

Estimated Direct Spending and Revenue Effects of H.R. 6, Substance Use–Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act

HR6-CONF-COMBO_07.XML, September 27, 2018 (2:43 p.m.)

September 27, 2018

2019- 2019-

Millions of dollars, by fiscal year.

2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2023 2028

On September 27, 2018, CBO published an Estimate for H.R. 6 (version OPIOID-CONF\HR6-CONF-COMBO_04.XML, September 25, 2018). This estimate is for an amended version of that bill (HR6-CONF-COMBO_07.XML, September 27, 2018) and includes three additional provisions (sections 4003, 4004, and 5061). On net, the additional provisions are estimated to reduce the unified-budget deficit by \$46 million over the 2019-2028 period. In total, CBO estimates that H.R. 6 would reduce the unified-budget deficit by \$2 million over the same period.

INCREASES OR DECREASES (-) IN DIRECT SPENDING OUTLAYS

TITLE I—MEDICAID PROVISIONS TO ADDRESS

THE OPIOID CRISIS

1001.	At-risk youth Medicaid protection	*	5	5	5	10	10	10	10	10	10	25	75
1002.	Health insurance for former foster youth	0	0	0	0	*	10	21	33	46	61	*	171
1003.	Demonstration project to increase substance use provider capacity under the Medicaid program	13	35	58	67	63	9	2	3	3	3	236	256
1004.	Medicaid drug review and utilization	*	*	1	1	1	1	1	1	1	1	2	5
1006.	Medicaid health homes for substance-use-disorder Medicaid enrollees	94	58	62	56	52	48	43	38	32	25	323	509
1012.	Help for moms and babies	1	2	4	5	5	6	6	6	6	7	17	48

TITLE II—MEDICARE PROVISIONS TO ADDRESS

THE OPIOID CRISIS^a

2001.	Expanding the use of telehealth services for the treatment of opioid use disorder and other substance use disorders	0	1	1	1	2	2	2	3	3	4	4	18
2002.	Comprehensive screenings for seniors	0	1	1	1	1	1	2	2	2	2	4	13
2003.	Every prescription conveyed securely	0	0	-24	-35	-33	-30	-33	-32	-31	-32	-92	-250
2004.	Requiring prescription drug plan sponsors under Medicare to establish drug management programs for at-risk beneficiaries	0	0	0	-7	-7	-7	-8	-8	-9	-10	-13	-55
2005.	Medicare coverage of certain services furnished by opioid treatment programs	0	0	15	20	25	30	35	40	40	45	60	250
2006.	Encouraging appropriate prescribing under Medicare for victims of opioid overdose	0	0	*	*	*	*	*	*	*	*	*	*
2008.	Suspension of payments by Medicare prescription drug plans and MA–PD plans pending investigations of credible allegations of fraud by pharmacies	0	-1	-1	-1	-1	-1	-1	-1	-1	-1	-4	-9

TITLE III—FDA AND CONTROLLED SUBSTANCE PROVISIONS

3201.	Allowing for more flexibility with respect to medication-assisted treatment for opioid use disorders (b)	1	4	7	48	57	55	56	56	56	54	117	395
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TITLE IV—OFFSETS

4001. Promoting value in Medicaid managed care	0	0	-144	-434	-305	-314	-339	-365	-390	-420	-882	-2,710
4002. Requiring reporting by group health plans of prescription drug coverage information for purposes of identifying primary payer situations under the Medicare program	0	-5	-5	-5	-5	-5	-5	-5	-5	-5	-20	-45
4003. Additional religious exemption from health coverage responsibility requirement (b)	-2	-3	-3	-2	-2	-2	-3	-3	-3	-3	-12	-26
4004. Modernizing the reporting of biological and biosimilar products (b, d)												
On-budget	0	-2	-4	-7	-5	-4	-4	-4	-5	-5	-19	-41
Off-budget	0	*	*	*	*	*	*	*	*	*	*	*

TITLE V—OTHER MEDICAID PROVISIONS

5042. Medicaid providers are required to note experiences in record systems to help in-need patients	*	*	*	*	*	*	*	*	*	*	*	*
5052. State option to provide Medicaid coverage for certain individuals with substance use disorders who are patients in certain institutions for mental diseases	0	40	195	366	447	0	0	0	0	0	1,048	1,048
5061. Medicaid Improvement Fund	0	0	22	9	0	0	0	0	0	0	31	31

TITLE VI—OTHER MEDICARE PROVISIONS^a

6042. Opioid use disorder treatment demonstration program	0	0	15	26	24	23	15	4	*	*	66	107
6052. Grants to provide technical assistance to outlier prescribers of opioids (c)	8	19	38	8	4	0	0	0	0	0	75	75
6062. Electronic prior authorization for covered Part D drugs	0	0	*	*	*	*	*	*	*	*	*	*
6064. Expanding eligibility for medication therapy management programs under Part D	0	0	*	*	*	*	*	*	*	*	*	*
6083. Expanding access under the Medicare program to addiction treatment in Federally qualified health centers and rural health clinics (c)	2	4	2	0	0	0	0	0	0	0	8	8

TITLE VII—PUBLIC HEALTH PROVISIONS

	0	0	0	0	0	0	0	0	0	0	0	0
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TITLE VIII—MISCELLANEOUS

