

HELP Committee Amendments – Affordable Health Choices Act

CQ COMMITTEE COVERAGE

Senate Health, Education, Labor and Pensions Committee Markup

July 14, 2009

Panel Action on Health Care Overhaul In Home Stretch

By Adjoa Adofo, CQ Staff

The Senate Health, Education, Labor and Pensions Committee continued its marathon markup Tuesday of a massive health care overhaul bill, completing action on all amendments to its bill and setting up a final vote for the legislation for the following day. Christopher J. Dodd, D-Conn., who is leading the panel in the absence of ailing Chairman Edward M. Kennedy, D-Mass., said the committee would vote on the package at 10 a.m. Wednesday.

President Obama has called on the House and the Senate to pass health care legislation before they leave Washington for the August recess.

During Tuesday's markup, the committee disposed of dozens of amendments. Thirty of them were accepted by Dodd after staff negotiations; another 27 were withdrawn.

The panel turned aside Republican challenges to aspects of a government-run health insurance plan that the legislation would create to compete with private insurers, and to the bill's mandate that employers with more than 25 workers provide health insurance or pay a penalty.

The panel rejected, 9-14, an amendment by Lisa Murkowski, R-Alaska, that would have allowed businesses with as many as 50 employees to be exempt from the bill's proposed \$750 per worker penalty if they do not provide health insurance.

But in a move that drew considerable laughter, the panel adopted by 12-11 an amendment by Tom Coburn, R-Okla., that would require members of Congress to enroll in the government-run public plan created by the legislation.

"We should take the lead, sacrifice and demonstrate our faith on how good we think this will be," Coburn said.

Dodd said he appreciated "the congressman from Oklahoma's endorsement of a public option plan."

Coburn replied, "I don't think you caught my sarcasm in this. I can't wait 'til we are in conference committee, and they try to take this out."

Provider Payments

The panel also rejected, 10-13, an amendment by Pat Roberts, R-Kan., that would have set a minimum guaranteed rate of payment to health care providers under the public insurance plan option under the bill to compete with private insurers.

Murkowski, who had unsuccessfully offered a similar amendment, warned that allowing the public plan to set payment rates at levels well below those of private insurers would

further strain doctors and hospitals who say that Medicare and Medicaid payments are already too low.

Such rates could ultimately drive some providers out of business, GOP senators warned.

But Jeff Bingaman, D-N.M., argued that a minimum level should not be set by law. Under the bill, he said, the reimbursement rate for health care providers would be negotiated by the government with the doctors and hospitals. He said there may be areas in the country where private insurers are paying too much and a lower public plan rate could help bring down overall costs.

Single Payer

The option of the government forming a single-payer health care system, or a single fund from which to reimburse health care providers, has been largely left out of the health care overhaul debate. It has not been directly supported by the administration, and Republicans have resoundingly rejected the idea, arguing that it is a radical concept that would kill off private insurers.

But supporters argue the system is the only real way a universal health care system can be achieved.

In a last gasp Tuesday, Bernard Sanders, I-Vt., sponsor of a bill (S 703) proposing a single-payer plan, offered an amendment that would allow states to operate a single-payer health care system.

“The function of what we’re doing here is not support the private health insurance industry,” Sanders said. “The function of what we’re trying to do here is to present the best quality health care to the American people in the most cost effective way. This bill does not achieve universal health care.”

Sanders cited a 2007 AP/Yahoo Poll indicating that 65 percent of Americans believe the United States should adopt a universal health insurance program in which “everyone is covered under [a] program like Medicare that is run by the government and financed by taxpayers.”

Democrats Tom Harkin of Iowa and Jeff Merkley of Oregon expressed support for the Sanders amendment, but Bingaman argued that the language “sets us on the road of replacing the entire system.”

The amendment was defeated 4-19.

Other Amendments

In other votes Tuesday, the committee adopted a Jack Reed, D-R.I., amendment to establish a grant program for behavioral health centers, by 14-9.

The panel also gave voice vote approval to a Sherrod Brown, D-Ohio, amendment that would have free-standing cancer hospitals excluded from the Medicare prospective payment system to be among entities for eligible discounts under the 340B Drug Pricing Program that limits the cost of drugs to outpatients.

An amendment by ranking Republican Michael B. Enzi of Wyoming that would have allowed qualified Medicaid enrollees to opt out of Medicaid and enroll in a private or public insurance plan offered through a state's "gateway," or exchange, was rejected 10-13.

