



WASHINGTON UPDATE

NOVEMBER 2014

Medicare Open Enrollment

The Medicare open enrollment period continues through December 7. During this period, all people with Medicare can change their Medicare health plan and prescription drug coverage for 2015. It's also during this period that older adults may become targets for scam artists. According to the National Council on Aging, health care and Medicare fraud are among the most common scams targeting seniors.

"In these types of scams, perpetrators may pose as a Medicare representative to get older people to give them their personal information, or they will provide bogus services for elderly people at makeshift mobile clinics, then use the personal information they provide to bill Medicare and pocket the money."

The Benjamin Rose Medicare and Benefits Enrollment Center can help seniors sort through changes to Medicare D for 2015 and make informed decisions about their prescription drug plans. The Center can be reached at 216.373.1650 / toll free 1.866.885.1650

Congressional Update

Midterm Elections Bring Changes to Committees; Lame Duck Session Convenes

The midterm elections were held on November 4. In the 114th Congress, both chambers will be controlled by Republicans for the first time since 2006. In the House, the Republicans now control at least 244 of 435 seats with five races outstanding, a modern day record majority. In the Senate, the Republicans control at least 53 seats, with one race to finalize.

A lame duck session of the 113th (current) Congress with the current majorities convened beginning November 12. The session is not expected to be extremely active. The only required legislative activity is to determine funding for the balance of Fiscal Year 2015 after December 11, when the current Continuing Resolution (CR) expires. This CR has frozen funding levels at FY2014 levels. The lame duck session will either pass another short-term CR, a full-year CR, or an omnibus funding bill.

CQ reports that Rep. Hal Rogers' (R-KY) and Sen. Barbara Mikulski's (D-MD) staffs are drawing up a detailed omnibus plan for all government spending that is to be ready by the week of December 8. This leaves a tight margin as the current CR expires December 11. They would like to have negotiations as far along as possible to make it more difficult for lawmakers not involved in the appropriations process to argue on behalf of another CR. There are some lawmakers who would like to see another short-term CR, mostly conservatives who want to postpone any spending decisions until Republicans assume control of both chambers in January. If an omnibus goes through, conservatives may attempt to attach provisions to it such as amendments to the Affordable Care Act or limitations on the President's authority to take executive action on immigration reform.

Any other legislation that has not become law by the time Congress recesses in December will need to start all over again in the new Congress. This is expected to be the case with the Older Americans Act.

The incoming new Congress has started to hold organizational

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CMS Says Hospitals Now Required to Make Price Lists for Services Public

In October, a rule the Centers for Medicare and Medicaid Services (CMS) published took effect requiring hospitals to make charges for their procedures and services public. The American Hospital Association and the Federation of American Hospitals supported this rule change. However, as Herb Kuhn, a former CMS official, pointed out to Bloomberg BNA, the requirement is vague, which makes it difficult both for hospital compliance and for patients to find the price lists. The rule does not specify how and where the list has to be posted, and it does not mention any penalties for hospitals that fail to comply.

Contact Us

We welcome your feedback!
Please share questions,
suggestions or concerns.

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meetings. These meetings determine the leadership positions (Senate Majority and Minority leaders, Speaker of the House, and Minority Leader of the House) along with Committee chairmanships. The chairmanships will now be held by Republicans in both chambers, Senate and House. The leaders of the House (Speaker John Boehner (R-OH) and Minority Leader Nancy Pelosi (D-CA)) did not change; the leaders of the Senate simply traded places (current Majority Leader Harry Reid (D-NV) and Minority Leader Mitch McConnell (R-KY)).

Some of the new Senate chairmen and ranking members are expected to be:

- Appropriations: Chair: Sen. Thad Cochran (R-MS), Ranking Member: Sen. Barbara Mikulski (D-MD)
- Health, Education, Labor and Pensions (HELP): Chair: Sen. Lamar Alexander (R-TN), Ranking Member: Sen. Patty Murray (D-WA)
- Finance (covers Medicare, Medicaid, Social Security): Chair: Sen. Orrin Hatch (R-UT), Ranking Member: Sen. Ron Wyden (D-OR)
- Aging: Chair: Sen. Susan Collins (R-ME), Ranking Member: Sen. Bob Casey (D-PA)

Subcommittee assignments are not expected to be completed until later in December or January.

House changes will be fewer in number and include:

- Appropriations, Labor-HHS Subcommittee: Chair: Rep. Tom Cole (R-OK)
- Education and the Workforce: Chair: Rep. John Kline (R-MN), Ranking Member: Rep. Bobby Scott (D-VA)
- Energy and Commerce: Chair: Rep. Fred Upton (R-MI), Ranking Member: Rep. Frank Pallone (D-NJ)
- Ways and Means: Chair: Rep. Paul Ryan (R-WI), Ranking Member: Rep. Sander Levin (D-MI)

Study Finds Interventions Fail to Reduce Readmissions

A recent study has shown that intervention measures which are designed to keep discharged hospital patients from readmission are not working at some community hospitals. These measures include pre-discharge and post-discharge counseling and patient monitoring. Researchers found no statistical difference in readmissions rates between groups of COPD and congestive heart failure patients who had and had not received these intervention measures. The researchers theorize that the interventions failed at least in part because the patients' primary care doctors were not part of the teams implementing the programs and were thus not invested in their success—"early and effective primary medical care could have prevented at least some readmissions," according to the study abstract.