	1	EXECUTIVE COMMITTEE MEETING						
Wilson 9-19-89 17 pp.	2	TUESDAY, SEPTEMBER 19, 1989						
	3	U.S. Senate						
	4	Committee on Finance						
	5	Washington, D.C.						
	6	The meeting was convened, pursuant to notice, at 3:17 p.m.,						
	7	in Room S-207, the Capitol, Hon. Lloyd Bentsen (Chairman)						
	8	presiding.						
	9	Also present: Senators Matsunaga, Moynihan, Baucus, Boren,						
	10	Bradley, Mitchell, Pryor, Riegel, Rockefeller, Daschle,						
	11	Packwood, Roth, Danforth, Chafee, Heinz, Durenberger and						
	12	Armstrong.						
	13	Also present: Vanda McMurtry, Staff Director and Chief						
	14	Counsel; Ed Mihalski, Chief of Staff, Minority.						
	15	Also present: Bill Diefenderfer, Deputy Director, OMB;						
	16	Jeffrey Olson, Department of Health and Human Services.						
	17	Also present: Dr. Marina Weiss, Health Counsel, Majority;						
	18	Mike Mabile, Tax Counsel, Majority; Stuart Brown, Deputy Chief						
	19	of Staff, Joint Committee on Taxation; and Brad Figel, Trade						
	20	Counsel, Minority.						
	21	(The press release announcing the meeting follows:)						
	22							
	23							
	24							
	25							
		MOFFITT REPORTING ASSOCIATES (301) 350-2223						
:								

2 The Chairman. This hearing will come to order. 1 2 The first thing that we have on the agenda this afternoon is the proposed to the U.S. International Trade Commission Study, 3 pursuant to Section 322 to the Trade Act of 1974, to survey the 4 5 views of recognized authorities on U.S.-Soviet trade on the impact that granting most favored nation status to the Soviet 6 7 Union would have on the business climate for the U.S.-Soviet trade. 8 Mike, would you comment on that. 9 Mr. Mabile. Yes, Mr. Chairman. 10 11 The Committee members have copies of the draft letter to the Chairman of the ITC. This draft has been cleared with the ITC, 12 as well as the details of the study. We circulated copies of 13 14 the letter to the Committee before this meeting and to the best 15 of our knowledge, there was no objection to it. 16 The Chairman. I know of no objection to it. There's a 17 comment. 18 Senator Moynihan. I would certainly like to thank you for this initiative. We have discussed it and I hope we go forward 19 20 with it right away. 21 The Chairman. May I have a motion? 22 Senator Matsunaga. I move that we pursue it. 23 Senator Moynihan. I second it. 24 The Chairman. All in favor of the motion stated, make it 25 known by saying aye.

MOFFITT REPORTING ASSOCIATES (301) 350-2223

(A chorus of ayes.)

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The Chairman. Now, ladies and gentlemen -- and I will try to speak up so you can hear me. We have some of the concerns that we have been addressing for several days insofar as the catastrophic illness legislation. Let me state where I think we are, as I have discussed this with both Republicans and Democrats, trying to see what we can put together in a package. Let me tell you where I am coming from.

9 I think that there are basic elements in catastrophic that are certainly worthy of trying to preserve, that there is no 10 question but what it has been a program on which there has been 11 12 substantial controversy. That amongst the concerns have been 13 these -- people who felt that they had adequate coverage already and did not want additional coverage. 14 I think one of the ways 15 we address that is to go back to what we had before where they 16 can opt out. That we allow that and that be basic to whatever 17 we might do in the way of a package.

18 One of the other ones was that on the percentage that is put 19 on the tax that you pay in the supplemental premium, that that 20 became onerous because it went up to as high, finally, as 28 21 percent. I strongly feel that we should reduce that. That 22 keeps it progressive. But that would be particularly helpful to 23 people who will be paying the supplementary, but yet are making a relatively modest income. So that should be brought down and 24 25 we ought to keep it flat.

MOFFITT REPORTING ASSOCIATES (301) 350-2223

I also strongly feel that we should not, as the House did,
 raise the base premium. That is for lower income people and
 that we ought to keep that where it is in the present law
 without raising it.

Now as you try to bring those things down obviously there 5 are some of the benefits that are going to have to be reduced. 6 7 I know that there are many who feel we ought to repeal it; and I would assume there will be such a motion made on the floor. I 8 am sure that motion will be made on the House. 9 And from the information I hear about what may happen on the House side, that 10 there is a probability that it is going to be repealed. 11 So I 12 think we ought to take that into our considerations as we try to decide. 13

Those of us who think that we could arrive at a package that 14 preserves the major elements of catastrophic, to try to see that 15 we have a cap on out-of-pocket expenses, physicians' costs; that 16 we have a cap on hospital costs; that we say when someone has a 17 catastrophic illness that they are not going to have their life 18 19 savings wiped out and that of their spouse; that we retain 20 spousal impoverishment; that we have respite care; and that we have skilled nursing care. Those are elements of long-term 21 22 care.

I would say this to those that want repeal, we have had great controversy over this overall piece of legislation. But if you think you have had controversy, then have repeal succeed,

MOFFITT REPORTING ASSOCIATES (301) 350-2223

and then take skilled nursing care away from people in nursing 1 homes and hospitals and see what the reaction will be to that. 2 3 And remember, skilled nursing care is now in place. That is there. That's a benefit to the elderly you would be taking away 4 5 from. And to keep that in mind as we work to bring about a bipartisan position -- Republicans and Democrats working 6 7 together to obtain the best elements of catastrophic illness.

8 So I would ask for any comment that the ranking minority 9 member would want to make. I am not going to ask for each 10 member at this time because we have a very limited time here and 11 I would like to see if we can move ahead and make some decisions 12 this afternoon.

13 Senator Packwood. Mr. Chairman, when we started this we 14 made one fundamentally correct decision for the first time in an 15 entitlement program and that is that the benefits should be paid for by the beneficiaries. What we discovered, I think, is that 16 17 the beneficiaries do not want to pay for all the benefits. And 18 if forced to a choice between paying for them or losing the benefits, I think they would rather have fewer of the benefits. 19 20 Maybe their first choice would be that their children and their 21 grandchildren pay and we keep all of the benefits. But that 22 would break trust with the original premise we had, which was the beneficiaries will pay for the benefits. 23

I hope we hold to that premise no matter what we come out with. We may come out with a modified program of cutting in

MOFFITT REPORTING ASSOCIATES (301) 350-2223

6 half the costs and ending up with a cap of \$585 instead of \$800; 1 and we may discover that the beneficiaries still do not like 2 My intelligence about the House is the same as yours --3 that. apparently they will repeal this, I guess, and by not even a 4 close margin. 5 I would advise, again, I would hope we would wait until the 6 House acts before we take action. But I have suggested that 7 8 twice to the Committee before and it has not yet met with favor. But I think on occasion we make more mistakes in haste than we 9 lose opportunities in delay. I think this would be a good time 10 to delay. 11 All right. 12 The Chairman. I would like to have the presentation. 13 Senator Roth. Mr. Chairman. 14 15 The Chairman. Yes. Senator Roth. Could I ask one question as a matter of 16 procedure? 17 The Chairman. Yes. 18 Senator Roth. Because as you well know at the appropriate 19 20 time I do intend to urge repeal to this Committee. But my 21 question is, are we considering now a bill as an independent bill or will this be part of reconciliation? 22 I would say it's coming over on 23 The Chairman. reconciliation from the House side. So I would strongly urge 24 that it be a part of reconciliation, that we be able to meet it 25 MOFFITT REPORTING ASSOCIATES (301) 350-2223

1 in conference, what the House has done on it.

Senator Roth. Could I then ask the Chairman the question as to the rights on the floor. Let's assume that this Committee should enact a modified version of catastrophic insurance. When it be in order on the floor to propose that the legislation be revoked?

7 The Chairman. Well, whatever the rules of the Senate would
8 be concerning reconciliation would prevail on that.

9 Senator Roth. I think, Mr. Chairman, that is a very, very important matter because we are considering something as we all 10 know is extraordinarily controversial. There are many differing 11 views, even on this Committee, as to whether we should seek to 12 reform it and if so how we do so. So that my concern is that if 13 we go into the reconciliation on the floor that we not be locked 14 into a position where alternatives, including revocation, could 15 16 be considered.

