

Preliminary Estimate

June 15, 2018

Estimated direct spending and revenue effects of H.R. 6, the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act as posted on the website for the House Committee on Rules on June 13, 2018

Millions of dollars, by fiscal year	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2018-2023	2018-2028
INCREASES OR DECREASES (-) IN DIRECT SPENDING OUTLAYS													
TITLE I—MEDICAID PROVISIONS TO ADDRESS THE OPIOID CRISIS													
101. At-Risk Youth Medicaid Protection	0	*	5	5	5	10	10	10	10	10	10	25	75
102. Health Insurance for Former Foster Youth	0	0	0	0	0	*	10	21	33	46	61	*	171
103. Demonstration to increase substance use provider capacity under the Medicaid program	0	13	35	58	67	63	9	2	3	3	3	236	256
104. Drug management program for at-risk beneficiaries (a)	0	*	-1	-1	-1	-1	-2	-2	-2	-2	-2	-4	-13
105. Medicaid drug review and utilization (a)	0	*	*	1	1	1	1	1	1	1	1	2	5
106. Guidance to improve care for infants with neonatal abstinence syndrome and their mothers and GAO report (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
107. Medicaid health homes for opioid-use-disorder Medicaid enrollees (a)	0	94	58	62	56	52	48	43	38	32	25	323	509
TITLE II—MEDICARE PROVISIONS TO ADDRESS THE OPIOID CRISIS													
201. Authority not to apply certain Medicare telehealth requirements in the case of certain treatment of a substance use disorder or co-occurring mental health disorder	0	2	*	*	*	1	1	1	2	2	2	4	11
202. Encouraging the use of non-opioid analgesics for the management of post-surgical pain	0	0	0	0	10	20	15	25	30	35	45	30	180
203. Requiring a review of current opioid prescriptions for chronic pain and screening for opioid use disorder to be included in the Welcome to Medicare initial preventive physical examination	0	0	*	1	1	1	1	1	1	1	1	2	5
204. Modification of payment for certain outpatient surgical services (a)	0	0	30	30	25	20	3	0	0	0	0	105	108
205. Requiring e-prescribing for coverage of covered part D controlled substances (b)	0	0	0	-24	-35	-33	-30	-33	-32	-31	-32	-92	-250
206. Requiring PDPs under Medicare to establish drug management programs for at-risk beneficiaries (b)	0	0	0	-6	-7	-7	-7	-8	-8	-9	-10	-19	-60
207. Medicare coverage of certain services furnished by opioid treatment programs (c)	0	0	0	15	20	25	30	35	40	40	45	60	250
TITLE III—OTHER HEALTH PROVISIONS TO ADDRESS THE OPIOID CRISIS													
301. Clarifying FDA regulation of non-addictive pain and addiction therapies (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
302. Surveillance and Testing of Opioids to Prevent Fentanyl Deaths (a)	0	0	0	0	0	0	0	0	0	0	0	0	0
303. Allowing for more flexibility with respect to medication-assisted treatment for opioid use disorders (a, c, e)	0	1	4	7	48	57	55	56	56	56	54	117	395

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TITLE IV—OFFSETS													
401. Promoting value in Medicaid managed care	0	0	0	-144	-359	-305	-254	-339	-365	-390	-420	-807	-2,575
402. Extending period of application of Medicare secondary payer rules for individuals with ESRD (e)	0	0	-27	-37	-38	-38	-39	-40	-41	-42	-43	-140	-344
403. Requiring reporting by group health plans of prescription drug coverage information for purposes of identifying primary payer situations under the Medicare program	0	0	-5	-5	-5	-5	-5	-5	-5	-5	-5	-20	-45
Total, Changes in Direct Spending Outlays	0	111	100	-38	-211	-139	-154	-232	-240	-254	-265	-177	-1,322

INCREASES OR DECREASES (-) IN REVENUES^d

303. Allowing for more flexibility with respect to medication-assisted treatment for opioid use disorders (a, c, e)													
On-budget	0	*	*	-1	-6	-9	-9	-9	-10	-11	-11	-16	-66
Off-budget	0	*	*	*	-2	-3	-3	-4	-4	-4	-4	-6	-25
402. Extending period of application of Medicare secondary payer rules for individuals with ESRD (e)													
On-budget	0	0	-3	-5	-6	-6	-6	-6	-7	-7	-8	-20	-54
Off-budget	0	0	-1	-2	-2	-2	-2	-2	-2	-3	-3	-8	-20
Total, Changes in On-Budget Revenues	0	*	-3	-6	-11	-14	-15	-15	-17	-18	-18	-35	-119
Total, Changes in Unified-Budget Revenues	0	*	-5	-9	-16	-20	-21	-21	-23	-24	-25	-50	-164

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

Changes in On-Budget Deficits	0	111	104	-32	-199	-125	-140	-216	-223	-236	-247	-141	-1,203
Total, Changes in Unified-Budget Deficits	0	111	105	-29	-195	-119	-134	-210	-217	-230	-241	-127	-1,158

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

Notes: Components may not add to totals because of rounding.

Medicare provisions include interactions with MA payments, the effect on Medicare Part A and B premiums, and TRICARE.

* = between -\$500,000 and \$500,000.

(a) This provision would affect spending subject to appropriation, but CBO has not yet completed that estimate.

(b) This estimate incorporates interactions between Sections 205 and 206. The effect of those interactions is reflected in the estimate for Section 206.

(c) This estimate incorporates interactions between Sections 207 and 303. The effect of those interactions is reflected in the estimate for Section 207.

(d) For revenues, positive numbers indicate a decrease in the deficit and negative numbers indicate an increase in the deficit.

(e) Proposal would affect both direct spending and revenues, which are shown separately.

ESRD = End-stage renal disease; FDA = Food and Drug Administration; GAO = Government Accountability Office; MA = Medicare Advantage; PDP = Prescription drug plan; TRICARE = the health plan operated by the Department of Defense.