of child a child who cannot inherit his father's intestate personal property if the father had acknowledged him in writing, had been ordered by a court to contribute to his support, had been judicially decreed to be his father or had been shown by other satisfactory evidence to be his father and was living with or contributing to his support.
355-356	(470)	Committee amendment provided that when an employee works for a corporation which is a member of an affiliated group of corporations and is then transferred to another corporation which is a member of such group, the total employer social security tax payable by the two corporations for the years in which the employee is transferred will not exceed the amount that would be paid by a single corporation.
356-360	(471)	Byrd (West Virginia) floor amendment provided for lowering from 62 to 60 the age at which a worker could elect to start getting an actuarially reduced benefit. The reduction factor would be the same as under present law—five-ninths of 1 percent for each month worker is entitled to receive a benefit before age 65. A worker who begins to draw benefits at age 60 would have his benefit reduced by 33½ percent; also lowering from 62 to 60 the age at which a wife or dependent husband could elect to start getting an actuarially

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		reduced benefit. The reduction factor would be the same as under present law—twenty-five thirty-sixths of 1 percent for each month a benefit is payable before age 65. An individual who receives benefits at age 60 would receive 58½ percent of the benefit amount that would be payable if he waited until age 65 to claim benefits.
361	(472)	Lausche floor amendment required Social Security Administration to furnish information to help locate deserting parent or husband to any State welfare agency or to a court of competent jurisdiction if the request is made and the court or agency certifies that such individual is failing to provide support and maintenance for his destitute wife or children.
362-363	(473)	Long (Louisiana) floor amendment reopened to April 15, 1966, the period (which expired on April 15, 1965) during which ministers who have been in the ministry for at least 2 years may file waiver certificates electing social security coverage.
363-364	(474)	Miller floor amendment provided that the amount of the 1965 social security benefit increase for "subsequent months" would not be counted toward the VA income limitation.
364	(475)	Gruening floor amendment validated the past coverage of employees of certain school districts in Alaska which have been included in error under the Alaska coverage agreement as separate political subdivisions. The employees of the school districts involved should have been covered as employees of the political subdivisions of which the school district are integral parts. Effective only for years prior to 1966.
365	(476)	Moss floor amendment provided exception so that child's benefits would not terminate if child is adopted by his brother or sister after death of worker. Under present law benefits terminate unless he is adopted by his stepparent, grandparent, uncle, or aunt after death of worker on whose earnings record he is getting benefits.
365-368	(477)	Hartke floor amendment added alternative for insured status for disability benefits of 6 quarters of coverage, acquired at any time, for individuals who meet liberalized definition of blindness (for insured status under existing law, an individual (1) must have at least 20 quarters of coverage in the 40 quarters ending with the quarter in which the disability begins and (2) must be fully insured. Under liberalized definition for both the freeze

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
		and benefit purposes the following degree of blindness is deemed disabling: Central visual acuity of 20/200 or less in the better eye with the use of correcting lenses, or visual acuity greater than 20/200 if accompanied by a limitation in the fields of vision such that the widest diameter of the visual field subtends an angle no greater than 20°.
		Under existing law, for benefit purposes, an individual must be precluded from engaging in any substantial gainful activity by reason of a physical or mental impairment. A stricter definition of blindness is deemed disabling for disability freeze purposes.
PUBLIC ASSISTANCE AMENDMENTS		
372	(478)	Yarborough floor amendment changed the effective date for the new Federal matching formula to after June 30, 1965. The effective date in the House bill was after December 31, 1965.
376-377	(479)	Committee-administration amendment authorized protective payments under aid to the blind program (title X).
377-379	(480)	Committee-administration amendment authorized protective payments under aid to the permanently and totally disabled program (title XIV).
379	(481)	Technical—relettering.
379	(482)	Committee amendment added effective date of December 31, 1965, for above changes in titles X and XIV (same as House provision for protective payments).
379	(483)	Long (Louisiana) floor amendment allowed State, at its option, to disregard not more than \$7 per month of any income in old-age assistance program with effective date of October 1, 1965. Also changes effective date for House earned income exemption in OAA from January 1, 1967, to October 1, 1965.
through	(485)	
380	(486)	Long (Louisiana): Same provision (with amendments Nos. 483-485) for aid to families with dependent children and aid to the blind programs.

## SENATE AMENDMENTS TO H.R. 6675—Continued

Bill page	Amendment number	Description
380-381	(487)	Long (Louisiana) floor amendment added same provision for aid to the permanently and totally disabled program; added committee amendment so that a State may, at its option, exempt the first \$20 and half of the next \$60 of a recipient's monthly earnings (same as old-age assistance exemption in both Senate and House bills); also committee amendment provided that the State agency may, for a period not in excess of 36 months, disregard other income and resources in the case of an individual who has a plan for achieving self-support approved by the State agency, but only if he is actually undergoing vocational rehabilitation.
381-383	(488)	Long (Louisiana) floor amendment added same provision as amendment No. 483-485 for title XVI (adult combined program) to reflect changes in titles I, X, and XIV.
383	(489)	Committee-administration amendment placed a limitation of 30 days in judicial review section on the time between the Secretary's receipt of a petition from the State and the time the hearing is set. The House bill set no time limitation.
384	(490)	Technical—editorial.
384	(491)	Committee-administration amendment changed terminology relating to substantial evidence rule to substitute "if supported by substantial evidence" for "unless substantially contrary to the weight of the evidence" in the House bill.
	(492)	
385	(493)	Technical—relettering.
389	(494)	Committee-administration amendment clarified House provision as to disregarding of OASDI retroactive increase in public assistance programs, to make clear that only payments based on retroactive feature are covered.
	(496)	
390-405	(497)	Committee amendment struck provisions repealing existing medical vendor provisions in public assistance titles, since new title XIX medical assistance is optional.
	(509)	
405	(510)	Committee added amendment stating "Notwithstanding any other provisions of the Social Security Act, whenever payment is authorized for services which an optometrist is licensed to perform, the beneficiary shall have the freedom to obtain the services of either a physician skilled in diseases of the eye or an optometrist, whichever he may select."

**SENATE AMENDMENTS TO H.R. 6675—Continued**

Bill page	Amendment number	Description
405-406	(511)	Committee added an amendment broadening the definition of a "school" to include colleges, at the State's option with respect to continuation of AFDC assistance payments up to age 21. Present law is limited to high school.
406	(512)	Committee amendment will allow States, at option, to exempt up to \$50 of earnings for each of not more than three children in the same family in AFDC program in determining need.
406-408	(513)	Kuchel floor amendment will (1) permit a State that has a medical assistance program under title XIX to claim Federal sharing in total expenditures for money payments under titles I, IV, X, XIV, and XVI under the same formula used for determining the Federal share for medical assistance under title XIX, and (2) for a State that does not have medical assistance under title XIX, if the Secretary finds the medical care provided under titles I, IV, X, XIV, and XVI as a whole meets substantially the objectives and requirements of title XIX, permit the State, from January 1, 1966, to July 1, 1966, to claim Federal matching for its total expenditures for money payments and/or for medical care under the formula used for determining the Federal share for medical assistance under title XIX.

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