

Committee			
Number	Senator	Summary	Offset
181	Rockefeller C1	Apply health insurance market reforms to the large group and self-insured market effective in 2013	Capping itemized deductions at 35%
182	Rockefeller C2	Immediately require a prohibition on pre-existing condition exclusions for children	Capping itemized deductions at 35%
183	Rockefeller C3	Immediate elimination of annual and lifetime limits for all new policies offered in the exchange and a phase-in of the elimination of annual and lifetime limits on grandfathered/existing plans	Capping itemized deductions at 35%
184	Rockefeller C4	Universal 24-hour health coverage	None required
185	Rockefeller C5	Strike state exchanges, multiple competing exchanges, and regional exchanges, and create one national exchange	This amendment should save money
186	Rockefeller C6	Consumers Health Care Act (S.1278), as modified	None required
187	Rockefeller C7	Establishment and administration of a public health insurance option as an exchange-qualified health benefits plan	None required
188	Rockefeller C8	More strictly limit total out-of-pocket costs for all individuals	Capping itemized deductions at 35%
189	Rockefeller C9	Amend the indexing for premium credit	Capping itemized deductions at 35%
190	Rockefeller C10	Increase the actuarial value of benefits for plans offered in the exchange	Capping itemized deductions at 35%
191	Rockefeller C11	Strike health care cooperatives	None required
192	Rockefeller C12	Insurance transparency and oversight	Capping itemized deductions at 35%
193	Rockefeller C13	Insurance transparency and oversight	Capping itemized deductions at 35%
194	Rockefeller C14	Elimination of state mandates	This amendment should save money
195	Rockefeller C15	Providing a real choice for low-income populations to keep current Medicaid coverage	This amendment should save money

196	Rockefeller C16	Increase Medicaid eligibility to 150% of poverty	This amendment should save money
197	Rockefeller C17	Countercyclical Medicaid funding for states	Capping itemized deductions at 35%
198	Rockefeller C18	Addressing Medicare's liability to state Medicaid programs	Capping itemized deductions at 35%
199	Rockefeller/ Menendez C19	Restore Medicaid for individuals who are lawfully present in the U.S.	Costs savings derived by ensuring legal immigrants have access to Medicaid and not the exchange
200	Rockefeller C20	Repeal of the Deficit Reduction Act	This amendment should save money
201	Rockefeller/ Hatch C21	Remove the Children's Health Insurance Program (CHIP) from the exchange	Elimination of Title I, Subtitle E
202	Rockefeller C22	Universal coverage for children	This amendment should save money
203	Rockefeller C23	Require Medicaid managed care provisions to accept in-network payment rates	This amendment should save money
204	Rockefeller C24	Require the Department of Justice to do an annual evaluation of state compliance with federal Olmstead laws	This amendment should have no scoring impact
205	Rockefeller C25	Improve the coverage and care-coordination for individuals eligible for both Medicare and Medicaid	None required
206	Rockefeller C26	Allow early retirees between ages 55 and 64 to buy into Medicare	Capping itemized deductions at 35%
207	Rockefeller C27	Addition of a new Subtitle J - Advance care planning and compassionate care	Capping itemized deductions at 35%
208	Rockefeller C28	Addition of a new Subtitle J - Advance care planning and compassionate care	Capping itemized deductions at 35%
209	Rockefeller C29	Medicare benefit improvements	Capping itemized deductions at 35%
210	Rockefeller C30	Allowing patients to have more control over their own care	This amendment should save money
211	Rockefeller C31	Clarifying the definition of medical assistance	No offset necessary

212	Conrad C1	Immediate premium relief in the small group market	TBD
213	Bingaman C1	Establishes a coordinated system of eligibility determination for Medicaid, tax credits, and CHIP	A commensurate increase in the annual insurance fee
214	Bingaman C2	Requires that health insurance provided through the health exchange is adequate to meet the needs of children	If necessary, a commensurate increase in the annual insurance fee
215	Bingaman C3	Requires states to provide the average level of CHIP cost-sharing provided by states	If necessary, a commensurate increase in the annual insurance fee
216	Bingaman C4	Requires the Secretary of HHS to establish benchmarks tied to the receipt of enhanced federal payments for Medicaid expansion population	Budget neutral
217	Bingaman C5	Allows individuals to seek ombudsman services under certain conditions	Budget neutral
218	Bingaman C6	Clarifies that the Secretary of HHS will establish alternative income documentation that may be provided to determine income eligibility for individuals and families who have not filed a tax return in the prior tax year	Anticipated to be budget neutral
219	Bingaman C7	Removes requirement that individuals must "present" affordability waivers to employers	Budget neutral
220	Bingaman C8	Ensures that benefit categories described in statute are further defined by the Secretary of HHS to protect against insurance industry abuses in interpreting benefit categories	Budget neutral
221	Bingaman C9	Allows exchanges to enter into contracts with Medicaid agencies in determining eligibility	Budget neutral or possibly reduces spending
222	Bingaman C10	Strikes "Section 1937" provision, which would permit states to discriminate in providing benefits to new Medicaid expansion populations	Commensurate increase in annual fee on health insurance providers
223	Bingaman C11	Clarifies that individuals are permitted to update eligibility information for the purposes of receiving federal healthcare tax credits or Medicaid during the year due to a change in household circumstances within the limits established by the Secretary of HHS	If necessary, a commensurate increase in the annual insurance fee

224	Bingaman C12	Improves actuarial value of plans, cost sharing protections, and premium tax credits	Proportionately increase the annual fees on health insurance providers; manufacturers and importers of branded drugs; medical devices; and clinical laboratories by an amount commensurate with the cost associated with this amendment
225	Bingaman C13	Limits the value of the scope of benefits that may receive subsidized coverage within the health insurance exchanges	Potential to reduce spending
226	Kerry/Schumer C1	Replace the Free Rider provision with an employer mandate	None required
227	Kerry/Snowe/Schumer/Lincoln/Cantwell C2	Modify the small tax business credit to allow non-profits to be eligible	Offset will be provided when amendment is offered
228	Kerry C3	Would allow for the establishment of a "Medicaid Global Payments" demo project in those states that are currently providing premium assistance to low-income individuals through a Section 1115 waiver	Will be offset by closing corporate tax loopholes
229	Kerry C4	Providing an option for medical power of attorney for children aging out of foster care	None required
230	Kerry C5	Medicare patient access to home IVIG treatment	Will be offset by closing corporate tax loopholes
231	Kerry C6	Building a successful public/private partnership to assist exchanges	Will be offset by closing corporate tax loopholes
232	Kerry/Stabenow C7	Reinsurance for early retirees	Will be offset by closing corporate tax loopholes
233	Kerry C8	Empowering state exchanges to be prudent purchasers	Savings from the amendment will be used to improve the premium subsidy in future years
234	Kerry/Menendez C9	Making health coverage more affordable to Low-and Moderate-Income individuals and families	Will be offset by closing corporate tax loopholes
235	Kerry C10	Ensuring that premium tax credits continue to make health insurance affordable	Will be offset by closing corporate tax loopholes

236	Kerry C11	Adjustment to FMAP language to include individuals covered under section 1115 waivers	Will be offset by closing corporate tax loopholes, if necessary
237	Kerry C12	Creating an open, transparent, and inclusive process for establishing benefit standards	None required
238	Kerry C13	Community based outreach for fishermen, farmers, and ranchers	None required
239	Kerry/Hatch C14	Religious non-discrimination in health care	None required
240	Kerry C15	Narrow the age rating band	None required
241	Kerry C16	Improved access to home and community based services under Medicaid	Will be offset by closing corporate tax loopholes
242	Kerry C17	Expand access to Medicare Advantage for ESRD patients	Will be offset by closing corporate tax loopholes
243	Kerry C18	Expand access to Medigap for individuals with disabilities and ESRD	Will be offset by closing corporate tax loopholes
244	Kerry/Schumer C19	Protecting state consumer protections	None required
245	Lincoln C1	To strike the provision in the Chairman's Mark that would allow for multiple exchanges operating in the same state	To be determined
246	Lincoln C2	Modification of small business tax credit wage threshold	Offset will be provided when amendment is offered
247	Lincoln C3	Seasonal worker exclusion	Offset will be provided when amendment is offered
248	Wyden C1	To ensure affordable access to health insurance exchange plans for all Americans	Free proposal would reduce national health spending by \$360 billion over the next 10 years and this reduced health spending would reduce the amount of revenue foregone through the health tax exclusion by \$129.5 billion over that 10-year period. Thus, the amendment should raise revenue.