In a similar vote, committee members also rejected an amendment by Orrin G. Hatch, R-Utah, that would retain current authorization levels for federally qualified health centers and the National Health Service Corps under current law ().

In the bill's language, the authorization levels would be increased by almost \$5 billion, said Hatch.

Hatch said, "Members of this committee on both sides of the aisle worked on reauthorizing these programs last fall. I'm convinced if Ted (Kennedy) were here, these sections would have never been included in the bill."

The panel also rejected, 10-13, a Coburn substitute amendment that would have stripped the bill's language and inserted language from a GOP-sponsored overhaul bill (S 1099). The proposal would:

- Provide a refundable tax credit of \$2,300 per individual or \$5,700 per family for health insurance.
- Clarify the operation of Health Savings Accounts (HSAs) by allowing health insurance premiums to be paid with HSAs without a tax penalty.
- Give Americans the same standard health benefits as members of Congress.

Committee Votes

Draft Bill

Health Care Overhaul/Coverage/Reimbursement Rates

L. Murkowski, R-Alaska – Amendment that would require the rate of payment to health care providers under the public insurance plan option to be equal to the average rate provided by private insurers in major metropolitan areas.

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.)	Burr (N.C.) *	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.)	Hatch (Utah) *
Isakson (Ga.)	McCain (Ariz.)	Murkowski (Alaska)
Roberts (Kan.) *		

NAYS (13)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio)	Casey (Pa.)
Dodd (Conn.) *	Hagan (N.C.)	Harkin (Iowa)

Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.) *	Reed, J. (R.I.)	Whitehouse (R.I.)
Independents (1)		
Sanders (Vt.)		

Draft Bill

Health Care Overhaul/Coverage/Mental Health

J. Reed, D-R.I. – Amendment that would establish a grant program for co-locating primary and specialty care in community-based mental and behavioral health centers.

It would determine qualified entities as those that serve three specific special populations including:

Children and adolescents with mental and emotional disturbances who have both primary care conditions and chronic diseases.

Adults with mental illnesses who have both primary care conditions and chronic diseases.

Older adults with mental illnesses who have both primary care conditions and chronic diseases.

The amendment would require recipients to submit a report to the secretary of Health and Human Services three months after receiving the award. It would also require a report from the secretary to members of Congress evaluating the activities funded through the program no later than five years after the bill's enactment.

It would authorize \$50 million for fiscal 2010 and such sums as necessary during fiscal 2011 through 2014.

Adopted 14-9; R 1-9; D 12-0; I 1-0; July 14, 2009.

Vote Key

YEAS (14)

Republicans (1)

Murkowski (Alaska) *

Democrats (12)

Bingaman (N.M.) *	Brown, S. (Ohio)	Casey (Pa.)
Dodd (Conn.) *	Hagan (N.C.)	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.) *	Reed, J. (R.I.)	Whitehouse (R.I.)

Independents (1)

Sanders (Vt.) *

NAYS (9)

Republicans (9)

Alexander, L. (Tenn.)	Burr (N.C.) *	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.)	Hatch (Utah)
Isakson (Ga.)	McCain (Ariz.)	Roberts (Kan.) *

Draft Bill

Health Care Overhaul/Coverage/Medicaid Opt-Out

Enzi, R-Wyo. – Amendment that would allow qualified Medicaid enrollees to opt out of Medicaid and enroll in a private or public insurance plan offered through a state's "gateway," or exchange.

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.) *	Burr (N.C.) *	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.)	Hatch (Utah) *
Isakson (Ga.) *	McCain (Ariz.) *	Murkowski (Alaska) *
Roberts (Kan.)		

NAYS (13)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio)	Casey (Pa.) *
Dodd (Conn.) *	Hagan (N.C.)	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.) *	Reed, J. (R.I.) *	Whitehouse (R.I.) *

Independents (1)

Sanders (Vt.)

Draft Bill

Health Care Overhaul/Coverage/Independent Commission

Merkley, D-Ore. – Amendment that would establish a temporary commission of nonpartisan experts to provide the secretary of Health and Human Services recommendations on actions regarding the bill's benefits package.

As modified, it would provide that the 17 members of the commission be appointed by the secretary of Health and Human Services.

The amendment would provide that members of the commission be appointed no later than 45 days after the bill's enactment.

As modified, the amendment would require the commission to provide a report to the secretary of Health and Human Services and Congress no later

than six months after the bill's enactment.

The amendment would authorize \$1.5 million to establish the commission.

Adopted by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Employer Mandate

L. Murkowski, R-Alaska – Amendment that would allow businesses with up to 50 employees to be exempt from the bill's proposed \$750 per worker penalty if they do not provide health insurance.

Rejected 9-14: R 9-1; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (9)

Republicans (9)

Alexander, L. (Tenn.)	Burr (N.C.)	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.) *	Hatch (Utah) *
Isakson (Ga.) *	McCain (Ariz.) *	Murkowski (Alaska)

NAYS (14)

Republicans (1)

Roberts (Kan.)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio) *	Casey (Pa.)
Dodd (Conn.)	Hagan (N.C.) *	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.)	Reed, J. (R.I.) *	Whitehouse (R.I.)

Independents (1)

Sanders (Vt.) *

Draft Bill

Health Care Overhaul/Coverage/En Bloc Amendments

Dodd, D-Conn. – Amendments by:

Pat Roberts, R-Kan., that would provide that no health care plan or issuer shall be prohibited from providing reimbursement payment for a treatment or diagnostic procedure it chooses to cover, unless such treatment or procedure has been determined to be unsafe or dangerous.

Roberts, that would ensure that health benefits established as essential not be subject to denial to individuals against their wishes on the basis of the individual's age or expected length of life or of the individual's present or

predicted disability, degree of medical dependency or quality of life.

Roberts, that would clarify that the bill's Gateway program has not established a pattern or practice under which benefits covered by the plan are denied to covered individuals on the basis of the individual's age or expected length of life or of the individual's present or predicted disability, degree of medical dependency, or quality of life.

Michael B. Enzi, R-Wyo., that would prevent enactment of lifetime or annual limits on the dollar value of benefits until the secretary of Health and Human Services certifies that it will not result in proliferation of fraud and abuse, especially with regard to durable medical equipment.

Enzi, that would prevent the denial of care based on patient age, disability, medical dependency or quality of life.

Enzi, that would provide that a Gateway program may not exclude a health plan on the basis that the plan is a fee-for-service plan or that the plan provides treatments necessary to prevent patients' deaths in circumstances the Gateway deems inappropriate or too costly.

Enzi, that would provide that a Gateway program must determine that a plan has not established a pattern under which benefits covered by the plan are denied to covered individuals on the basis of the individual's age or expected length of life or of the individual's disability, degree of medical dependency, or quality of life.

Enzi, that would provide that no health plan or health insurance issuer shall be forced to deny patients medical care needed to prevent their deaths or restore their health. It also would provide that no plan or issuer should be prohibited from providing treatment it chooses to cover unless the treatment is determined to be unsafe.

Enzi, that would prohibit the secretary of Health and Human Services from making coverage decisions, determining reimbursement rates, or design benefits that may discriminate against those because of their age, disability, or life expectancy.

Enzi, that would establish a sense of the Senate that a biosimilars pathway balancing innovation and consumer interests should exist.

Enzi, that would require the Government Accountability Office to conduct a study and report on the cost of health care no later than 180 days after the bill's enactment.

Enzi, that would delay applicability of the certain provisions of the Public Health Service Act to one year after the bill's enactment.

Enzi, that would provide that nothing in the bill should prohibit an individual enrolled in a community health insurance option from paying, out-of-pocket, the full cost of any item not included as an essential health benefit.

It also would provide that nothing in the bill should prevent any type of medical provider from accepting an out-of-pocket payment from an individual enrolled in a community health insurance option for a service otherwise not included as an essential health benefit.

Enzi, that would prohibit the community health insurance option from limiting access to tend of life care.

Enzi, that would direct the secretary of Health and Human Services to ensure that the aggregate amount awarded to states to establish state-level Gateway programs is no less than 60 percent of the aggregate amount awarded to all states.

Richard M. Burr, R-N.C., that would provide that no funds collected through a Gateway surcharge for administrative and operational expenses may be used for staff retreats, promotional giveaways, excessive executive compensation, or promotion of federal or state legislative modifications.

Burr, that would direct funds collected from penalties placed on employers who do not provide health care insurance plans to be used for premium credits.