I think it would be most unfortunate if the only choice one
basically had on the Senate floor was acceptance of the Finance
Committee proposal or rejection.

The Chairman. Well, Senator, let me further check the Senate rules. But we will be following the Senate rules as they apply to reconciliation.

23 Senator Roth. I would hope we could be advised on that
24 before we take a vote on any specific proposal in its entirety.
25 The Chairman. Do you have a comment at this point?

MOFFITT REPORTING ASSOCIATES (301) 350-2223

Mr. Olson. Mr. Chairman, I guess I would simply say that
 Dr. Sullivan sends his apologies for not being able to be here
 this afternoon. But that he has made calls to a number of you,
 on the members of this Committee, to indicate our willingness to
 try to play whatever role is appropriate here.

What we would simply say, as we have said in the past, that 6 7 we would hope as the Committee and the Congress considers its 8 deliberations that repeal is not a serious option. We would hope that as you work your way through this that the basic 9 10 catastrophic be held intact as much as possible. Having said that, we believe that somehow if we can help you and assist you 11 in coming up with a politically stable compromise which does not 12 throw us into sequester, but that is budget neutral, that within 13 that context that we are certainly willing to consider a repeal 14 of the drug benefit or a simple modification of the drug 15 benefit. And that also applies for the SNFs. 16

17So with that kind of introduction, I would guess I would18comment to Mr. Diefenderfer and turn it to him.

The Chairman. All right, Mr. Diefenderfer.

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Mr. Diefenderfer. I have nothing to add to that statement.
The Chairman. Well let me state first, I am deeply
disappointed that Dr. Sullivan is not here. I had expected him.
He was invited to be here. This is a terribly important meeting
and I thought the Secretary should have been here. Let me state
that first.

MOFFITT REPORTING ASSOCIATES (301) 350-2223

9 Senator Bradley. Mr. Chairman, do you want to continue the 1 2 meeting even without Dr. Sullivan being here? Yes, I think we will continue. But he should 3 The Chairman. have been here. He has no more important measure before his 4 Department than this one at the present time. And I want to 5 understand just where the Administration is on these issues. 6 We 7 are going to have to take positions and it is important that 8 they do. 9 Now let me get it a clearer, if I can, from you. 10 Voice. Mr. Chairman, it is difficult to hear at this end of the table. Could we ask somebody to turn up the amplification? 11 12 The Chairman. What is the problem here? We have no amplification? Well then I apologize to the press and to the 13 14 people in the room. Senator Pryor. It might be a good idea. I don't know, Mr. 15 Chairman. 16 17 Senator Packwood. Another reason for not going on with the 18 meeting. 19 (Laughter) 20 Senator Packwood. Well, I move to tell the technician that 21 you are in a meeting. 22 (Laughter) 23 The Chairman. I am sorry, gentlemen. I will try to speak louder and see if I can get it out there to you. 24 25 My point is this: I want to know where you stand on the MOFFITT REPORTING ASSOCIATES (301) 350-2223

prescription drug benefit. Because we are facing this situation where some of these benefits are going to have to be curtailed or deleted in order to try to meet a revenue neutral package here. And let me state this, if it takes that to get a revenue neutral package -- prescription drugs -- do I understand that the Administration would support that kind of a move?

- Mr. Olson. That is correct.
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The Chairman. All right.

9 Senator Bradley. Mr. Chairman, I did not hear the answer.
10 What is the position of the Administration on the drug benefit?
11 Mr. Olson. We would support, as the Chairman described,
12 that if the package that is arrived at is arrived at by repeal
13 of the prescription drug benefit, then the Administration would
14 support that repeal.

Senator Pryor. May I ask, does the Administration -- does the Bush Administration -- support the repeal of the prescription drug benefit in the catastrophic legislation?

18 Mr. Olson. Senator Pryor, as you know, we have said that we would like to implement the package as was originally passed. 19 20 And I said last week that we recognized the political realities 2.1 and we know that there are pressures to make major changes. And 22 as long as there is consideration given to the fact that this 23 package in our view should be revenue neutral, then within that 24 context, Senator, we would support the repeal of the drug benefit. 25

MOFFITT REPORTING ASSOCIATES (301) 350-2223

Senator Packwood. Can I ask a question then on the same
 subject?

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The Chairman. Yes, sure.

Senator Packwood. Is that your preference for first
elimination or are you simply saying, well, if that is the way
the Committee wants to go we will go that way but we have some
other thoughts also?

8 Mr. Olson. Senator Packwood, again, I guess I would say that we would have preferred that we implement the package as 9 10 was passed. That we felt that while we were concerned about the 11 implementation of the drug benefit and to implement on time, we have had concerns from that that we have expressed all the way 12 through this. But we also are recognizing the realities and we 13 also recognize that it is the prerogative of this Committee and 14 this Congress to make whatever changes they feel are necessary. 15 All we are saying is that we will accept those changes. 16

Senator Packwood. Well, let me ask you -- if this is a fair question -- you are not going to give us any leadership on this, but if we'll go ahead and say, get rid of the prescription benefit, you'll come along?

Mr. Olson. And try to provide you, Senator, with all the
support we can give you.

Senator Packwood. Otherwise, no one is covered?
Senator Chafee. Mr. Chairman, I would just like to clarify
this.

MOFFITT REPORTING ASSOCIATES (301) 350-2223

1 The Chairman. Yes.

Senator Chafee. Is the Administration saying that the Administration would support legislation that repealed the drug benefit but did not repeal the revenues to pay for the drug benefit or are you saying you would support legislation that repealed both the drug benefit and the revenues -- the \$9+ billion plus -- that pays for it? Which are you for?

8 Mr. Diefenderfer. By itself, if that is the sum total 9 change of the program you are going to make, no, we would not 10 support it, sir.

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Senator Chafee. Either one?

12 Mr. Diefenderfer. No. We understand your situation. And our situation would be this: We're in a politically unstable 13 situation with catastrophic. We would like to save as much of 14 the program as we can. We understand to do so it may require us 15 to eliminate or lower, depending on whose viewpoint you take on 16 where stability can be achieved, the supplemental premium. 17 To do that you have to start to eliminate some of the benefits. 18 19 The drug benefit is one of the biggest costs. If that is what it takes to maintain and protect the core benefits, we will 20 21 support that, if the Committee feels that that's what it takes 22 to protect the core benefits.

23 Senator Chafee. Mr. Chairman.

24 The Chairman. Yes.

Senator Chafee. If you had a choice between eliminating the

MOFFITT REPORTING ASSOCIATES (301) 350-2223

1 prescription drug or eliminating the Part B, which would you
2 prefer?

Mr. Olson. Senator, I would say the drugs, clearly, if we had that choice.

5 Senator Danforth. You would prefer to eliminate the drugs6 or keep them?

Mr. Olson. Eliminate the drugs, Senator Danforth.

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8 Senator Chafee. Let me just finish, if I might. What are
9 your core benefits? Why don't you set those forth? What are
10 core benefits?

11 Mr. Diefenderfer. Well, the idea for core benefits came 12 from -- in terms of the first time we approached them --13 discussions with this Committee and you can change what the core 14 benefits are. But we are looking at the current law benefits which include the hospital, the blood deductible, home health, 15 16 respite, mammography, Mitchell drugs, hospice, of course the administrative costs, the Part B co-pay at about 5.5 percent, 17 and there are some administrative costs associated with that. 18

19 And, of course, all the Medicaid benefits that fall under20 the program for spousal impoverishment and that list.

Senator Heinz. Bill, a point of clarification on your answer to Senator Chafee. The drug benefit is a little different than the Part B benefit because there is no dedicated source of financing for the Part B benefit. There is a dedicated, very specific source of financing -- part of the flat

MOFFITT REPORTING ASSOCIATES (301) 350-2223

premium, part of the supplemental premium -- for the drug
 benefit.