249	Wyden C2	To increase low-income subsidies to 400% of the Federal Poverty Level and lower cost-sharing	Tax revenue related to Internet gaming authorized to be collected under the Internet Gambling Regulation, Consumer Protection and Enforcement Act
250	Wyden C3	Exchange plans as good as Members of Congress	None required
251	Wyden C4	Seamless portability: exchange plans for life	None required
252	Wyden C5	Seamless portability - no need for COBRA	None required
253	Wyden C6	Equal access to Congressional health benefits for working families to guarantee affordability	None required
254	Wyden C7	Slashing administrative costs of health insurance	None required
255	Wyden C8	Empowering states to be innovative	None required
256	Wyden C9	To limit insurance rating based on age in the individual and group markets	Allow increased the limit on variation of premiums for tobacco use to be increased as necessary
257	Wyden C10	Expanding states access to Home and Community Based-Care	None required
258	Wyden C11	Helping states with extraordinary long waiting lists for Medicaid	None required
259	Wyden C12	Employer fair share contribution	Will result in net savings to Federal government
260	Schumer C1	Level the playing field public option	Increase annual fee on for-profit health insurance providers by amount necessary to offset the increase in spending
261	Schumer/ Cantwell C2	Public option as passed by HELP Committee	None required
262	Schumer C3	Hardship waiver at 7%	No cost anticipated, any savings should be directed to improving affordability in the exchange
263	Schumer C4	Hardship waiver at 5%	No cost anticipated, any savings should be directed to improving affordability in the exchange
264	Schumer C5	Hardship waiver at 3%	No cost anticipated, any savings should be directed to improving affordability in the exchange

265	Schumer C6	Modifications to the penalty for not maintaining insurance	Increase annual fee on manufacturers and importers of branded drugs by amount necessary to offset the increase in spending
266	Schumer C7	Protecting state consumer protections	None required
267	Schumer/ Menendez/ Bingaman C8	Inclusion of Puerto Rico and the territories in the exchange	Increase annual fee on for-profit health insurance providers by amount necessary to offset the increase in spending
268	Schumer C9	Changes to Medicaid DSH reductions and addition of Medicaid DSH report	Increase annual fee on for-profit health insurance providers by amount necessary to offset the increase in spending
269	Schumer C10	Changes to definition of "Newly Eligible" populations to be covered under Medicaid program payments	Increase annual fee on for-profit health insurance providers by amount necessary to offset the increase in spending
270	Schumer C11	Eligibility verification	To be determined
271	Schumer C12	Ensuring availability of innovative health insurance plans	To be determined
272	Schumer C13	Community first choice option	To be determined
273	Stabenow C1	To make insurance affordable for middle-class families	Would both expand the individual portion of the Medicare tax to cover limited investment income, it exempts the first \$10,000 of investment income for singles (\$20,000 for joint filers)
274	Stabenow/ Wyden/Kerry C2	To ensure parity for mental health services within the exchange	No offset needed
275	Stabenow C3	Give states the option of including family planning as part of their Medicaid programs	Budget neutral
276	Stabenow C4	Help our nation's most vulnerable children have access to health and human services	Same language was adopted by the House Energy and Commerce Committee and did not score
277	Stabenow C5	Ensure every American purchasing a plan through the exchange has access to health care provider	Not expected, but if needed the fee on brand-name drug companies would be increased an appropriate amount

