H.R. 3631, the "Medicare Premium Fairness Act" Protects All Seniors From Medicare Part B Premium Increases

Background

Currently, 42 million seniors and disabled individuals are enrolled in Medicare Part B. The standard Part B premium for 2009 is \$96.40 per month and for most beneficiaries is deducted from their Social Security checks. (The premium is higher for individuals with incomes over \$85,000 or \$170,000 for couples.) By law, the premium is calculated each year to cover approximately 25 percent of the cost of the Medicare Part B program.

Premiums would normally increase to roughly \$103 next year to cover 25 percent of the program's cost. However, a current law "hold harmless" policy ensures that Part B increases are not larger than Social Security COLA increases, so enrollees' Social Security checks do not decrease. Because of the recession, next year's Social Security cost-of-living increase (COLA) is projected to be zero and checks will not increase; the hold harmless means that Part B premiums would not increase in 2010 for 73 percent of seniors.

However, about 27 percent of enrollees are not currently held harmless, including low-income dual eligibles (18%), higher-income Medicare beneficiaries (5%), new Medicare enrollees (3%) and enrollees whose Medicare premiums are not deducted from Social Security checks (2%). Because of the way the law is written, premiums for the enrollees who are not currently held harmless would be disproportionately increased to \$110-\$120 per month to make up for those enrollees who are held harmless, absent legislative action. This is the first time that such an interaction has occurred.

H.R. 3631

This legislation would extend the current hold harmless policy equally to all Medicare enrollees, meaning that 2010 Part B premiums would remain at \$96.40, and no seniors would see a decrease in their Social Security checks as a result of an increase in the standard Part B premium. H.R. 3631 passed the House of Representatives on September 24, 2009 by a vote of 406-18.

CBO estimates the cost of the bill at \$2.8 billion for 2010. It is fully paid for and meets PAY-GO requirements using financing from the Medicare Improvement Fund.