

Commissioners' voting on recommendations

APPENDIX

# Commissioners' voting on recommendations

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 report. The information below satisfies that mandate.

### Chapter 1: Reforming physician fee schedule updates and improving the accuracy of relative payment rates

1-1 The Congress should replace the current–law updates to the physician fee schedule with an annual update based on a portion of the growth in the Medicare Economic Index (MEI) (such as MEI minus 1 percentage point).

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

**1-2** The Congress should direct the Secretary to improve the accuracy of Medicare's relative payment rates for clinician services by collecting and using timely data that reflect the costs of delivering care.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

#### **Chapter 2: Supplemental benefits in Medicare Advantage**

No recommendations

**Chapter 3: Examining home health care use among Medicare Advantage enrollees** 

No recommendations

Chapter 4: Part D prescription drug plans for beneficiaries in fee-for-service Medicare and Medicare Advantage

No recommendations

#### **Chapter 5: Medicare beneficiaries in nursing homes**

No recommendations

#### Chapter 6: Medicare's measurement of rural provider quality

No recommendations

## Chapter 7: Reducing beneficiary cost sharing for outpatient services at critical access hospitals

For fee-for-service Medicare beneficiaries, the Congress should:

- Set coinsurance for outpatient services at critical access hospitals equal to 20 percent of the payment amount for services that require cost sharing; and
- Place a cap on critical access hospitals' outpatient coinsurance equal to the inpatient deductible.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch