



# NRLN Review

**NRLN**  
NATIONAL RETIREE  
LEGISLATIVE NETWORK

## NRLN Review, Summary for October 2022

The NRLN Review provides a monthly report on National Retiree Legislative Network actions, events in Congress and important retirement news.

### Read Fall 2022 NRLN FOCUS Newsletter

An email was sent to NRLN members on October 20 inviting them to read the fall 2022 NRLN FOCUS Newsletter.

The 4-page newsletter includes:

- NRLN President Bill Kadereit's column on *ACO REACH Is Coming January 2023 – What Is It?*
- Byline articles featuring Janet Seefried, President, Detroit Alliance of Retirees (DEAR) and Jim Bodenner, President, NRLN Villages Chapter.
- NRLN Executive Director Alyson Parker's column on *Committees Reconciling 3 Bills with NRLN Proposals.*

Click here to read the fall 2022 NRLN FOCUS Newsletter. If you have a problem with link, go to [www.nrln.org](http://www.nrln.org) and click on the link to the newsletter posted in the right column of the NRLN website home page.

<https://nrln.org/wp-content/uploads/2022/10/NRLN-FOCUS-Fall-2022-V1-color-for-web.pdf>

### NRLN President's Forum Video/Podcast on Medicare Enrollment

The NRLN's Series 2022, Episode #4 video/podcast, ***Preparation for Medicare Annual Enrollment Period*** is available on the NRLN website home page at [www.nrln.org](http://www.nrln.org). The objective for this video/podcast is to emphasize the importance of being prepared for the enrollment period October 15 – December 7 and to provide tips on how to do that so you can get the best deal.

After viewing the video or listening to the podcast, you may want to refer to show notes, including slides, to read details that may have passed quickly. Click here to access show notes.

[https://nrln.org/wp-content/uploads/2022/10/Medicare-Enrollment-Podcast-oct152022\\_shownotes.pdf](https://nrln.org/wp-content/uploads/2022/10/Medicare-Enrollment-Podcast-oct152022_shownotes.pdf)

### Cost-of-Living Adjustment (COLA) for 2023 will be 8.7%

The Social Security Administration (SSA) announced today, October 13, that the Cost-of-Living Adjustment (COLA) will increase 8.7% in 2023.

The 8.7% COLA will begin with benefits payable to more than 65 million Social Security beneficiaries in January 2023. Increased payments to more than 7 million SSI beneficiaries will begin on December 30, 2022. (Some people receive both Social Security and SSI benefits.)

The maximum amount of earnings subject to the Social Security tax (taxable maximum) will increase to \$160,200.

## **Blockbuster New York Times Article on Exploitation of Medicare Advantage**

For several years I have researched and written about how Medicare Advantage (MA) has been using federal government subsidies to offer special benefits that are denied to original Medicare enrollees. In my latest position paper (August 17, 2022), I noted that MA will cost taxpayers \$53 billion in 2022 and the projection is that by 2030 the costs will be \$100.8 billion!

The 2022 MedPAC report to Congress stated: "Aggregate Medicare payments to Medicare Advantage plans have never been lower than FFS Medicare spending." MA payments per enrollee were 104% of original Medicare's FFS (Fee-for-Service) in 2022.

I reported in the paper that MedPAC's 2022 Annual Report claims that "The current state of quality reporting [insurers' Quality Bonus Plan] is such that the Commission's annual updates can no longer provide an accurate description of the quality of care in MA."

I note the above information as a precursor to what I want to share with you from an October 8 New York Times article with the headline '*The Cash Monster Was Insatiable: How Insurers Exploited Medicare for Billions*'. (I am not sharing a link to the article because the Times requires a subscription to read articles. The full text of the article is not being provided because it would be a violation of the Times' copyright.)

The New York Times review of dozens of fraud lawsuits, inspector general audits and investigations by watchdogs shows how major health insurers exploited the Medicare Advantage program to inflate their profits by billions of dollars.

### **The Times article cited:**

The health system Kaiser Permanente called doctors in during lunch and after work and urged them to add additional illnesses to the medical records of patients they hadn't seen in weeks. Doctors who found enough new diagnoses could earn bottles of Champagne, or a bonus in their paycheck.