When you say, as you did a moment ago, that you would prefer 3 to eliminate the drug benefit instead of the Part B cap, do you 4 mean that you would also -- are saying you would want to 5 eliminate the financing of the drug benefit when you say that? 6 7 So that what you are, in fact, saying is, if given a choice between eliminating the Part B cap on the one hand and 8 eliminating the drug benefit and the revenues to pay for it on 9 the other, we would rather do the elimination of drugs or are 10 you saying something else? 11

12 13 Mr. Diefenderfer. No. This is what I think I am saying. (Laughter)

Is that, first of all we are not talking 14 Mr. Diefenderfer. about any one of these in isolation. We are talking about 15 developing a politically stable package which protects as much 16 of the core as possible. That said, we have another requirement 17 that the package be revenue neutral. That said, eliminating the 18 19 funds that are supposedly dedicated, I do not think there are 20 enough now in the new estimate. They are supposed to be dedicated for the drug benefit. For sure, those could be 21 22 eliminated together, but we have to come back and look to the bottom line to see if the package itself is revenue neutral. 23

If this gets us into sequester, if it's not revenue neutral and tips us into sequester, the problem is manifold -- it's much

MOFFITT REPORTING ASSOCIATES (301) 350-2223

1 more than the problem we have here.

Senator Durenberger. Mr. Chairman. The Chairman. Yes.

Senator Durenberger. If I may. One way maybe to help the 4 Administration to find its position is, if this is a sort of a 5 6 continuation in health policy of the old Administration, I can 7 tell you what the old Administration's position was -- that it supported a catastrophic financial protection for existing 8 Medicare benefit. It strongly opposed any new benefit. 9 It opposed respite care; it opposed mammograms; it opposed 10 expanding home health; expanding or finishing off hospice or 11 expanding skilled nursing facilities, other than the areas where 12 we did it outside of catastrophic. 13

That was the Administration's position. If that is still 14 the Administration's position, then I would understand core 15 benefits to be those benefits that were in the Medicare program 16 prior to the passage of this legislation. So I hear you saying 17 -- or maybe I hear you saying -- let's go back to the old set of 18 19 benefits with a financial catastrophic protector financed in whatever way you can and when you make the election of drugs, 20 it's simply not because you're against drugs, except that you 21 are for sticking with the original benefits. 22

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Does that help at all?

Mr. Olson. I couldn't have said it any better, Senator. I think that what we are trying to do here is preserve whatever

MOFFITT REPORTING ASSOCIATES (301) 350-2223

our role is in this, is to be able to take a look at the final package and what you deem we can afford, have our friends at OMB review that and then give you our opinion. We've tried to do that somewhat piecemeal, but as the proposals were coming forth we were simply responding and then we continue to do so.

6 The Chairman. Gentlemen, we have seven minutes left. So 7 let's go vote on this amendment and then we will come back.

(Whereupon, the meeting recessed and resumed at 3:53 p.m.) 8 9 The Chairman. May I have your attention. Let me state, Mr. 10 Olson, Mr. Diefenderfer, you have been courteous. But, frankly, this is the most major issue facing Dr. Sullivan's Department 11 and I expected him to be here. We didn't send any alternates. 12 13 We are here to make some very difficult decisions on a very controversial subject and I want to know the position of the 14 Administration on each of those points as we go along. 15

16 I am not going to continue this meeting with each of you 17 having to turn around and talk to somebody else insofar as what 18 the position might be. I want qualified answers. So we are going to adjourn this meeting. I am going to call it for 2:00 19 20 p.m. tomorrow and I am once again going to request that Secretary Sullivan be here to address this issue and give us the 21 benefit of his counsel and the position of the Administration on 22 each of these issues as we go along. And with that, we will 23 24 stand adjourned.

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(Whereupon, the meeting was adjourned at 3:53 p.m.)

MOFFITT REPORTING ASSOCIATES (301) 350-2223

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1	CERTIFICATE
2	This is to certify that the foregoing proceedings of a
3	Executive Committee Meeting of the United States Senate Finance
4	Committee, held on September 19, 1989, were transcribed as
5	herein appears and that this is the original transcript thereof.
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9	WILLIAM J. MOFFITT
10	Official Court Reporter
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12	My Commission Expires April 14, 1994.
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Tuesday, September 19, 1989 -3:00 PM S-207, the Capitol

Executive Session

## AGENDA

I.

II.

Proposal for U. S. International Trade Commission study, pursuant to section 332 of the Trade Act of 1974, to survey the views of recognized authorities on U. S.-Soviet trade on the impact that granting most-favored-nation status to the Soviet Union would have on the business climate for U. S.-Soviet trade.

To consider legislation reforming the Medicare Catastrophic Coverage Act of 1988.

