

insurers to redesign plans to fall beneath the threshold. Enrollees would have to pay more money for many services out of their own pockets, and that would encourage them to think twice about whether an expensive or redundant test was worth it. Economists project that most employers would shift money from expensive health benefits into wages. The House bill has no similar tax. The final legislation should.

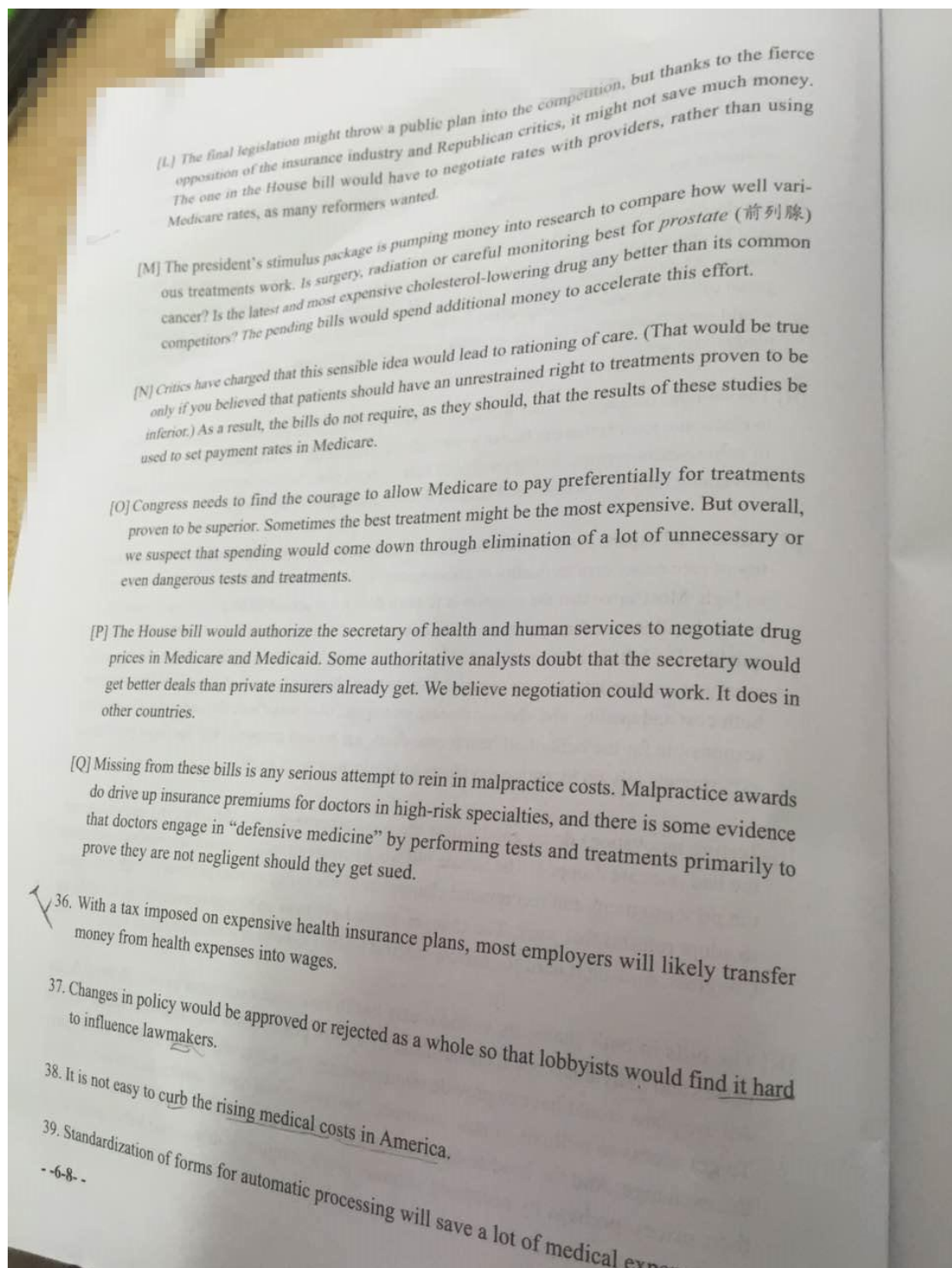
[G] Any doctor who has wrestled with multiple forms from different insurers, or patients who have tried to understand their own parade of statements, know that simplification ought to save money. When the health insurance industry was still cooperating in reform efforts, its trade group offered to provide standardized forms for automated processing. It estimated that step would save hundreds of billions of dollars over the next decade. The bills would lock that pledge into law.

