

AMENDMENT NO. _____ Calendar No. _____

Purpose: To express the sense of the Senate that Medicaid administrative regulations should not undermine Medicaid's role in our Nation's health care system, cap Federal Medicaid spending, or otherwise shift Medicaid cost burdens to State or local governments and their taxpayers and health providers, or undermine the Federal guarantee of health insurance coverage Medicaid provides.

IN THE SENATE OF THE UNITED STATES—110th Cong., 2d Sess.

S. Con. Res. 70

Setting forth the congressional budget for the United States Government for fiscal year 2009 and including the appropriate budgetary levels for fiscal years 2008 and 2010 through 2013.

Referred to the Committee on _____ and
ordered to be printed

Ordered to lie on the table and to be printed

AMENDMENT intended to be proposed by Mr. BAUCUS

Viz:

1 At the appropriate place, insert the following:

2 **SEC. ____ . SENSE OF THE SENATE REGARDING MEDICAID**

3 **ADMINISTRATIVE REGULATIONS.**

4 (a) FINDINGS.—The Senate makes the following

5 findings:

1 (1) The Medicaid program provides essential
2 health care and long-term care services to approxi-
3 mately 60,000,000 low-income children, pregnant
4 women, parents, individuals with disabilities, and
5 senior citizens. It is a Federal guarantee that en-
6 sures the most vulnerable will have access to needed
7 medical services.

8 (2) Medicaid provides critical access to long-
9 term care and other services for the elderly and indi-
10 viduals living with disabilities, and is the single larg-
11 est provider of long-term care services. Medicaid also
12 pays for personal care and other supportive services
13 that are typically not provided by private health in-
14 surance or Medicare, but are necessary to enable in-
15 dividuals with spinal cord injuries, developmental
16 disabilities, neurological degenerative diseases, seri-
17 ous and persistent mental illnesses, HIV/AIDS, and
18 other chronic conditions to remain in the commu-
19 nity, to work, and to maintain independence.

20 (3) Medicaid supplements the Medicare pro-
21 gram for about 7,500,000 low-income elderly or dis-
22 abled Medicare beneficiaries, assisting them with
23 their Medicare premiums and co-insurance, wrap-
24 around benefits, and the costs of nursing home care
25 that Medicare does not cover. The Medicaid program

1 spends over \$100,000,000,000 on uncovered Medi-
2 care services.

3 (4) Medicaid provides health insurance for more
4 than one-quarter of America's children and is the
5 largest purchaser of maternity care, paying for more
6 than one-third of all the births in the United States
7 each year. Medicaid also provides critical access to
8 care for children with disabilities, covering more
9 than 70 percent of poor children with disabilities.

10 (5) More than 21,000,000 women depend on
11 Medicaid for their health care. Women comprise the
12 majority of seniors (64 percent) on Medicaid. Half
13 of nonelderly women with permanent mental or
14 physical disabilities have health coverage through
15 Medicaid. Medicaid provides treatment for low-in-
16 come women diagnosed with breast or cervical can-
17 cer in every State.

18 (6) Medicaid is the Nation's largest source of
19 payment for mental health services, HIV/AIDS care,
20 and care for children with special needs. Much of
21 this care is either not covered by private insurance
22 or limited in scope or duration. Medicaid is also a
23 critical source of funding for health care for children
24 in foster care and for health services in schools.

1 (7) Medicaid funds help ensure access to care
2 for all Americans. Medicaid is the single largest
3 source of revenue for the Nation's safety net hos-
4 pitals, health centers, and nursing homes, and is
5 critical to the ability of these providers to adequately
6 serve all Americans.

7 (8) Medicaid serves a major role in ensuring
8 that the number of Americans without health insur-
9 ance, approximately 47,000,000 in 2006, is not sub-
10 stantially higher. The system of Federal matching
11 for State Medicaid expenditures ensures that Fed-
12 eral funds will grow as State spending increases in
13 response to unmet needs, enabling Medicaid to help
14 buffer the drop in private coverage during reces-
15 sions.

16 (9) The Bush Administration has issued several
17 regulations that shift Medicaid cost burdens onto
18 States and put at risk the continued availability of
19 much-needed services. The regulations relate to Fed-
20 eral payments to public providers, and for graduate
21 medical education, rehabilitation services, school-
22 based administration, school-based transportation,
23 optional case management services.

24 (b) SENSE OF THE SENATE.—It is the sense of the
25 Senate that administrative regulations should not—

1 (1) undermine the role the Medicaid program
2 plays as a critical component of the health care sys-
3 tem of the United States;

4 (2) cap Federal Medicaid spending, or other-
5 wise shift Medicaid cost burdens to State or local
6 governments and their taxpayers and health pro-
7 viders, forcing a reduction in access to essential
8 health services for low-income elderly individuals, in-
9 dividuals with disabilities, and children and families;
10 or

11 (3) undermine the Federal guarantee of health
12 insurance coverage Medicaid provides, which would
13 threaten not only the health care safety net of the
14 United States, but the entire health care system.