Burr, that would clarify that the bill's Gateway programs are intended to reduce the cost of health care.

Burr, that would permit physician-negotiated reimbursement rates under a government-run plan.

Burr, that would make available marketing materials relating to private health insurance plans where marketing materials related to a government-run plan are available to the public.

Burr, that would strike provisions that prevent a full accounting of costs.

Burr, that would apply the same laws to government-run health insurance plans that are applied to private health insurance issuers.

Burr, that would provide for the application of certain state laws regarding non-discrimination, ratings, benefit mandates, solvency, and licensure to government-run health insurance plans.

Judd Gregg, R-N.H., that would require the secretary of the Treasury, in consultation with the secretary of Health and Human Services, to determine the amount of cost savings each fiscal year as a result of the bill's enactment.

Gregg, that would require the secretary of Health and Human Services to publish on the Department of Health and Human Services' Web site a list of all the authorities provided to the secretary of Health and Human Services no later than 30 days after the bill's enactment.

Gregg, that would require the community health insurance option to repay the secretary of Treasury for loans provided for initial operations of a community health insurance option under the Department of Treasury's Health Benefit Plan Start-Up Fund no later than 10 years after the payment date.

Gregg, that would require new federal health entitlement programs to be fiscally solvent.

Orrin G. Hatch, R-Utah, that would prohibit the administrator of the Gateway program or a qualified health plan offered through the Gateway program from denying individual benefits for religious or spiritual health care unless the expense is eligible for an IRS deduction as a medical care expense.

Hatch, that would require any entity selected as a navigator of agreements with state governments to conduct public education activities on enrollment in qualified health plans to be qualified and licensed to engage in the appropriate activities.

Hatch, that would authorize a GAO study on the 340B program after the bill's

enactment.

Adopted (en bloc) by unanimous consent; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Payment Rates

Amendment that would have set a minimum guaranteed rate of payment to health care providers under the public insurance plan option that would be created under the bill to compete with private insurers.

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.) *	Burr (N.C.) *	Coburn (Okla.) *
Enzi (Wyo.) *	Gregg (N.H.)	Hatch (Utah) *
Isakson (Ga.) *	McCain (Ariz.) *	Murkowski (Alaska)
Roberts (Kan.)		

NAYS (13)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio) *	Casey (Pa.)
Dodd (Conn.)	Hagan (N.C.) *	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.) *	Mikulski (Md.)
Murray (Wash.)	Reed, J. (R.I.) *	Whitehouse (R.I.) *

Independents (1)

Sanders (Vt.) *

Draft Bill

Health Care Overhaul/Coverage/Congressional Mandate

Coburn, R-Okla. – Amendment that would require all members of Congress to enroll in a government-run health care insurance plan.

Adopted 12-11: R 9-1; D 3-9; I 0-1; July 14, 2009.

Vote Key

YEAS (12)

Republicans (9)

Alexander, L. (Tenn.) *	Burr (N.C.) *	Coburn (Okla.)
Enzi (Wyo.)	Hatch (Utah) *	Isakson (Ga.) *
McCain (Ariz.) *	Murkowski (Alaska)	Roberts (Kan.) *

Democrats (3)

Dodd (Conn.)

Kennedy, E. (Mass.) * Mikulski (Md.)

NAYS (11)

Republicans (1)

Gregg (N.H.)

Democrats (9)

Bingaman (N.M.)

Brown, S. (Ohio) * Casey (Pa.)

Hagan (N.C.)

Harkin (Iowa) * Merkley (Ore.)

Murray (Wash.)

Reed, J. (R.I.) * Whitehouse (R.I.) *

Independents (1)

Sanders (Vt.)

Draft Bill

Health Care Overhaul/Coverage/Consumer Protections

Dodd, D-Conn. – Amendment that would require the secretary of Health and Human Services to develop standards for health care plans participating in the gateway program for summaries of benefits and coverage provided by the issuer.

It would require uniform definitions of medical and standard insurance terms. It would require plans to disclose changes in any premiums and copayments in advance.

The amendment would authorize \$20 million for fiscal 2010 and such sums as necessary for each fiscal year thereafter.

Adopted by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Employer Mandate Phase-In

Murray, D-Wash. – Amendment that would allow businesses with more than 25 employees to be eligible for a pro rata application of penalty payments for part-time employees not offered a health insurance plan by the business.