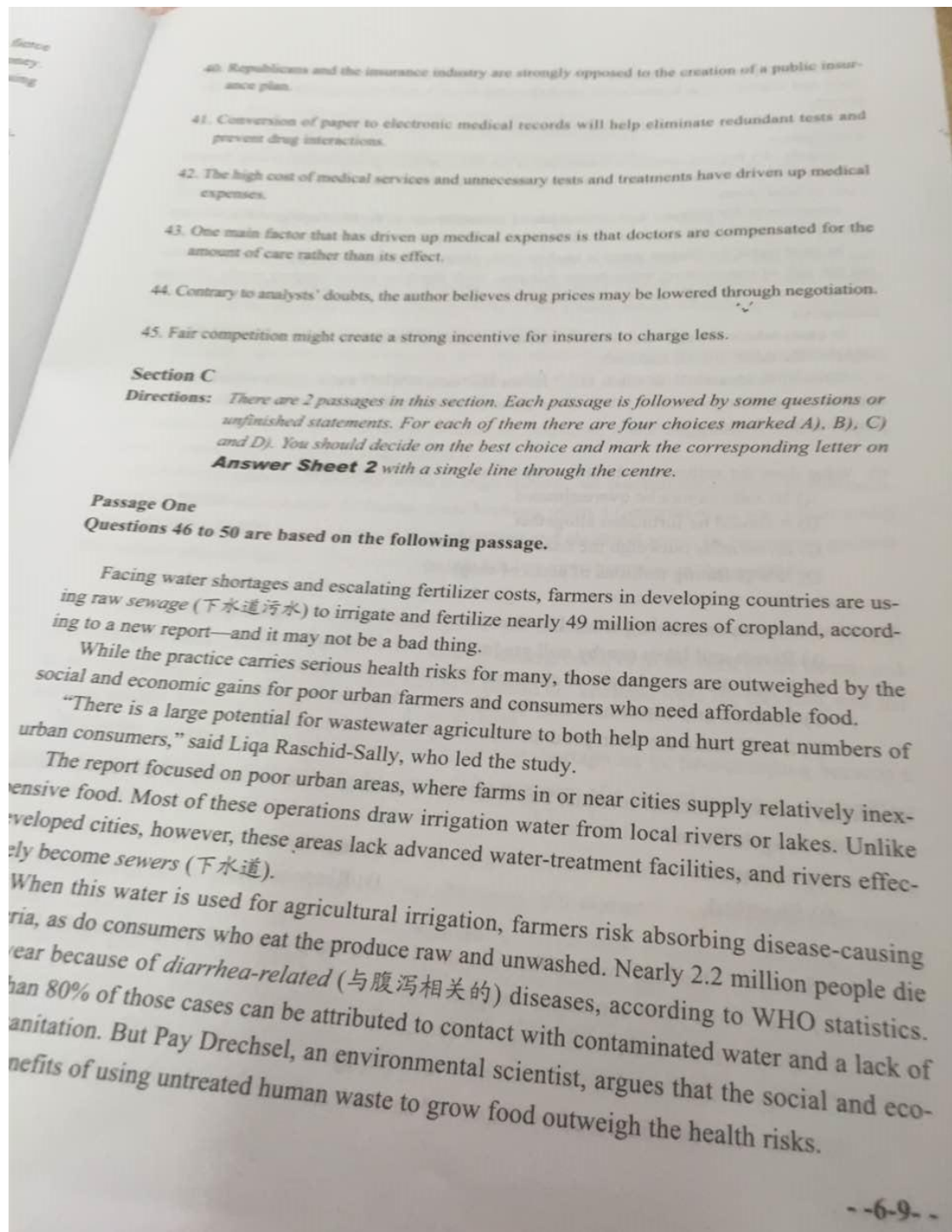
[H] The stimulus package provided money to convert the inefficient, paper-driven medical system to electronic records that can be easily viewed and transmitted. This requires open investments to help doctors convert. In time it should help restrain costs by eliminating redundant tests, preventing drug interactions, and helping doctors find the best treatments.

[I] Virtually all experts agree that the fee-for-service system — doctors are rewarded for the quantity of care rather than its quality or effectiveness — is a primary reason that the cost of care is so high. Most agree that the solution is to push doctors to accept fixed payments to care for a particular illness or for a patient's needs over a year. No one knows how to make that happen quickly. The bills in both houses would start pilot projects within Medicare. They include such measures as accountable care organizations to take charge of a patient's needs with an eye on both cost and quality, and chronic disease management to make sure the seriously ill, who are responsible for the bulk of all health care costs, are treated properly. For the most part, these experiments rely on incentive payments to get doctors to try them.

[J] Testing innovations do no good unless the good experiments are identified and expanded and the bad ones are dropped. The Senate bill would create an independent commission to monitor the pilot programs and recommend changes in Medicare's payment policies to urge providers to adopt reforms that work. The changes would have to be approved or rejected as a whole by Congress, making it hard for narrow-interest lobbies to bend lawmakers to their will.

[K] The bills in both chambers would create health insurance exchanges on which small businesses and individuals could choose from an array of private plans and possibly a public option. All the plans would have to provide standard benefit packages that would be easy to compare. To get access to millions of new customers, insurers would have a strong incentive to sell on the exchange. And the head-to-head competition might give them a strong incentive to lower their prices, perhaps by accepting slimmer profit margins or demanding better deals from providers.





40. Republicans and the insurance industry are strongly opposed to the creation of a public insurance plan.
41. Conversion of paper to electronic medical records will help eliminate redundant tests and prevent drug interactions.
42. The high cost of medical services and unnecessary tests and treatments have driven up medical expenses.
43. One main factor that has driven up medical expenses is that doctors are compensated for the amount of care rather than its effect.
44. Contrary to analysts' doubts, the author believes drug prices may be lowered through negotiation.
45. Fair competition might create a strong incentive for insurers to charge less.

### Section C

**Directions:** *There are 2 passages in this section. Each passage is followed by some questions or unfinished statements. For each of them there are four choices marked A), B), C) and D). You should decide on the best choice and mark the corresponding letter on **Answer Sheet 2** with a single line through the centre.*

#### Passage One

Questions 46 to 50 are based on the following passage.

Facing water shortages and escalating fertilizer costs, farmers in developing countries are using raw sewage (下水道污水) to irrigate and fertilize nearly 49 million acres of cropland, according to a new report—and it may not be a bad thing.

While the practice carries serious health risks for many, those dangers are outweighed by the social and economic gains for poor urban farmers and consumers who need affordable food. "There is a large potential for wastewater agriculture to both help and hurt great numbers of urban consumers," said Liqa Raschid-Sally, who led the study.

The report focused on poor urban areas, where farms in or near cities supply relatively inexpensive food. Most of these operations draw irrigation water from local rivers or lakes. Unlike developed cities, however, these areas lack advanced water-treatment facilities and often become sewers (下水道).

