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Senate Health Reform Debate Awaits CBO Score and Manager's Amendment

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The Senate health reform debate is entering a crucial stage as senators await a score from the Congressional Budget Office (CBO) on a broad agreement that Senate leaders announced on Tuesday for making revisions to the "Patient Protection and Affordable Care Act."

Legislative language and other details about the agreement will not be released until after CBO completes its score – possibly this weekend or early next week. However, it is widely believed that the core components of the agreement include a Medicare "buy-in" option for persons age 55-64, an FEHBP-style plan that would be offered by private insurers under the oversight of the Office of Personnel Management (OPM), a "trigger" for a government-run plan, and additional regulations on health insurance plans including medical loss ratio (MLR) requirements.

After the CBO score is finalized, Senate leaders will make decisions about including the new proposals, possibly with refinements, in a wide-ranging "manager's amendment" that also will contain other amendments that have been filed over the past two weeks. Because the Senate floor debate is moving at a slow pace – with fewer than 20 amendments receiving action so far – many senators are attempting to include their priority amendments in the manager's amendment.

The manager's amendment is not likely to be finalized until after Senate leaders determine that they have secured 60 votes for final passage of the health reform bill. Once they achieve this, Leader Reid is expected to file a series of cloture motions, which will require 60 votes for approval, in an effort to bring debate to a conclusion and force a vote on final passage of the bill. Under this scenario, the bill potentially could be passed by the Senate within the next ten days. Senate leaders are strongly focused on the goal of passing the bill before Christmas, although there is growing uncertainty about whether they will succeed.

More Than 370 Health Reform Amendments Filed by Senators

On November 7, by a vote of 220 to 215, the House approved H.R. 3962, the "Affordable Health Care for America Act of 2009."



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The House vote on passage of this bill was preceded by approximately seven hours of floor debate. In the early morning hours of November 7, the House Rules Committee adopted a resolution setting the parameters for the House floor debate. This resolution allowed for votes on two amendments and one motion:

- By a vote of 240 to 194, the House approved an amendment by Reps. Bart Stupak (D-MI) and Joseph Pitts (R-PA) addressing coverage of abortion services. This amendment would prohibit federal funds from being used to pay for abortion services under the government-run plan, and it would prohibit the affordability credits from being used to pay for plans that cover abortion services. Individuals would be permitted to use their own funds to purchase supplemental coverage for abortion services.
- By a vote of 258 to 176, the House defeated the Republican substitute amendment, which included provisions addressing the following topics: federal funding for state high risk pools and reinsurance programs to cover persons with pre-existing conditions; a nationwide marketplace for individual health insurance; improvements to HSAs; association health plans; independent review and new restrictions on health plan rescissions; administrative simplifications; medical liability reforms; FDA approval of generic biologics; and repeal of the Federal Coordinating Council for Comparative Effectiveness Research.
- By a vote of 247 to 187, the House defeated a motion to recommit the bill to the committees of jurisdiction with instructions to amend the bill to include medical liability reforms and to protect seniors from Medicare Advantage funding cuts. This motion was offered by House Republican Whip Eric Cantor (R-VA).

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