278	Stabenow C6	Ensure high quality, specialized care for children and youth with special medical, psychological, social and emotional needs who can accept and respond to the close relationship within a family setting, but whose special needs require more intensive or therapeutic services than are found in traditional foster care	To be determined, same language was included by the House Energy and Commerce Committee
279	Stabenow C7	Allow stand-alone dental and vision plans to offer the required pediatric dental and vision services to be offered in the individual and small group markets including within the insurance exchanges	No cost anticipated
280	Stabenow C8	Ensure all insurance plans conform to the same consumer protections and market rules	No cost anticipated
281	Stabenow/ Menendez C9	Requires that the more than 13 million children enrolled in the CHIP in 2013 are not moved to the exchanges unless it is clear that they will secure coverage that is at least comparable or better to what they have in CHIP so that they are not left worse off by health reform	To the extent necessary, the insurers' fee will be increased
282	Cantwell C1	Incentives for states to offer Home and Community Based Services (HCBS) as a Long-term care alternative to nursing homes for the Medicaid population	A 1.45% surtax on short-term capital gains
283	Cantwell C2	Pharmacy Benefit manager (PBM) transparency for health plans operating in the health insurance exchanges	No offset expected, a sufficient offset to ensure that it is revenue neutral will be provided if necessary
284	Cantwell C3	Increase authorized funding to allow for full national implementation of Aging and Disability Resource Centers (ARDC)	Authorizes funding and therefore does not require an offset
285	Cantwell C4	Provide mandatory funding to allow for full national implementation of Aging and Disability Resource Centers (ADRC)	Necessary offsets will be provided to ensure budget neutrality
286	Cantwell C5	Authorize funding for national implementation of evidence-based wellness and disease prevention programs for older Americans reduce the necessity of institutional care	Amendment authorizes funding and therefore does not require an offset

287	Cantwell C6	Provide for mandatory funding for national implementation of evidence based wellness and disease prevention programs for older Americans to reduce the necessity of institutional care	Necessary offsets will be provided to ensure budget neutrality
288	Cantwell C7	National implementation of current Administration on Aging (AoA) and CMS nursing home diversion projects	Amendment authorizes funding and therefore does not require an offset
289	Cantwell C8	National implementation of current Administration on Aging (AoA) and CMS nursing home diversion projects	Necessary offsets will be provided to ensure budget neutrality
290	Cantwell C9	Provide for coverage in a direct primary care medical home plan, provided that plan is coupled with a quality wrap-around insurance program to cover non-primary care services	None required
291	Cantwell C10	Allow state with "mature co-ops" to apply for federal start-up funding currently authorized in the Mark	None required
292	Cantwell C11	Requires national plans to abide by all state insurance regulations	None required
293	Cantwell C12	Allow manufacturers to provide assistance to individuals enrolled in a Medicare Part D plan	None required
294	Cantwell C13	Clarify the definition of full-time employee for purposes of determining the employer assessment	Assumed in Chairman's Mark
295	Cantwell C14	Reduce the amount of the "Free Rider" penalty by employer contributions into a Health Reimbursement Arrangement	Cost should be negligible, but an appropriate offset will be provided if needed
296	Cantwell C15	Basic health plan	An appropriate offset will be provided if needed
297	Nelson/Kerry C1	Strike Interstate sale of insurance	Budget neutral
298	Nelson C2	Medicaid disproportionate share hospital payments	Budget neutral
299	Nelson/Snowe/G rassley C3	An amendment to clarify how certain provisions in the Chairman's Mark apply to professional employer organizations	Believed to be budget neutral, if not offset will be provided

300	Menendez/ Kerry/ Bingaman/ Schumer C1	Making premiums more affordable	Increase annual fee on health insurance providers by amount necessary to offset the increase in spending
301	Menendez/ Bingaman C2	To allow citizen and lawfully present immigrant children to get affordable health coverage while ensuring that undocumented immigrants do not benefit from the tax credit subsidy	No cost anticipated
302	Menendez C3	Ensuring that FQHCs would not lose revenue when treating newly insured patients gaining coverage through the new Health Insurance Exchanges	No cost anticipated
303	Menendez C4	Ensure and clarify that children qualify as exchange eligible individuals and that there shall be the option of a child-only health insurance option and subsidies in the exchanges	No cost anticipated
304	Menendez C5	Strengthening the insurance appeals process in order to better protect consumers	Increase annual fee on health insurance providers by amount necessary to offset the increase in spending
305	Menendez C6	Protecting consumers in an emergency	No cost anticipated
306	Menendez C7	Providing help with internal appeals	No cost anticipated
307	Menendez C8	Providing help with tax credit appeals	No cost anticipated
308	Menendez C9	Ensuring quality health care for those with autism and other behavioral health conditions	No cost anticipated
309	Menendez C10	Consolidating Medicare coverage of adult vaccines into Part B	Increase annual fee on health insurance providers by amount necessary to offset the increase in spending
310	Menendez C11	To guarantee access to maternity care for young adults who are enrolled in Young Invincible Plans	Increase annual fee on health insurance providers by amount necessary to offset the increase in spending
311	Menendez/ Rockefeller C12	Covering all lawfully present children and pregnant women	Increase annual fee on health insurance providers by amount necessary to offset the increase in spending
312	Menendez C13	Providing a reduction in the out-of-pocket maximum for those between 300%-400% of poverty	No cost anticipated

