

A P P E N D I X

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**Commissioners' voting
on recommendations**



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In the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000, the Congress required MedPAC to call for individual Commissioner votes on each recommendation and to document the voting record in its reports. The information below satisfies that mandate.

Chapter 1: Context for Medicare payment policy

No recommendations

Chapter 2: Assessing payment adequacy and updating payments in fee-for-service Medicare

No recommendations

Chapter 3: Hospital inpatient and outpatient services

3-1 For fiscal year 2024, the Congress should update the 2023 Medicare base payment rates for general acute care hospitals by the amount specified in current law plus 1 percent.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

3-2 In fiscal year 2024, the Congress should:

- begin a transition to redistribute disproportionate share hospital and uncompensated care payments through the Medicare Safety-Net Index (MSNI);
- add \$2 billion to the MSNI pool;
- scale fee-for-service MSNI payments in proportion to each hospital's MSNI and distribute the funds through a percentage add-on to payments under the inpatient and outpatient prospective payment systems; and

- pay commensurate MSNI amounts for services furnished to Medicare Advantage (MA) enrollees directly to hospitals and exclude them from MA benchmarks.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 4: Physician and other health professional services

4-1 For calendar year 2024, the Congress should update the 2023 Medicare base payment rate for physician and other health professional services by 50 percent of the projected increase in the Medicare Economic Index.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

4-2 The Congress should enact a non-budget-neutral add-on payment, not subject to beneficiary cost sharing, under the physician fee schedule for services provided to low-income Medicare beneficiaries. These add-on payments should equal a clinician's allowed charges for these beneficiaries multiplied by:

- 15 percent for primary care clinicians and
- 5 percent for non-primary care clinicians.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 5: Ambulatory surgical center services: Status report

The Commission reiterates its March 2022 recommendation that the Secretary require ambulatory surgical centers to report cost data.

Chapter 6: Outpatient dialysis services

For calendar year 2024, the Congress should update the 2023 Medicare end-stage renal disease prospective payment system base rate by the amount determined under current law.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 7: Skilled nursing facility services

For fiscal year 2024, the Congress should reduce the 2023 Medicare base payment rates for skilled nursing facilities by 3 percent.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 8: Home health care services

For calendar year 2024, the Congress should reduce the 2023 Medicare base payment rate for home health agencies by 7 percent.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 9: Inpatient rehabilitation facility services

For fiscal year 2024, the Congress should reduce the 2023 Medicare base payment rate for inpatient rehabilitation facilities by 3 percent.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 10: Hospice services

For fiscal year 2024, the Congress should update the 2023 Medicare base payment rates for hospice by the amount specified in current law and wage adjust and reduce the hospice aggregate cap by 20 percent.

Yes: Barr, Casalino, Chernew, Cherry, Damberg, Dusetzina, Ginsburg, Grabowski, Jaffery, Kan, Navathe, Poulsen, Rambur, Riley, Ryu, Safran, Sarran

Chapter 11: The Medicare Advantage program: Status report

No recommendations

Chapter 12: The Medicare prescription drug program (Part D): Status report

No recommendations