## LLOYD BENTSEN, TEXAS, CHAIRMAN

CLOYD BENTSEN. TE SPARK M. MATSUNAGA. HAWAII DANIEL PATRICK MOYNIHAN, NEW YORK MAX BAUCUS, MONTANA DAVID L BRADLEY, NEW JERSEY GEORGE J. MITCHELL. MAINE DAVID PRYOR. ARKANSAS DONALD W. RIEGEL. JR.. MICHIGAN JOHN D. ROCKEFELLER IV. WEST VIRGINIA TOM DASCHLE. SOUTH DAKOTA

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BOB PACKWOOD, OREGON BOB DOLE, KANSAS WILLIAM V. ROTH, JR., DELAWARE JOHN C. DANFORTH, MISSOURI JOHN H. CHAFEE, RHODE ISLAND JOHN HEINZ, PENNSYLVANIA DAVID DURENBERGER MINNESOTA WILLIAM L. ARMSTRONG, COLORADO STEVE SYMMS, IDAHO

VANDA B. MCMURTRY, STAFF DIRECTOR AND CHIEF COUNSEL ED MIHALSKI, MINORITY CHIEF OF STAFF

## United States Senate

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COMMITTEE ON FINANCE WASHINGTON, DC 20510-6200

September 19, 1989

The Honorable Anne Brunsdale Chairman United States International Trade Commission 500 "E" Street, S.W. Washington, D.C. 20436

Dear Madam Chairman:

In early May, President Bush indicated his willingness to work with Congress toward granting mostfavored-nation (MFN) trade status to the Soviet Union. This would allow the Soviets to be accorded the same status as that of the majority of our other trading partners, including some non-market economy countries, such as China, Poland, and Hungary.

In order to adequately understand the implications of granting MFN status to the Soviet Union, the Commission is requested, pursuant to section 332(g) of the Tariff Act of 1930, to institute an investigation for the purpose of providing the Committee with a survey of the views of recognized authorities on U.S.-Soviet trade on the impact such an action would have on the business climate for U.S.-Soviet trade. The survey should include an assessment of the commercial implications of such an action, including to the extent possible, the potential for U.S. agricultural exports, and opportunities for joint ventures.

The report should also identify the products that would be most affected by this change in the trading status of the Soviet Union. We would also like to know the extent, if any, the action is likely to have on the ability of the United States to compete with other exporters (<u>i.e.</u>, Japan and the European Community) for sales in the Soviet market. The Honorable Anne Brunsdale September 19, 1989 Page Two

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It is expected that the Commission's report on this investigation will reflect the views of U.S. companies and private commercial officials that are doing business with the Soviet Union, scholars, knowledgeable Government officials who have worked in the area of U.S.-Soviet trade, and other experts on this issue.

Sincerely,

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Lloyd Bentsen Chairman

PRELIMINARY

## Medicare Catastrophic Options

# A SUPPLEMENTAL PREMIUM OPTION WITH A 12% RATE AND A \$585 CAP

Fiscal Vears 1989-1993

## [Millions of Dollars]

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TOTAL	III. RECEIPTS UNDER OPTION         A. Flat Premium         B. Supplemental Premium	II. REVENUE EFFECT OF OPTION	TOTAL	I. PRESENT-LAW RECEIPTS <sup>1</sup> A. Flat Premium B. Supplemental Premium	Item
1,696	1,165 531	;	1,696	1,165 531	1989
6,143	1,847 4,296	-2,161	8,304	1,847 6,457	1990
6,603	2,732 3,871	-3,292	9,895	2,732 7,163	1991
6,992	3,586 3,406	-3,378 -4,040	10,370 11,708	3,586 6,784	1992
7,668	4,147 3,521	_4,040	11,708	4,147 7,561	1993
29,102	13,477 15,625	-12,871	41,973	13,477 28,496	1989-93

Joint Committee on Taxation September 19, 1989

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<sup>1</sup> Receipts estimates are from the July 1989 Congressional Budget Office re-estimate.