313	Menendez C14	Support, education, and research for postpartum depression	Increase annual fee on health insurance providers by amount necessary to offset the increase in spending
314	Menendez C15	Applicability of Systematic Alien Verification for Entitlements (SAVE) and ensuring data accuracy to protect U.S. citizens and legal residents	No cost anticipated
315	Menendez C16	To authorize a pilot project for state-based innovations to reduce medical errors	Authorization for discretionary sums that are not yet determined
316	Menendez/ Stabenow C17	Increasing CHIP wrap to 275% of the poverty level	To be determined
317	Carper C1	To Provide workplace wellness tax credits	This amendment shall adjust the AGI threshold upwards by an amount necessary to offset the increase in spending.
318	Carper C2	Encouraging employer-sponsored wellness programs under HIPAA by increasing the premium discount that employers can use to reward employees for participating in wellness programs	None required
319	Carper C3	To establish a virtual health coach program for chronic diseases in Medicaid with demonstration grant program	Increase market basket reduction for all providers by amount necessary to offset the increase in spending
320	Carper C4	To require CMS to increase its public outreach and guidance to states and health care providers regarding Medicaid's coverage of obesity-related services	None required
321	Carper C5	To conduct a study on methods that health plans within the exchange can use to encourage increased meaningful use of electronic health records by health care providers	None required
322	Carper C6	To allow agents and brokers, including existing health exchanges, to play an immediate complementary role to any state or regional based exchange	None required

323	Carper C7	Replace the relevant language in Title I Subtitle C (Benefit Options) and Title I Subtitle D (Personal Responsibility Requirement) with language consistent with requirements established in Title II Subtitle B (Medicaid)	None required
324	Carper C8	To pay for expanded affordability credits by increasing the total value of employer-sponsored health coverage that is subject to the excise tax on high cost insurance	Establishes a threshold amount of the excise tax on high cost insurance of \$6,800 for individual coverage and \$17,500 for family coverage for 2013. Retains for other provisions in the Chairman's Mark relating to the excise tax on high cost insurance.
325	Carper C9	To pay for expanded affordability credits by eliminating the excise tax on high cost insurance and enacting a limit on the value of excludable high-cost employer provided health premiums	Would eliminate the excise tax on high cost insurance by creating new thresholds and may be adjusted to ensure that it raises an amount of revenue equal to the additional cost of this amendment's expansion of premium credits
326	Grassley C1	Preventing increases in health insurance costs	None required
327	Grassley C2	Guarantee the independence of health care co-ops from federal government interference	None required
328	Grassley C3	Require that elected officials and all federal employees purchase coverage through exchanges	None required
329	Grassley C4	Providing consumers with the same health insurance options as Members of Congress	Any savings achieved by this recalculation would be used to lower the overall cost of the entire proposal
330	Grassley C5	Protecting access to Medicare Advantage for rural beneficiaries	None required
331	Grassley C6	Promoting coverage without the use of a government requirement to purchase insurance	Any savings achieved through this amendment are redirected towards other provisions in the Chairman's Mark
332	Grassley C7	Promoting coverage without the use of a government requirement to purchase insurance	Any savings achieved through this amendment are redirected towards other provisions in the Chairman's Mark

