

105TH CONGRESS
1ST SESSION

H. R. 76

To amend title 10, United States Code, to permit covered beneficiaries under the military health care system who are also entitled to Medicare to enroll in the Federal Employees Health Benefits program.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 7, 1997

Mr. MORAN of Virginia (for himself, Mr. WATTS of Oklahoma, Mr. HEFNER, and Mr. DEAL of Georgia) introduced the following bill; which was referred to the Committee on National Security, and in addition to the Committee on Government Reform and Oversight, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title 10, United States Code, to permit covered beneficiaries under the military health care system who are also entitled to Medicare to enroll in the Federal Employees Health Benefits program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Health Care Commit-
5 ment Act”.

1 **SEC. 2. INCLUSION OF MEDICARE-ELIGIBLE COVERED**
2 **BENEFICIARIES IN FEDERAL EMPLOYEES**
3 **HEALTH BENEFITS PROGRAM.**

4 (a) FEHBP OPTION.—(1) Chapter 55 of title 10,
5 United States Code, is amended by adding at the end the
6 following new section:

7 **“§ 1107. Health care coverage through Federal Em-**
8 **ployees Health Benefits program**

9 “(a) FEHBP OPTION.—The Secretary of Defense,
10 after consulting with the other administering Secretaries,
11 shall enter into an agreement with the Office of Personnel
12 Management under which a Medicare-eligible covered ben-
13 eficiary described in subsection (b) will be offered an op-
14 portunity to enroll in a health benefits plan offered
15 through the Federal Employee Health Benefits program
16 under chapter 89 of title 5, in addition to receiving health
17 care services under this chapter through a treatment facil-
18 ity of the uniformed services, the Civilian Health and Med-
19 ical Program of the Uniformed Services, or the TRICARE
20 program. The agreement may provide for limitations on
21 enrollment of Medicare-eligible covered beneficiaries in the
22 Federal Employee Health Benefits program if the Office
23 of Personnel Management determines the limitations are
24 necessary to allow for adequate planning for access for
25 services under the Federal Employee Health Benefits pro-
26 gram.

1 “(b) MEDICARE-ELIGIBLE COVERED BENEFICIARY
2 DESCRIBED.—A Medicare-eligible covered beneficiary re-
3 ferred to in subsection (a) is a covered beneficiary under
4 this chapter who for any reason is or becomes entitled to
5 hospital insurance benefits under part A of title XVIII of
6 the Social Security Act (42 U.S.C. 1395c et seq.). The
7 covered beneficiary shall not be required to satisfy any eli-
8 gibility criteria specified in chapter 89 of title 5 as a condi-
9 tion for enrollment in a health benefits plan offered
10 through the Federal Employee Health Benefits program
11 pursuant to subsection (a).

12 “(c) CONTINUED PARTICIPATION IN UNIFORMED
13 SERVICES HEALTH SYSTEM.—A Medicare-eligible covered
14 beneficiary who enrolls in a health benefits plan offered
15 through the Federal Employee Health Benefits program
16 pursuant to subsection (a) may continue, after such enroll-
17 ment, to receive health care services through a treatment
18 facility of the uniformed services, the Civilian Health and
19 Medical Program of the Uniformed Services, or the
20 TRICARE program. Section 1095 of this title, relating
21 to collection from third-party payers, shall apply with re-
22 spect to the costs of health care services incurred by the
23 United States on behalf of an enrolled covered beneficiary
24 through a treatment facility of the uniformed services, the

1 Civilian Health and Medical Program of the Uniformed
2 Services, or the TRICARE program.

3 “(d) CONTRIBUTIONS.—(1) In the case of a Medi-
4 care-eligible covered beneficiary who enrolls in a health
5 benefits plan offered through the Federal Employee
6 Health Benefits program pursuant to subsection (a), the
7 administering Secretary concerned shall be responsible for
8 Government contributions that the Office of Personnel
9 Management determines are necessary to cover all costs
10 in excess of beneficiary contributions under paragraph (2).

11 “(2) The contribution required from the enrolled cov-
12 ered beneficiary shall be equal to the amount that would
13 be withheld from the pay of a similarly situated Federal
14 employee who enrolls in a health benefits plan under chap-
15 ter 89 of title 5.