Anthem, a large insurer now called Elevance Health, paid more to doctors who said their patients were sicker. And executives at UnitedHealth Group, the country's largest insurer, told their workers to mine old medical records for more illnesses — and when they couldn't find enough, sent them back to try again.

Each of the strategies — which were described by the Justice Department in lawsuits against the companies — led to diagnoses of serious diseases that might have never existed. But the diagnoses had a lucrative side effect: They let the insurers collect more money from the federal government's Medicare Advantage program.

The program devised to help lower health care spending has instead become substantially more costly than the traditional government program it was meant to improve.

Eight of the 10 biggest Medicare Advantage insurers — representing more than two-thirds of the market — have submitted inflated bills, according to the federal audits. And four of the five largest players — UnitedHealth, Humana, Elevance and Kaiser — have faced federal lawsuits alleging that efforts to over diagnose their customers crossed the line into fraud. The fifth company, CVS Health, which owns Aetna, told investors its practices were being investigated by the Department of Justice.

In statements, most of the insurers disputed the allegations in the lawsuits and said the federal audits were flawed. They said their aim in documenting more conditions was to improve care by accurately describing their patients' health.

The Times reported that the additional diagnoses led to \$12 billion in overpayments in 2020, according to an estimate from the group that advises Medicare on payment policies. Another estimate, from a former top government health official, suggested the overpayments in 2020 were double that, more than \$25 billion.

## **NRLN Legislative Committees' Work**

The NRLN's Legislative Advisory Committee (LAC) composed of Judy Stenberg, Chairwoman, Deb Morrissett, Joe Mazzei and Al Duscher submitted the following bills for the Legislative Action Planning Committee (LAPC) to consider for action during its September 12 conference call. The LAPC includes Bill Kadereit, Chairman, Judy Stenberg, Alyson Parker and Ed Beltram. The LAPC's actions included:

**H.R.8188/S.4449 – Saving Access to Laboratory Services Act**, would protect American seniors' access to laboratory services that are threatened by Medicare payment cuts. These cuts may threaten access to critical testing for American's seniors. Seniors with chronic conditions and those living in underserved areas could face the greatest challenges. In addition, the yearly cuts may result in physician offices no longer offering laboratory tests and independent laboratories being forced to close.

-- Very few bills will be voted on by the House and Senate before the end of the 117th Congress on December 31, 2022. For this reason, the LAPC decided to request in January 2023 that the **Saving Access to Laboratory Services Act** be reintroduced by Representative Bill Pascrell, Jr. (NJ-09), provided he is reelected on November 8. Because the Senate sponsor of the bill, Senator Richard Burr (NC), is retiring, the NRLN will ask his successor to reintroduce the bill in the Senate in the 118th Congress.

**H.R.8800/S.3314 – Supporting Medicare Providers Act**, In the summer of 2022, the Centers for Medicare and Medicaid Services (CMS) released the Calendar Year 2023 Medicare Physician Fee Schedule Proposed Rule. The regulation includes a 4.4% cut to the conversion factor used in determining payment for codes billed for care provided to Medicare beneficiaries, resulting in payment reductions for a wide range of providers. Passage of this bill would avert the 4.4% reduction.

-- LAPC requested that Ed Beltram determine whether the Medicare Physician Fee Schedule Proposed Rule was still open for an NRLN response to oppose the 4.4%. He learned that the comment period closed on September 6, 2022. CMS' final ruling is expected in early November. The NRLN will watch for the final rule to learn whether the 4.4% reduction is reduced or eliminated.

**H.R.82/S.1302 Social Security Fairness Act of 2021**, would repeal provisions that reduce Social Security benefits for individuals who receive other benefits, such as a pension from a state or local government. The bill eliminates the Government Pension Offset (**GPO**), which in various instances reduces Social Security benefits for spouses, widows, and widowers who also receive government pensions of their own. The bill also eliminates the Windfall Elimination Provision (**WEP**), which in some instances reduces Social Security benefits for individuals who also receive a pension or disability benefit from an employer that did not withhold Social Security taxes.

