

A P P E N D I X

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**Commissioners' voting
on recommendations**



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In the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000, the Congress required MedPAC to call for individual commissioner votes on each recommendation and to document the voting record in its reports. The information below satisfies that mandate.

Chapter 1: Context for Medicare payment policy

No recommendations

Chapter 2: Assessing payment adequacy and updating payments in fee-for-service Medicare

No recommendations

Chapter 3: Hospital inpatient and outpatient services

The Congress should:

- for 2026, update the 2025 Medicare base payment rates for general acute care hospitals by the amount specified in current law plus 1 percent; and
- redistribute existing disproportionate-share-hospital and uncompensated-care payments through the Medicare Safety-Net Index (MSNI)—using the mechanism described in our March 2023 report—and add \$4 billion to the MSNI pool.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Konetzka, Liao, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

No: Kan, Miller

Chapter 4: Physician and other health professional services

The Congress should:

- for calendar year 2026, replace the current-law updates to Medicare payment rates for physician and other health professional services with a single update equal to the projected increase in the Medicare Economic Index minus 1 percentage point; and
- enact the Commission's March 2023 recommendation to establish safety-net add-on payments under the physician fee schedule for services delivered to low-income Medicare beneficiaries.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

Chapter 5: Outpatient dialysis services

For calendar year 2026, the Congress should update the 2025 Medicare base payment rate for outpatient dialysis services by the amount determined under current law.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Konetzka, Liao, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

Abstain: Kan, Miller

Chapter 6: Skilled nursing facility services

For fiscal year 2026, the Congress should reduce the 2025 Medicare base payment rates for skilled nursing facilities by 3 percent.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

Chapter 7: Home health care services

For calendar year 2026, the Congress should reduce the 2025 Medicare base payment rate for home health agencies by 7 percent.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

Chapter 8: Inpatient rehabilitation facility services

For fiscal year 2026, the Congress should reduce the 2025 Medicare base payment rate for inpatient rehabilitation facilities by 7 percent.

Yes: Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch

Chapter 9: Hospice services

For fiscal year 2026, the Congress should eliminate the update to the 2025 Medicare base payment rates for hospice.

Yes: *Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch*

Chapter 10: Ambulatory surgical center services: Status report

No recommendations

Chapter 11: The Medicare Advantage program: Status report

No recommendations

Chapter 12: The Medicare prescription drug program (Part D): Status report

No recommendations

Chapter 13: Eliminating Medicare's coverage limits on stays in freestanding inpatient psychiatric facilities

The Congress should eliminate both:

- the 190-day lifetime limit on covered days in freestanding inpatient psychiatric facilities; and
- the reduction of the number of covered inpatient psychiatric days available during the initial benefit period for new Medicare beneficiaries who received care from a freestanding inpatient psychiatric facility on and in the 150 days prior to their date of Medicare entitlement.

Yes: *Barr, Casale, Casalino, Chernew, Cherry, Damberg, Dusetzina, Kan, Konetzka, Liao, Miller, Navathe, Poulsen, Rambur, Riley, Sarran, Upchurch*