## AGING COMMITTEE MAJORITY STAFF ESTIMATE FOR CATASTROPHIC PROGRAM

AS MODIFIED BY SENATOR PRYOR'S PROPOSAL "A" (\$ in Millions)								
	1990 Cost	1991 Cost	1992 Cost	1993 Cost	1990-93 Cost	% Who Benefit		
BENEFITS								
Part A Benefits								
Hospital SNF* + Home Health Hospice	1302 1800 129 1	1411 3600 183 1	1533 3600 194 1	1671 3600 208 1	5917 12600 714 4	n/a n/a 0.9% 0.1>		
<u>Part B Benefits</u>		:						
Part B Copay Cap* Respite Care	0 67	0 161	0 263	0 418	0 909	0% 0.1>		
Screening mammography	75	123	138	147	483	11.1%		
<u>Rx Drug Benefit</u>								
"Mitchell" Drugs* Other Rx Drugs*	★ 76 0	162 0	185 2100	203 2800	626 4900	0.2% 15.0%		
<u>MCCA Administrativ</u> Expenses	<u>ve</u> 244	715	916	1000	2875			
Total Medicare Co	sts 3694	6356	8930	10048	29028			
INCOME		·	•					
Supplemental Prem (15% / \$585 max.	ium 4957	4463	3884	4061	17365			
Flat Monthly Prem State/Local in HI	ium 1847	2732 1900	3586 1900	4147 1900	12312 6900			
Total Income	8004	9095	9370	10108	36577			
Net Medicare Effe	ct -4310	-2739	- 440	, – , 60	-7549			

## FOOTNOTES

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- \* Benefits changed from current law by Sen. Pryor proposal, budgetary effect of these changes to current law not CBO estimates.
- \*\* Assumes the "Mitchell" drug deductible as in current law, unchanged by Sen. Pryor proposal.
- + Assumes new \$3.6 Billion/year cost for Catastrophic SNF benefit, 50% 1 year savings from reinstating "sunsetted" 3-day prior hospitalization.

	PRO BIPARTIS Cal year				ollars	3)
I. CURRENT LAW BENEFITS	1989	1990	1991	1992	1993	1989-93 Outlays
A. Hospital	893	1293	1401	1522	1659	6768
B. Blood Deductible	6	9	10	11	12	48
D. Home Health	0	129	183	194	208	714
E. Respite	· · · O	0	22	48	77	147
F. Screening Mammography	0	75	123	138	147	483
G. "Mitchell" Drugs	0	76	162	184	225	647
H. Hospice	l	1	1	1	1	5
I. Administrative Costs (1)	160	88	94	98	103	543
TOTAL FOR CURRENT LAW BENEFITS	1060	1671	1996	2196	2432	9355
REVISED BENEFITS	1989	1990	1991	1992	1993	1989-93 Outlays
A. Part B Copayment Cap Delayed one year and set to affect 5.5 % of beneficiaries (Cap Amount \$1,780 in 1991)	0	0	1700	3090	3479	8269
B. Administrative Costs	0	84	131	136	142	493
C. Reinstate SNF 3 day prior rule for admissions on or after 1-1-90 (2)	900	1900	1800	2000	2200	8800
D. Part B Opt Out (3)	0	100	300	200	200	800
TOTAL FOR REVISED BENEFITS	900	2084	~~~~ 3931	5426	~~~~ 6021	18362
TOTAL MEDICARE BENEFITS	1960	3755	5927	7622	8453	27717

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III. MEDICAID BENEFITS	1989	1990 ~~~~	1991 ~~~~	1992	1993 ~~~~	Outlays
Buy-in to Medicare	106	231	435	591	665	2028
Spousal Impoverishment	-6	358	339	210	229	1130
Pregnant Women/Infants	5	50 <sup>°</sup>	125	160	195	535
Offsets/Other (4)	-155	-283	-439	-560	-619 ~~~~	-2057
SUBTOTAL FOR MEDICAID	-50	356	460	401	470	1636
TOTAL FOR OPTION 1	1910	4110	6387	8023	8923	29353

- (1) Administrative expenses for the Medicare program are subject to Appropriation Committee action and thus are not scored as direct spending changes. Changes in administrative expenses are taken into account for purposes of calculating trust fund balances and required premiums.
- (2) The estimate of the effect of reinstating the 3 day prior hospitalization requirement for SNF stays is based on extremely limited, qualitative information and is therefore highly uncertain.
- (3) The Part B opt out estimate is preliminary pending resolution of financing of the package.
- (4) Medicaid offsets will vary according to the final catastrophic package.