-- The LAC pointed out to the LAPC that : (1) Social Security's current financial situation and their analysis that the repeal of WEP and GPO would accelerate the insolvency of Social Security by one year, (2) CBO's estimate that the repeal would add \$200 billion of additional benefit payments over a ten year period, and (3) there is a broader Social Security bill, Social Security 2100 Act which includes in it WEP and GPO. The LAPC Accepted the LAC's recommendation to Table and Monitor the Social Security Fairness Act of 2021. The bill will die at the end of the 117th Congress on December 31, 2022.)

## **Key News Articles Posted in October**

During October 52 links to news articles related to retirement issues were researched and posted daily IN THE NEWS on the NRLN website home page. The headlines below are links to the articles. Or read the articles at [www.nrln.org](http://www.nrln.org) under IN THE NEWS in the right column. Scroll down the right column and click on the headline to access the article you want to read. Below are some of the headline links.

**[A new drug seeks 'true revenge' on COVID by turning the virus against itself](#) - Oct 03**

*[Nursing Home Surprise: Advantage Plans May Shorten Stays to Less Time Than Medicare Covers](#)* – Oct 4

**[Study analyzes the benefits and harms of prior authorization policies for Medicare](#) – Oct 3**

*[Exercise caution with zero-premium Medicare Advantage plans](#)* – Oct. 5

**[How U.S. House Democrats Want To Bolster Social Security](#) – Oct. 5**

*[What Everyone Gets Wrong About the Future of Social Security](#)* – Oct 6

**[Senate Republican bill would repeal drug pricing law](#) – Oct 7**

*[Sticking with your Medicare plan this open enrollment season? You could pay a hefty price.](#)* – Oct 7

**['Straight Up Fraud': Data Confirms Private Insurers Use Medicare Advantage to Steal Billions](#) – Oct 9**

*[Medicare's annual fall enrollment period starts Oct. 15. Here's what you need to know](#)* – Oct 10

**[The Most Common Medicare Mistakes and How to Avoid Them](#) – Oct 10**

*[How Much Should You Pay in Medicare Out-of-Pocket Costs?](#)* – Oct 10

**[Congress is still considering changes to the retirement system, including catch-up contributions](#) – Oct 10**

*[Medicare fraud warning signs](#)* – Oct 11

**[How to change Medicare plans — and why you might want to](#) – Oct 12**

*[What Is a Medigap Supplemental Plan and Who Needs One?](#)* – Oct 12

**[You Won't Pay For Medicare Vaccines In 2023](#) ~ Oct 13**

*[How Social Security works and what to know about its future](#)* ~ Oct 13

**[Biden to sign order seeking new prescription drug cost savings](#) ~ Oct 14**

*[House progressive bill wants to take Medicare out of Medicare Advantage's name](#)* ~ Oct 14

**[Scalise: Dems Promote 'Red Herring' With Social Security Accusation](#) ~ Oct 16**

*[Biden Orders HHS To Report Plans On Lowering Drug Prices](#)* ~ Oct 17

**[How to change Medicare plans — and why you might want to](#) ~ Oct 18**

*[Even Higher Social Security Will Be No Match For Future Healthcare Costs, Says Report](#)* ~ Oct 19

**[Mayo Clinic Warns It Won't Take Most Medicare Advantage Plans](#) – Oct 20**

*[Uptake Of Covid Boosters Slows, Even Among Older Americans](#)* ~ Oct 24

**[Feel Sick After Your Covid Vaccine? That's A Good Sign, Study Finds](#)** ~ Oct 25

*[Politicians Are Arguing Again About Social Security. That's A Good Thing.](#)* ~ Oct 26

**[Commentary: Social Security Trust Fund Will Be Exhausted in 12 Years](#)** ~ Oct 27

*[35% Of Americans Deterred From Healthcare Without Price Information, New Survey Shows](#)* ~ Oct 29

**[CMS rule seeks to curb delays in Medicare coverage, expands special enrollment periods](#)** ~ Oct 31