

**AMENDMENT IN THE NATURE OF A SUBSTITUTE
OFFERED BY MR. WAXMAN FOR MR. DINGELL'S MOTION**

In lieu of the additional recommended amendments proposed in the Motion, substitute the following additional recommended amendments:

【Christensen 23__001:】

In section 123(a)(5), strike “an expert on children’s health” and insert “an expert in child and adolescent health”.

【Degette/SarbanesMcNerney 3__001:】

In section 123(a)(5), after “experts in health care financing and delivery,” insert “experts in oral health care,”.

【GreenTX 6__002:】

In the subparagraph (C) added by section 1176, insert before the period at the end the following: “or, in the case of an individual described in such subsection who is eligible for benefits under part A on the basis of section 226A, during the 1-year period beginning on the first day of such individual’s eligibility for such benefits”.

【Markey 4__002:】

Add at the end of section 206(b) the following: “For purposes of the previous sentence, the Commissioner may utilize data regarding enrollee demographics, inpatient and outpatient diagnoses (in a similar manner as such data are used under parts C and D of title XVIII of the Social Security Act), and such other information as the Secretary determines may be necessary, such as the actual medical costs of enrollees during the previous year.”.

【Murphy 7__001:】

In section 1866D of the Social Security Act, as being added by section 1152(f)(1) of the bill, strike subsection (b) and insert the following new subsection:

1 “(b) SCOPE.—

2 “(1) NUMBER AND PURPOSE OF TEST SITES.—

3 The Secretary shall attempt to attract ten percent of
4 all eligible providers to act as acute and post-acute
5 bundling test sites under the pilot program to ensure
6 that the pilot program is of sufficient size and scope
7 to—

8 “(A) test the approaches under the pilot
9 program in a variety of settings, including
10 urban, rural, and underserved areas;

1 “(B) include geographic areas and addi-
2 tional conditions that account for significant
3 program spending, as defined by the Secretary;
4 and

5 “(C) subject to subsection (d), disseminate
6 the pilot program rapidly on a national basis.

7 “(2) EXPANSION.—To the extent that the Sec-
8 retary finds inpatient and post-acute care bundling
9 to be successful in improving quality and reducing
10 costs, the Secretary shall implement such mecha-
11 nisms and reforms under the pilot program on as
12 large a geographic scale as practical and economical,
13 consistent with subsection (e).”.

【Sarbanes1__001:】

In part 1 of subtitle D of title I of division B, add
at the end the following new section:

14 **SEC. [1169A]. MEDICARE SENIOR HOUSING PLANS.**

15 Section 1859 of the Social Security Act (42 U.S.C.
16 1395w–28) is amended by adding at the end the following
17 new subsection:

18 “(g) SPECIAL RULES FOR SENIOR HOUSING FACIL-
19 ITY PLANS.—

20 “(1) IN GENERAL.—Notwithstanding any other
21 provision of this part, in the case of a Medicare Ad-

1 vantage senior housing facility plan described in
2 paragraph (2), the service area of such plan may be
3 limited to a senior housing facility in a geographic
4 area.

5 “(2) MEDICARE ADVANTAGE SENIOR HOUSING
6 FACILITY PLAN DESCRIBED.—For purposes of this
7 subsection, a Medicare Advantage senior housing fa-
8 cility plan is a Medicare Advantage plan that—

9 “(A)(i) restricts enrollment of individuals
10 under this part to individuals who reside in a
11 continuing care retirement community (as de-
12 fined in section 1852(l)(4)(B));

13 “(ii) provides primary care services onsite
14 and has a ratio of accessible providers to bene-
15 ficiaries that the Secretary determines is ade-
16 quate, taking into consideration the number of
17 residents onsite, the health needs of those resi-
18 dents, and the accessibility of providers offsite;

19 “(iii) provides transportation services for
20 beneficiaries to providers outside of the facility;
21 and

22 “(iv) makes meaningful use of health infor-
23 mation technology (as defined in section
24 3000(5) of the Public Health Service Act (42
25 U.S.C. 300jj(5)); and

1 “(B) is offered by a Medicare Advantage
2 organization that has offered at least 1 plan de-
3 scribed in subparagraph (A) for at least 1 year
4 prior to January 1, 2010, under a demonstra-
5 tion project established by the Secretary.

6 “(3) BUDGET NEUTRALITY.—The Secretary of
7 Health and Human Services shall ensure that pay-
8 ments made to qualified health plans described in
9 this Section are no greater than the payments that
10 would have been made before the date of the enact-
11 ment of this subsection, or that would have been
12 made had these beneficiaries been enrolled in the
13 traditional fee for service Medicare program.”

【Sutton 22__001:】

In section 144(b)(1), after “by individuals” insert
the following: “through means such as the mail, by tele-
phone, electronically, and in person”.

【Buyer Health09\005:】

In subtitle A of title II of division A, add at the end
the following new section:

14 **SEC. 209. REIMBURSEMENT OF SECRETARY OF VETERANS**
15 **AFFAIRS.**

16 The Secretary of Health and Human Services shall
17 seek to enter into a memorandum of understanding with

1 the Secretary of Veterans Affairs regarding the recovery
2 of costs related to non-service-connected care or services
3 provided by the Secretary of Veterans Affairs to an indi-
4 vidual covered under the public health insurance option
5 in a manner consistent with recovery of costs related to
6 non-service-connected care from private health insurance
7 plans.