Adopted by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/En Bloc Amendments

Coburn, R-Okla. – Amendments that would:

Make independent insurance agents eligible to act as navigators of agreements with state governments who receive federal grants to conduct public education activities regarding enrollment in qualified health plans.

Require the use of available technologies to reduce and prevent waste, fraud,

and abuse, including technology providing real-time data analysis of claims for payment and beneficiary identifiers avoiding the use of an individual's Social Security number.

Require a health insurance issuer to consider all enrollees in a small group health plan to be a member of a single risk pool.

Direct the secretary of Health and Human Services to revoke a contract offering a community health insurance option if an administrator for an entity has engaged in fraud or gross mismanagement with the Community Health Insurance Plan.

Provide that no provision in the bill shall supersede state law regarding substitution of drugs or biologics prescribed by a physician.

Define the term "full-time employee" to be an employee who works at least 40 hours per week for purposes of the small business health options program credit.

Require the secretary of Health and Human Services to publish regulations with a notice and comment period for any changes to Gateway operations.

Require that scientific data by the federal government is publicly available.

Prohibit the secretary of Health and Human Services from imposing regulations that:

Create unreasonable barriers to the ability of individuals to obtain appropriate medical services.

Impede timely access to health care services.

Interfere with communications regarding a full range of treatment options between the patient and the provider.

Restrict the ability of health care providers to provide full disclosure of all relevant information to patients making health care decisions.

Violate the principles of informed consent and the ethical standards of health care professionals.

Limit the availability of health care treatment for the full duration of the patient's medical needs.

Require the Gateway program to publish the average costs of income, licensing or regulatory fees, and any surcharges on a Web site to educate consumers.

Prohibit federal financial assistance from paying for or reimbursing assisted suicide, euthanasia or mercy killing.

Provide that no insurer shall be required to participate in a federal health insurance program.

Adopted (en bloc) by unanimous consent; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Single Payer Plan

Sanders, I-Vt. – Amendment that would allow states to operate a single payer health care system.

Rejected 4-19; R 0-10; D 3-9; I 1-0; July 14, 2009.

Vote Key

YEAS (4)

Democrats (3)

Brown, S. (Ohio) Harkin (Iowa) Merkley (Ore.)

Independents (1)

Sanders (Vt.)

NAYS (19)

Republicans (10)

Alexander, L. (Tenn.) * Burr (N.C.) Coburn (Okla.) *

Enzi (Wyo.) Gregg (N.H.) Hatch (Utah)

Isakson (Ga.) * McCain (Ariz.) * Murkowski (Alaska) *

Roberts (Kan.) *

Democrats (9)

Bingaman (N.M.) Casey (Pa.) Dodd (Conn.)

Hagan (N.C.) * Kennedy, E. (Mass.) * Mikulski (Md.)

Murray (Wash.) Reed, J. (R.I.) * Whitehouse (R.I.) *

Draft Bill

Health Care Overhaul/Coverage/Sunset Employer Mandate

Hatch, R-Utah – Amendment that would terminate the bill's employer mandate policies if the secretary of Labor determines that implementation of the policies have resulted in lower wages or job loss.

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.) * Burr (N.C.) Coburn (Okla.) *

Enzi (Wyo.) Gregg (N.H.) Hatch (Utah)

Isakson (Ga.) * McCain (Ariz.) * Murkowski (Alaska) *

Roberts (Kan.) *

NAYS (13)

Democrats (12)

Bingaman (N.M.) Brown, S. (Ohio) Casey (Pa.)

Dodd (Conn.) Hagan (N.C.) * Harkin (Iowa)

Kennedy, E. (Mass.) * Merkley (Ore.) * Mikulski (Md.)

Murray (Wash.) Reed, J. (R.I.) * Whitehouse (R.I.) *
 Independents (1)
 Sanders (Vt.) *

Draft Bill

Health Care Overhaul/Coverage/Cancer Hospitals

S. Brown, D-Ohio – Amendment that would have free-standing cancer hospitals excluded from the Medicare prospective payment system to be included amongst eligible entities for discounts under the 340B Drug Pricing Program requiring drug manufacturers to provide outpatient drugs to certain covered entities.

Adopted by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Public Option Solvency

Hatch, R-Utah – Amendment that would require that a community health insurance option be subject to the state licensure and financial solvency requirements, including risk based capital standards for each state that offers the plan.