333	Grassley C8	Require presentation of identification in applying for Medicaid benefits	None required
334	Grassley C9	Improve access to care for children in Medicaid	Additional cost is paid for by eliminating subsidies provided in the bill to people over 300% of poverty and lowering the overall subsidy amount to a sufficient amount to make up the difference
335	Grassley C10	Guarantee access in Medicaid for children	None required
336	Grassley C11	Protect state budgets from the maintenance of effort mandate	None required
337	Grassley C12	Suspend any employer penalties proposed in Title I Subtitle D of the Chairman's Mark for two years whenever the National Bureau of Economic Research declares an economic recession is occurring	Eliminating any subsidies in the Chairman's Mark for individuals and families between 300 and 400 % of federal poverty level (\$66,150 to \$88,200 for a family of four)
338	Grassley C13	Make sure Medicare beneficiaries do not see a reduction in benefits as a result of the policies proposed in the Chairman's Mark	None required
339	Grassley C14	Reduce federal spending	Any savings achieved by this recalculation would be used to lower the overall cost of the entire proposal
340	Grassley C15	Promoting state flexibility and individual freedom	None required
341	Grassley C16	Promoting state flexibility and innovation	None required
342	Hatch C1	Ensure Americans can keep the coverage they have by keeping premiums affordable	None required
343	Hatch C2	Ensure Americans can keep the coverage they have	None required
344	Hatch C3	Ensure health care savings for American families	None required
345	Hatch C4	Strike the new federally imposed individual mandate and replace it with a state option	Proportionate reduction as needed in spending in the Chairman's Mark
346	Hatch C5	Protect and promote employment for low-income Americans	Proportionate reduction as needed in spending in the Chairman's Mark
347	Hatch C6	Protect and promote employment for low-income Americans	None required

348	Hatch C7	Strike the Federal government-funded Health Care Cooperative under Title I, Subtitle E and direct savings to reduce the deficit	Proportionate reduction as needed in spending in the Chairman's Mark
349	Hatch C8	Automatic enrollment of Members of Congress voting for the Federal government-funded Health Care Cooperative	None required
350	Hatch C9	Create a level-playing field for health care cooperatives	None required
351	Hatch C10	Restoration of funding for abstinence education	Proportionate reduction as needed in spending in the Chairman's Mark
352	Hatch C11	Strike Medicaid Expansion	Proportionate reduction as needed in spending in the Chairman's Mark
353	Hatch C12	Prohibits federal funds under this Mark from being used to pay for assisted suicide and offers conscience protection to providers or plans refusing to offer assisted suicide services	None required
354	Hatch C13	Non-discrimination on abortion and respect for right of conscience	None required
355	Hatch C14	Prohibits authorized or appropriated federal funds under this Mark from being used for elective abortions and plans that cover such abortions	None required
356	Snowe C1	Provision of safety net fallback plan to ensure access to affordable coverage	To be provided
357	Snowe C2	Scale firewall affordability test to protect low income individuals	To be provided at a later date
358	Snowe/Lincoln C3	Expand small business participation in the SHOP exchange	None required
359	Snowe C4	Medicaid expansion phase in option	None required
360	Snowe C5	Medicaid early expansion state maintenance of effort	None required
361	Snowe C6	Set maximum deductible for ESI coverage to ensure individuals access to timely care	No score, and no significant cost anticipated
362	Snowe C7	Expedite insurance market reforms in small group market	None required
363	Snowe C8	Expediting larger employer participation in the SHOP exchanges	None required

364	Snowe C9	Small business health education and awareness grants	None
365	Snowe C10	Continuation of small business participation	No cost anticipated
366	Snowe C11	Require plans in the exchange to cover EPSDT	None required
367	Snowe C12	Change definition of newly eligible	To be provided
368	Kyl C1	Eliminate the Consumer Operated and Oriented Plan (CO-OP) program	None required
369	Kyl C2	Eliminate Federal Funding of the Consumer Operated and Oriented Plan (CO-OP) program	None required
370	Kyl C3	Eliminate the federal advisory board	None required
371	Kyl C4	Prohibit the federal government's takeover of health care	None required
372	Kyl C5	Prohibit the federal government's takeover of health care	None required
373	Kyl C6	Ensuring state flexibility	None required
374	Kyl C7	Creating a web-based marketplace	None required
375	Kyl C8	Increasing consumer choice of insurance options	None required
376	Kyl C9	Ensuring consumer access to catastrophic coverage options	None required
377	Kyl C10	Ensuring consumer choice of health care benefits	None required
378	Kyl C11	Ensuring consumers' choice of insurance options that best meet their health care needs	None required
379	Kyl C12	Establishing a level playing field for grandfathered plans	Would tie the premium tax credit to the lowest cost bronze plan, also eliminate the ability for legal immigrants subject to a five-year waiting period under Medicaid or CHIP to access a tax credit until the waiting period's expiration
380	Kyl C13	Make permanent the Small Business Tax Credit	Would tie the premium tax credit to the lowest cost bronze plan
381	Kyl C14	Clarification that legal immigrants must reside in the U.S. for at least five years in order to be eligible for the tax credit available through the state exchanges	None required