16 “(e) MANAGEMENT OF PARTICIPATION.—If the en-
17 rolled covered beneficiary is a member or former member
18 of the uniformed services described in section 1074(b) of
19 this title, the authority responsible for approving retired
20 or retainer pay or equivalent pay for the member or
21 former member shall manage the participation of the en-
22 rolled member or former member in a health benefits plan
23 offered through the Federal Employee Health Benefits
24 program pursuant to subsection (a). If the enrolled cov-
25 ered beneficiary is a dependent of a member or former

1 member, the authority that is, or would be, responsible
2 for approving retired or retainer pay or equivalent pay for
3 the member or former member shall manage the participa-
4 tion of the enrolled dependent in a health benefits plan
5 offered through the Federal Employee Health Benefits
6 program under subsection (a). The Office of Personnel
7 Management shall maintain separate risk pools for en-
8 rolled covered beneficiaries until such time as the Director
9 of the Office of Personnel Management determines that
10 complete inclusion of enrolled covered beneficiaries under
11 chapter 89 of title 5 will not adversely affect Federal em-
12 ployees and annuitants enrolled in health benefits plans
13 under such chapter.

14 “(f) EFFECT OF CANCELLATION.—The cancellation
15 by a Medicare-eligible covered beneficiary of coverage
16 under the Federal Employee Health Benefits program
17 shall be irrevocable for purposes of this section.

18 “(g) REPORTING REQUIREMENTS.—Not later than
19 November 1 of each year, the administering Secretaries
20 and the Director of the Office of Personnel Management
21 shall jointly submit a report to Congress describing the
22 provision of health care services to Medicare-eligible cov-
23 ered beneficiaries under this section during the preceding
24 fiscal year. The report shall address or contain the follow-
25 ing:

1 “(1) The number of Medicare-eligible covered
2 beneficiaries enrolled in health benefits plans offered
3 through the Federal Employee Health Benefits pro-
4 gram pursuant to subsection (a), both in terms of
5 total number and as a percentage of all Medicare-
6 eligible covered beneficiaries receiving health care
7 through the health care system of the uniformed
8 services.

9 “(2) The out-of-pocket cost to enrolled covered
10 beneficiaries under such health benefits plans.

11 “(3) The cost to the Government (including the
12 Department of Defense, the Department of Trans-
13 portation, and the Department of Health and
14 Human Services) of providing care under such
15 health benefits plans as a result of this section.

16 “(4) A comparison of the costs determined
17 under paragraphs (2) and (3) and the costs that
18 would have otherwise been incurred by the Govern-
19 ment and enrolled covered beneficiaries under alter-
20 native health care options available to the admin-
21 istering Secretaries.

22 “(5) The effect of this section on the cost, ac-
23 cess, and utilization rates of other health care op-
24 tions under the health care system of the uniformed
25 services.

1 “(h) TIME FOR OPTION.—The Secretary of Defense
2 shall begin to offer the health benefits option under sub-
3 section (a) not later than January 1, 1998.”.

4 (2) The table of sections at the beginning of such
5 chapter is amended by adding at the end the following
6 new item:

“1107. Health care coverage through Federal Employees Health Benefits pro-
gram.”.

7 (b) CONFORMING AMENDMENTS.—Chapter 89 of
8 title 5, United States Code, is amended—

9 (1) in section 8905—

10 (A) by redesignating subsections (d)
11 through (f) as subsections (e) through (g), re-
12 spectively; and

13 (B) by inserting after subsection (c) the
14 following new subsection:

15 “(d) An individual whom an administering Secretary
16 described in section 1073 of title 10 determines is a medi-
17 care-eligible covered beneficiary under subsection (b) of
18 section 1107 of such title may enroll in a health benefits
19 plan under this chapter in accordance with the agreement
20 entered into under subsection (a) of such section between
21 the Secretary of Defense and the Office and in accordance
22 with applicable regulations under this chapter.”;

23 (2) in section 8906(b)—

1 (A) in paragraph (1), by striking “para-
2 graphs (2) and (3)” and inserting in lieu there-
3 of “paragraphs (2), (3), and (4)”; and

4 (B) by adding at the end the following new
5 paragraph:

6 “(4) In the case of individuals who enroll in a health
7 plan in accordance with section 8905(d) of this title, the
8 Government contribution shall be determined under sec-
9 tion 1107(d) of title 10.”; and

10 (3) in section 8906(g)—

11 (A) in paragraph (1), by striking “para-
12 graph (2)” and inserting in lieu thereof “para-
13 graphs (2) and (3)”; and

14 (B) by adding at the end the following new
15 paragraph:

16 “(3) The Government contribution described in sub-
17 section (b)(4) for beneficiaries who enroll in accordance
18 with section 8905(d) of this title shall be paid as provided
19 in section 1107(d) of title 10.”.

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