Congressional Budget Office

December 11, 2013

Preliminary Estimate for the SGR Repeal and Medicare Beneficiary Access Improvement Act of 2013

Subject to revision after review of final legislative Language

(Billions of dollars, by fiscal year)	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2014-2018	2014-2023
CHANGES IN DIRECT SPENDING												
Title I - Medicare Payment for Physicians' Services												
102. Repealing the sustainable growth rate (SGR) and improving Medicare payment for physicians' services	8.4	12.8	11.2	10.2	10.4	11.4	13.1	14.3	16.0	16.4	53.0	124.1
103. Encouraging care management for individuals with chronic care needs	0	0	0	0	0	0	0	0	0	0	0	0
104. Ensuring accurate valuation of services under the physician fee schedule	*	-0.1	-0.2	-0.4	-0.6	-0.7	-0.7	-0.8	-0.9	-0.9	-1.3	-5.3
105. Promoting evidence-based care	0	0	0	0	0	*	*	*	*	*	0	*
106. Empowering beneficiary choices through access to information on physician services	0	0	0	0	0	0	0	0	0	0	0	0
107. Expanding claims data availability to improve care	0	0	0	0	0	0	0	0	0	0	0	0
108. Priorities and funding for quality measure development	*	*	*	*	*	*	0	0	0	0	0.1	0.1
109. Other Provisions	0	0	0	0	0	0	0	0	0	0	0	0
Title II – Extensions and Other Provisions												
Subtitle A – Medicare Extensions												
201. Floor on Geographic Adjustment for Physician Fee Schedule	0.3	0.4	0.4	0.3	0.4	0.4	0.4	0.4	0.5	0.5	1.7	4.0
202. Medicare Payment for Therapy Services	0.6	0.4	0.5	0.7	0.8	0.9	1.0	1.1	1.3	1.4	3.0	8.8
203. Medicare Ambulance Services	0.1	0.1	0.1	0.1	0.1	*	*	*	*	*	0.5	0.5
204. Medicare Dependent Hospital	*	0.1	0.1	0.1	0.1	0.1	0.2	0.2	0.2	0.2	0.6	1.4
205. Low-Volume Hospital	0.1	0.3	0.3	0.3	0.3	0.3	0.3	0.3	0.4	0.4	1.2	2.8
206. Medicare Special Needs Plans	0	0.3	0.4	0.4	0.2	0.2	0.2	0.1	0.1	0.1	1.4	2.0
207. Medicare Cost Contracts	0	0.1	0.1	*	*	*	*	*	*	*	0.2	0.2
208. Quality Measure Endorsement and Selection	*	*	*	*	0	0	0	0	0	0	0.1	0.1
209. Outreach and Assistance for Low-Income Programs	*	*	*	*	*	*	*	*	*	*	0.1	0.3
Subtitle B - Medicaid and Other Provisions												
211. Qualifying Individual Program	0.7	0.8	1.0	1.2	1.4	0.9	0.4	0.3	0.2	0.2	5.2	7.1
212. Transitional Medical Assistance (TMA)	0.1	0.3	*	-0.1	*	*	*	*	0	0	0.3	0.2
213. Express Lane Eligibility	0	*	0	0	0	0	0	0	0	0	*	*
214. Pediatric Quality Measures	*	*	*	*	*	0	0	0	0	0	0	0
215. Special Diabetes Programs	*	0.3	0.3	0.3	0.3	0.3	*	*	0	0	1.2	1.5
Subtitle C – Human Services Extensions												
221. Abstinence Education Grants	0	*	*	*	*	*	*	*	*	*	0.1	0.2
222. Personal Responsibility Education Program	0	*	*	*	0.1	0.1	0.1	*	*	*	0.1	0.3
223. Family-to-Family Health Information Centers	*	*	*	*	*	*	*	*	*	0	*	*
224. Health Workforce Demonstration	0	*	*	0.1	*	*	0	0	0	0	0.2	0.2

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Subtitle D – Other Provisions												
231. Commission on Patient Directed Health Care	0	0	0	0	0	0	0	0	0	0	0	0
232. Recovery Audit Contractors	0	*	*	*	*	*	*	*	*	*	*	0.1
IPAB interaction	0	0	0	0	0	*	*	*	*	*	0	*
Total, Changes in Direct Spending Outlays	**10.3**	**15.9**	**14.3**	**13.4**	**13.6**	**14.1**	**15.0**	**16.0**	**17.7**	**18.3**	**67.6**	**148.6**
Total, Changes in Unified-Budget Direct Spending	**10.3**	**15.9**	**14.3**	**13.4**	**13.6**	**14.1**	**15.0**	**16.0**	**17.7**	**18.3**	**67.6**	**148.6**
Memorandum												
Non-scoreable Effects (non-add)												
232. Recovery audit contractors	0	*	*	*	*	*	*	*	*	*	*	-0.1

Source: Congressional Budget Office.

Notes: Components may not sum to totals because of rounding.
* = changes in direct spending that are between $50 million and -$50 million.
All Medicare provisions include interactions with Medicare Advantage payments, the effect on Medicare Part A and B premiums, and TRICARE.

IPAB = Independent Payment Advisory Board; TRICARE = the health plan operated by the Department of Defense