382	Kyl C15	Clarification that real-time information sharing, with appropriate privacy protections, is required among the SSA, DHS and IRS	None required
383	Kyl C16	Allowing the purchase of health insurance across state lines	None required
384	Kyl C17	Increase current limits on HSA contributions	Would tie the premium tax credit to the lowest cost bronze plan
385	Kyl C18	Improved opportunities to rollover funds from Flexible Spending Arrangements (FSA) and Health Reimbursement Arrangements (HRAs) to fund Health Savings Accounts (HSAs)	Would tie the premium tax credit to the lowest cost bronze plan
386	Kyl C19	Catch-up contributions by spouses may be made to one Health Savings Account (HSA)	Would tie the premium tax credit to the lowest cost bronze plan
387	Kyl C20	Expanded definition of "preventive" drugs	Would tie the premium tax credit to the lowest cost bronze plan
388	Kyl C21	Greater flexibility using HSA account to pay expenses	Would tie the premium tax credit to the lowest cost bronze plan
389	Kyl C22	Expanded definition of "qualified medical expenses"	Would tie the premium tax credit to the lowest cost bronze plan
390	Kyl C23	Improve Women's Access to health care services and providers	None required
391	Kyl C24	Improve access to Emergency room services	None required
392	Kyl C25	Medical Liability reform	None required
393	Kyl C26	Ensure that any state receiving funding under Medicaid has requirements for preliminary expert witness testimony and expert qualifications	None required
394	Bunning C1	Equal access to affordable healthcare amendment	Reduce the federal poverty level threshold for premium credits in the bill by the amount necessary, starting with the premium credit for individuals between 300% and 400% of poverty

395	Bunning C2	CO-OP amendment	If needed, amendment will be paid for by reducing the federal poverty level threshold for premium credits in the bill by the amount necessary, starting with the premium credit for individuals between 300% and 400% of poverty
396	Bunning C3	Excise tax exemption	Reduce the federal poverty level threshold for premium credits in the bill by the amount necessary, starting with the premium credit for individuals between 300% and 400% of poverty
397	Bunning C4	Transparency amendment	None required
398	Crapo/Roberts C1	To amend the employer shared responsibility requirement and protect small business	To be provided
399	Crapo/Roberts C2	To prohibit unfunded federal mandates on states	To be provided
400	Ensign C1	Maintain current limits on federal benefits	None required
401	Ensign C2	Ensure that illegal immigrants do not fraudulently receive federal health care tax credits	None required
402	Ensign C3	Protect taxpayers by ensuring that immigrants do not become public charges by requiring an immigrant sponsor's accountable under affidavits of support	None required
403	Ensign C4	Lymphedema amendment	None required
404	Ensign C5	Health account balance protection act	None required
405	Ensign C6	Health savings account coverage protection	None required
406	Ensign C7	Building efforts for wellness and encouraging longer lives #1 amendment	None required
407	Ensign C8	Building efforts for wellness and encouraging longer lives Amendment #2	None required
408	Ensign C9	Ensure that non-smokers are not forced to subsidize smokers	None required
409	Ensign C10	Transparency in Czars	None required
410	Ensign C11	Protect health care for veterans and military service officers	None required

411	Ensign C12	Skin in the Game	None required
412	Ensign C13	Require a CBO certification that "costs will go down by as much as \$2,500 per year," before Chairman's bill takes effect	Offset to be derived from proportionate decrease in certain provisions in the Chairman's bill except for Medicare spending
413	Ensign C14	Protecting states from an unfunded mandate	Offset to be derived from proportionate decrease in certain provisions in the Chairman's bill except for Medicare spending
414	Ensign C15	Protecting states from forced Medicaid expansion	Offset to be derived from proportionate decrease in certain provisions in the Chairman's bill except for Medicare spending
415	Enzi C1	Lowering the cost of health care increasing benefit flexibility	None required
416	Enzi C2	Lowering the cost of health care by increasing benefit flexibility	None required
417	Enzi C3	Ensure American workers are protected from lower wages and job loss	None required
418	Enzi C4	Ensuring Americans are protected from dramatic cost increases	None required
419	Enzi C5	Lowering the cost of health insurance by increasing premium variability	None required
420	Enzi C6	To provide additional choices to individuals who would otherwise be enrolled in Medicaid through expansions in this bill	Reduce exchange subsidies as much as necessary to make this amendment budget neutral starting with subsidies awarded to individuals earning 400% of poverty
421	Enzi C7	Congressional enrollment in Medicaid	None required
422	Enzi C8	Ensure that Medicaid expansions will not take effect until state Medicaid programs can guarantee that enough physicians in the state will actually accept and treat Medicaid patients	None required