It would provide that in the event that a community health insurance option plan is unable to comply with solvency, state insurance commissioners shall take control of the plan to ensure continuity of service for enrollees.

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.) *	Burr (N.C.)	Coburn (Okla.)
Enzi (Wyo.)	Gregg (N.H.) *	Hatch (Utah)
Isakson (Ga.)	McCain (Ariz.)	Murkowski (Alaska)
Roberts (Kan.) *		

NAYS (13)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio) *	Casey (Pa.) *
Dodd (Conn.)	Hagan (N.C.)	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.) *	Reed, J. (R.I.) *	Whitehouse (R.I.) *

Independents (1)

Sanders (Vt.)

Draft Bill

Health Care Overhaul/Coverage/Authorization Levels

Hatch, R-Utah – Amendment that would retain the federally qualified health centers authorization levels and the National Health Service Corps contained in the so-called Health Care Safety Net Act of 2008 (PL 110-355).

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.)	Burr (N.C.)	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.) *	Hatch (Utah)
Isakson (Ga.)	McCain (Ariz.)	Murkowski (Alaska)
Roberts (Kan.) *		

NAYS (13)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio) *	Casey (Pa.)
Dodd (Conn.)	Hagan (N.C.)	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.) *
Murray (Wash.) *	Reed, J. (R.I.) *	Whitehouse (R.I.) *

Independents (1)

Sanders (Vt.)

Draft Bill

Health Care Overhaul/Coverage/Seasonal Workers

Hagan, D-N.C. – Amendment that would provide an exception to the employer mandate provisions for seasonal or temporary farm workers.

Adopted by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/National Health Service Corps

Enzi, R-Wyo. – Amendment that would ensure adequate funding for federally qualified health centers and the National Health Service Corps.

It would authorize \$2.1 billion for fiscal 2008, \$2.3 billion for fiscal 2009, \$2.6 billion for fiscal 2010, \$2.9 billion for fiscal 2011 and \$3.3 billion for fiscal 2012 for qualified health centers.

For the National Health Service Corps, the amendment would authorize \$131

million for fiscal 2008, \$143 million for fiscal 2009, \$156 million for fiscal 2010, \$170 million for fiscal 2011 and \$185 million for fiscal 2012.
Rejected by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/En Bloc Amendments

J. Reed, D-R.I. – En bloc amendments that would:

Require reports on quality measures for health plan performance be submitted to applicable data on the Gateway program.

Establish a toll-free telephone hotline to respond to requests for assistance with the Gateway program and would require the Department of Health and Human Services to maintain a Web site through which enrollees and prospective enrollees of qualified health plans can obtain comparative information on plans.

Require the Gateway program to provide accurate information on medical loss ratios and quality measures for health plan performance.

Require the Gateway program to provide accurate information on preventive services recommended by the bill's Advisory Committee on Immunization Practices and the U.S. Preventative Services Task Force.

Adopted (en bloc) by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Medical Advisory Board

Coburn, R-Okla. – Amendment would require that one-third of the nominees to a medical advisory board providing recommendations to the secretary of Health and Human Services be practicing, active clinicians.

Adopted by unanimous consent; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Substitute Amendment

Coburn, R-Okla. – Substitute amendment that would strike the language of the bill and insert language from the so-called Patients' Choice Act (S 1009).

The substitute amendment would:

Provide a refundable tax credit of \$2,300 per individual or \$5,700 per family for health insurance.

Clarify the operation of Health Savings Accounts (HSAs) by allowing health insurance premiums to be paid with HSAs without a tax penalty.

Allow preventive services to be covered by High Deductible Health Plans.

Require the Centers for Disease Control and Prevention (CDC) to establish a national campaign highlighting science-based health promotion strategies.

Invest \$50 million annually for increased vaccine availability and bonus grants to states that achieve 90 percent or greater coverage of CDC-recommended vaccines.

Provide incentives for states to reduce rates of chronic disease like heart

disease and diabetes.

Create State Health Insurance Exchanges to allow Americans to compare different health insurance policies.

Give Americans the same standard health benefits as members of Congress.

Create a nonprofit, independent board to reward insurers that encourage prevention/wellness.

Establish auto-enrollment at state and medical points of service for individuals who do not select a plan at the beginning of the year.

