



- 1 (8) A Medicare shared savings program totaling  
2 -4.9 billion.
- 3 (9) Hospital penalties totaling -7.1 billion.
- 4 (10) A revision to the Medicare Improvement  
5 Fund totaling -22.3 billion.
- 6 (11) Home health care cuts totaling -42.1 bil-  
7 lion.
- 8 (12) Hospice payment changes totaling -0.1 bil-  
9 lion.
- 10 (13) Medicare disproportionate share hospital  
11 payments changes totaling -20.6 billion.
- 12 (14) Cuts to advanced imaging services totaling  
13 -3.0 billion.
- 14 (15) A revision of the payment for power-driven  
15 wheelchairs totaling -0.8 billion.
- 16 (16) Cuts for certain medigap plans totaling  
17 -0.1 billion.
- 18 (17) A reduction in the part D premium sub-  
19 sidy for high-income beneficiaries totaling -10.7 bil-  
20 lion.
- 21 (18) Outpatient prescription drug cuts in long-  
22 term care facilities totaling -5.7 billion.
- 23 (19) Changes to preventive services in Medicare  
24 totaling -0.7 billion.

1           (20) A limitation on the Medicare exception to  
2 the prohibition on certain physician referrals for  
3 hospitals totaling -0.7 billion.

4           (21) Comparative effectiveness research totaling  
5 -0.3 billion.

6           (22) The elimination of indexing for part B  
7 premiums totaling -25.0 billion.

*And reflects the*

Sense of the Senate that any savings to the  
8 Federal Hospital Insurance Trust Fund under section  
9 1817 of the Social Security Act (42 U.S.C. 1395i) and  
10 the Federal Supplementary Medical Insurance Trust  
11 Fund under section 1841 of such Act (42 U.S.C. 1395t)  
12 by reason of the provisions of, and amendments made by,  
13 sections 6401, 6405, 6407, and 6410 should be used to  
14 strengthen the Medicare program under title XVIII of  
15 such Act.