

RESOLUTION 56 - 05A

Title: Medicare/Medicaid

Introduced by: John A. Rupke, MD, for the Organized Medical Staff Section

Original Author: John A. Rupke, MD

Referred to: Reference Committee B

House Action: Referred to the Board for Study

Whereas, the cost of services for the nation's 50 million recipients of Medicaid is split between federal government and the states, and

Whereas, Medicaid costs have increased 63 percent over the past five years to more than \$300 billion a year to these 50 million recipients, whose numbers have increased by a third since 2001, and

Whereas, some 35 state governments are reducing or restricting Medicaid roles and costs, and

Whereas, Medicare refuses to pay for long-term care, which costs about a third (or \$100 billion) of the Medicaid moneys, and

Whereas, Medicaid insures a quarter of the nation's children and more than two-thirds of the nursing home patients, and

Whereas, the "Great Society" of 1965-1966 enacted Titles 18 and 19 to create Medicaid and Medicare, and

Whereas, these Titles state their purpose is not that of controlling the costs of medical care, and

Whereas, the formula for calculating medical reimbursement annually demonstrates a lack of reality testing, and

Whereas, there is an increased trend toward the privatization of certain government functions; therefore be it

RESOLVED: That MSMS support federal legislation to balance bill patients or require co-pays for Medicare and Medicaid deficits; and be it further

RESOLVED: That MSMS seek legislation to freeze Medicare reimbursement after the current adjustment of a 2.7 increase to physicians; and be it further

RESOLVED: That MSMS support federal legislation to allow canceling or reducing balance billing or co-pays for hardship cases without change in fee schedules; and be it further

RESOLVED: That MSMS support federal legislation outsourcing the administration of Medicare and Medicaid to state and county medical societies.

WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE