

AMENDMENT TO S. CON. RES. 3
OFFERED BY MR. YARMUTH OF KENTUCKY

At the end of the concurrent resolution, add the following:

1 **SEC. ____ . PROHIBITION OF USE OF RECONCILIATION PRO-**
2 **CEDURES.**

3 (a) DETERMINATION BY CONGRESSIONAL BUDGET
4 OFFICE.—The Director of the Congressional Budget Of-
5 fice shall prepare for any reconciliation bill or joint resolu-
6 tion or amendment thereto or conference report thereon
7 reported by the Committee on the Budget of either House,
8 and submit to such committee, a determination of whether
9 such measure would cause any of the effects described in
10 subsection (c). If the Director determines that such meas-
11 ure would cause any of the effects described in subsection
12 (c), the reconciliation procedures otherwise applicable to
13 such measure under the Congressional Budget Act of
14 1974 shall have no force or effect.

15 (b) INCLUSION IN COMMITTEE REPORT.—The deter-
16 mination prepared by the Director shall be included in the
17 report accompanying such measure before such report is
18 filed.

1 (c) EFFECTS OF MEASURE.—The effects described in
2 this subsection are as follows:

3 (1) Denial of health insurance coverage to indi-
4 viduals on the basis that such individuals have a
5 pre-existing condition or a requirement for individ-
6 uals with a pre-existing condition to pay more for
7 premiums on the basis of such individuals having a
8 pre-existing condition.

9 (2) Allowing issuers of health insurance plans
10 to set life-time limits on the dollar value of health
11 insurance coverage benefits, which the Affordable
12 Care Act currently prohibits them from doing.

13 (3) Termination of the ability of individuals
14 under 26 years of age to be included on their par-
15 ents' employer-provided or individual health cov-
16 erage.

17 (4) Reduction in the number of people receiving
18 meaningful health coverage in the form of a com-
19 prehensive major medical policy covering high-cost
20 or catastrophic medical events and various services,
21 including those provided by physicians and hospitals.

22 (5) Higher out-of-pocket costs to seniors and
23 persons with disabilities for prescription drugs by
24 forcing Medicare beneficiaries to once again pay the
25 full cost of their prescriptions in a “coverage gap”

1 or “doughnut hole” between an initial coverage limit
2 and an out-of-pocket threshold pursuant to section
3 1860D–2 of title XVIII of the Social Security Act.

4 (6) Allowing issuers of health insurance plans
5 to require individuals to pay for preventive services,
6 such as for mammography, other health screenings,
7 and contraceptive services.

8 (7) A reduction in the solvency of the Medicare
9 Hospital Insurance Trust Fund.

10 (8) Making seniors and persons with disabilities
11 paying more for their health care by converting
12 Medicare into fixed dollar payments for the purchase
13 of private health insurance.

14 (9) Reducing Federal taxes for those with an-
15 nual incomes of more than \$1,000,000.

16 (10) Allowing issuers of health insurance plans
17 to search for an error or other technical mistake on
18 a customer’s application and use this error to deny
19 payment for services or rescind coverage when he or
20 she gets sick or injured and needs medical care.

