AMENDMENT NO._________ Calendar No.______

Purpose: To ensure that government health care rationing does not harm, injure, or deny medically necessary care or endorse the taking of life as a form of health care.

IN THE SENATE OF THE UNITED STATES—111th Cong., 1st Sess.

H. R. 3590

AMENDMENT NO. 2964

To amend the amendment (No. 2786) proposed by Mr. REID

Ordered to lie on the table and to be printed

1 On page 17, strike line 11 through line 14.

2 On page 396, between lines 8 and 9, insert the fol-

3 lowing:
SEC. 1563. ENSURING THAT GOVERNMENT HEALTH CARE
RATIONING DOES NOT HARM, INJURE, OR
DENY MEDICALLY NECESSARY CARE.

Notwithstanding any other provision of law—

(1) no individual may be denied health care
based on age or life expectancy by any Federal
health program, the community health insurance op-
tion established under section 1323, or any Ex-
change established under this Act; and

(2) no entity of the Federal Government may
develop Quality-Adjusted Life Year measures or
other similarly designed government formulas for
limiting access to treatment.

Strike section 3403.

Strike section 4105.

On page 1680, between lines 20 and 21, insert the
following:

“(2) PROHIBITION.—The findings of the Insti-
tute are prohibited from being used by any govern-
ment entity for payment, coverage, or treatment de-
cisions. Nothing in the preceding sentence shall limit
a physician or other health care provider from using
Institute reports and recommendations when making decisions about the best treatment for an individual patient in an individual circumstance.”.

At the end of subtitle G of title I, add the following:

SEC. 15. IDENTIFICATION OF FEDERAL GOVERNMENT HEALTH CARE RATIONING.

(a) IN GENERAL.—The Comptroller General of the United States shall conduct, and submit to Congress a report describing the results of, a study that compares, with regard to the programs described in subsection (b)—

(1) any restrictions or limitations regarding access to health care providers (including the percentage of health care providers willing or permitted to care for patients insured by each program);

(2) any restrictions, denials, or rationing relating to the provision of health care, including medical procedures, tests (including mammograms and cervical cancer screenings), and prescription drug formularies;

(3) average wait times to see a primary care doctor;

(4) average wait times for medically necessary surgeries and medical procedures; and
(5) the estimated waste, fraud, and abuse (including improper payments) in each program.

(b) Programs.—The programs referred to in subsection (a) are—

(1) Medicare;

(2) Medicaid;

(3) the Indian Health Service;

(4) the Department of Veterans Affairs; and

(5) the Federal Employee Health Benefits Program.