423	Enzi C9	To exempt any state that the State's revenue have declined for 2 consecutive fiscal year quarters from any mandatory Medicaid expansions	None required
424	Enzi C10	Prohibit a state from expanding its Medicaid program until it implements program integrity and quality improvement measures	None required
425	Enzi C11	Terminates Medicaid expansions that results in increased costs for a state	None required
426	Enzi C12	To ensure that no mandates on Abortions are prohibited	None required
427	Enzi C13	To ensure that abortions are not paid for with federal funds and for the purchase of supplemental abortion coverage without federal funds	None required
428	Enzi C14	To ensure state abortion laws and regulations are not preempted by provisions in the underlying bill	None required
429	Enzi C15	To ensure that conscience protections are applied	None required
430	Cornyn C1	Ensuring that nothing requires individuals or employers to change the coverage they have	If needed, will be provided at markup
431	Cornyn C2	Promoting personal responsibility	If needed, will be provided at markup
432	Cornyn C3	Ensuring that nothing requires individuals or employers to change the coverage they have	None required
433	Cornyn C4	Promoting Affordable Choices in coverage	None required
434	Cornyn C5	Promoting Affordable Choices in coverage	Request sent to CBO
435	Cornyn C6	Promoting Affordable Choices in coverage	To be provided at markup
436	Cornyn C7	Ensuring the accuracy of punitive taxes	If needed, will be provided at markup
437	Cornyn C8	Limiting the growth of Washington bureaucracy	None required
438	Cornyn C9	Preserving the right of individuals to access quality plans	None required
439	Cornyn C10	Preserving the right of individuals to access innovative plans	None required
440	Cornyn C11	Rewarding healthy behaviors	If needed, will be provided at markup
441	Cornyn C12	Promoting Individual Choice	Reduction in government spending
442	Cornyn C13	Reducing Health Insurance Premiums	If needed, will be provided at markup

443	Cornyn C14	Reducing political influence on the health care cooperatives	None required
444	Cornyn C15	Reducing the political influence with regard to health care cooperatives	None required
445	Cornyn C16	Improving health care cooperatives	None required
446	Cornyn C17	Ensuring the solvency of health care cooperatives	None required
447	Cornyn C18	Ensuring fair competition	None required
448	Cornyn C19	Targeting federal dollars to create affordable choices	None required
449	Cornyn C20	Ensuring fair competition	None required
450	Cornyn C21	Providing choice of health benefits for low-income Americans	Reduce spending on wealthier individuals under the Mark
451	Cornyn C22	Encouraging personal responsibility for all Americans	None required
452	Cornyn C23	Promoting equality between low-income Americans and their elected officials	Reduction in spending
453	Cornyn C24	Promoting equality between low-income Americans and their elected officials	Reduction in spending
454	Cornyn C25	Ensuring that states are able to invest adequate resources in education	None required
455	Cornyn C26	Ensuring that states are able to invest adequate resources in law enforcement	None required
456	Cornyn C27	Ensuring states are able to invest adequate resources to education and law enforcement	None required
457	Cornyn C28	Promoting access to employer-based coverage for Medicaid beneficiaries	If needed, will be provided at markup
458	Cornyn C29	Giving states flexibility to expand their Medicaid programs in a fiscally responsible manner	Request sent to CBO
459	Cornyn C30	Reducing waste, fraud, and abuse in the Medicaid program	None required
460	Cornyn C31	Protecting competition and fighting monopoly in health care	None required
461	Cornyn C32	Preserving American Jobs	None required
462	Cornyn C33	Prohibiting inappropriate business interests in the cooperatives	None required

463	Cornyn C34	Prohibiting inappropriate business interests in the cooperatives	Estimated to save taxpayer dollars
464	Cornyn C35	Allow American families to choose the health insurance that best fits their needs	None required