8003. Mandatory advance electronic information for postal shipments												
Off-budget outlays	2	3	3	3	3	3	3	3	3	3	14	29
8082. Improving recovery and reunifying families (c)	1	3	3	3	2	2	1	0	0	0	12	15

Total, Changes in On-Budget Direct Spending Outlays	119	161	247	126	335	-167	-200	-223	-245	-265	988	-111
Total, Changes in Direct Spending (Unified-Budget)	121	164	250	129	338	-164	-197	-220	-242	-262	1,002	-82

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INCREASES OR DECREASES (-) IN REVENUES^e

3012.	Notification, nondistribution, and recall of controlled substances	*	*	*	*	*	*	*	*	*	*	*	*
3013.	Single source pattern of imported illegal drugs	*	*	*	*	*	*	*	*	*	*	*	*
3022.	Restricting entrance of illicit drugs	*	*	*	*	*	*	*	*	*	*	*	*
3201.	Allowing for more flexibility with respect to medication-assisted treatment for opioid use disorders (b)												
	On-budget	*	*	-1	-6	-9	-9	-9	-10	-11	-11	-16	-66
	Off-budget	*	*	*	-2	-3	-3	-4	-4	-4	-4	-6	-25
3273.	Amendments	*	*	*	*	*	*	*	*	*	*	*	*
4003.	Additional religious exemption from health coverage responsibility requirement (b)												
	On-budget	*	*	*	*	*	*	*	*	*	*	2	4
	Off-budget	*	*	*	*	*	*	*	*	*	*	1	2
4004.	Modernizing the reporting of biological and biosimilar products (b, d)												
	On-budget	0	*	*	1	*	*	*	*	*	*	2	3
	Off-budget	0	0	*	*	*	*	*	*	*	*	1	1
8023.	Unfair or deceptive acts or practices with respect to substance use disorder treatment service and products	*	*	*	*	*	*	*	*	*	*	*	*
8122.	Criminal penalties	*	*	*	*	*	*	*	*	*	*	*	*
Total, Changes in On-Budget Revenues		*	*	-1	-5	-8	-8	-8	-9	-10	-10	-13	-59
Total, Changes in Revenues (Unified-Budget)		*	*	-1	-7	-11	-11	-12	-13	-13	-14	-18	-81

NET INCREASE OR DECREASE (-) IN DEFICITS FROM REVENUE AND DIRECT SPENDING

Changes in On-Budget Deficits	119	160	247	131	343	-159	-191	-214	-235	-254	1,001	-52
Total, Changes in Deficits (Unified-Budget)	121	163	250	136	349	-153	-185	-208	-228	-248	1,020	-2

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Memorandum:

Budget authority equals outlays for all of the direct spending sections except for the following three provisions:

5061. Medicaid Improvement Fund													
Budget Authority	0	0	31	0	0	0	0	0	0	0	0	31	31
Estimated Outlays	0	0	22	9	0	0	0	0	0	0	0	31	31
6052. Grants to provide technical assistance to outlier prescribers of opioids													
Budget Authority	75	0	0	0	0	0	0	0	0	0	0	75	75
Estimated Outlays	8	19	38	8	4	0	0	0	0	0	0	75	75
6083. Expanding access under the Medicare program to addiction treatment in Federally qualified health centers and rural health clinics													
Budget Authority	8	0	0	0	0	0	0	0	0	0	0	8	8
Estimated Outlays	2	4	2	0	0	0	0	0	0	0	0	8	8
8082. Improving recovery and reunifying families													
Budget Authority	15	0	0	0	0	0	0	0	0	0	0	15	15
Estimated Outlays	1	3	3	3	2	2	1	0	0	0	0	12	15
All other sections													
Budget Authority	110	138	185	110	333	-166	-198	-220	-242	-262		876	-211
Estimated Outlays	110	138	185	110	333	-166	-198	-220	-242	-262		876	-211
Total, Changes in Direct Spending (Unified-Budget)													
Budget Authority	208	138	185	110	333	-166	-198	-220	-242	-262		974	-113
Estimated Outlays	121	164	250	129	338	-164	-197	-220	-242	-262		1,002	-82

Source: Congressional Budget Office and the staff of the Joint Committee on Taxation.

Notes: Components may not sum to totals because of rounding. * = between -\$500,000 and \$500,000.

- Medicare provisions include interactions with Medicare Advantage payments, the effect on Medicare Part A and B premiums, and TRICARE.
- Proposal would affect both direct spending and revenues, which are shown separately.
- Budget authority does not equal outlays; see memorandum.
- On September 25, 2018, the Congress cleared the Patient Right to Know Drug Prices Act (S. 2554). S. 2554 requires that certain agreements settling drug patent disputes between sponsors of biological products be filed with the Federal Trade Commission and the Department of Justice. A provision in section 4004 would extend that reporting requirement to additional settlements. The estimates shown here reflect the incremental effect of that amendment.
- For revenues, positive numbers indicate a decrease in the deficit and negative numbers indicate an increase in the deficit.

FDA = Food and Drug Administration; MA-PD = Medicare Advantage plan that offers prescription drug coverage; TRICARE = the health plan operated by the Department of Defense.