Rejected 9-14: R 9-1; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (9)

Republicans (9)

Alexander, L. (Tenn.) *	Burr (N.C.)	Coburn (Okla.)
Enzi (Wyo.)	Gregg (N.H.)	Hatch (Utah) *
Isakson (Ga.)	McCain (Ariz.) *	Roberts (Kan.)

NAYS (14)

Republicans (1)

Murkowski (Alaska) *

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio) *	Casey (Pa.)
Dodd (Conn.)	Hagan (N.C.) *	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.) *	Reed, J. (R.I.) *	Whitehouse (R.I.)

Independents (1)

Sanders (Vt.) *

Draft Bill

Health Care Overhaul/Coverage/En Bloc Amendments

Dodd, D-Conn. – Amendments by:

Jeff Bingaman, D-N.M., that would establish a public health sciences track at universities providing a tuition grant and stipend for students that pursue public health studies. It would require that for each year that a student receives financial support, that student must commit to two years of public service.

Sheldon Whitehouse, D-R.I., that would authorize a Government Accountability Office study and report on rates of preventable disease in new Medicare enrollees. It would require the report no later than three years after the date of which at least five Gateway programs are operating in the United States.

Adopted by unanimous consent; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Tiered Subsidies

Enzi, R-Wyo. – Amendment that would provide a tier for a basic plan in which a qualified health plan provides coverage for not less than 60 percent of the total allowed costs of the benefit provided.

Rejected 10-13: R 10-0; D 0-12; I 0-1; July 14, 2009.

Vote Key

YEAS (10)

Republicans (10)

Alexander, L. (Tenn.) *	Burr (N.C.) *	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.)	Hatch (Utah) *
Isakson (Ga.) *	McCain (Ariz.) *	Murkowski (Alaska) *
Roberts (Kan.) *		

NAYS (13)

Democrats (12)

Bingaman (N.M.)	Brown, S. (Ohio)	Casey (Pa.)
Dodd (Conn.)	Hagan (N.C.)	Harkin (Iowa)
Kennedy, E. (Mass.) *	Merkley (Ore.)	Mikulski (Md.)
Murray (Wash.)	Reed, J. (R.I.)	Whitehouse (R.I.)

Independents (1)

Sanders (Vt.)

Draft Bill

Health Care Overhaul/Coverage/Non-Discrimination

Harkin, D-Iowa – Amendment that would provide that a qualified health plan shall not discriminate with respect to participation, reimbursement, covered services or indemnification under a health plan or other insurance coverage against any health care provider who is acting within the scope of that provider's license under state law.

Adopted by voice vote; July 14, 2009.

Draft Bill

Health Care Overhaul/Coverage/Age

Enzi, R-Wyo. – Amendment that would provide that premium rates charged by a health insurance issuer for health insurance coverage offered in the individual or group market shall vary no more than 5 to 1 by age.

Rejected 11-12: R 10-0; D 1-11; I 0-1; July 14, 2009.

Vote Key

YEAS (11)

Republicans (10)

Alexander, L. (Tenn.) *	Burr (N.C.) *	Coburn (Okla.) *
Enzi (Wyo.)	Gregg (N.H.)	Hatch (Utah) *
Isakson (Ga.) *	McCain (Ariz.) *	Murkowski (Alaska) *
Roberts (Kan.)		

Democrats (1)

Hagan (N.C.)

NAYS (12)

Democrats (11)

Bingaman (N.M.)	Brown, S. (Ohio)	Casey (Pa.)
Dodd (Conn.)	Harkin (Iowa)	Kennedy, E. (Mass.) *
Merkley (Ore.)	Mikulski (Md.)	Murray (Wash.)
Reed, J. (R.I.)	Whitehouse (R.I.)	

Independents (1)

Sanders (Vt.)

Draft Bill

Health Care Overhaul/Coverage/En Bloc Amendments

Dodd, D-Conn. – Amendments by:

Christopher J. Dodd, D-Conn., that would make technical changes to the bill.

Michael B. Enzi, R-Wyo., that would make technical clarifications to the bill.

Adopted (en bloc) by unanimous consent; July 14, 2009.

 Committee Vote Position Key

* Proxy Vote	# Paired for
P Voted Present	X Paired against
A Abstained	+ Announced for
? Did not vote	- Announced against

Source: CQ Committee Coverage

Gavel-to-gavel coverage and votes of every markup on Capitol Hill.

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