

105TH CONGRESS
2D SESSION

S. 2551

To amend title XVIII of the Social Security Act to permit the replacement of health insurance policies for certain disabled medicare beneficiaries notwithstanding that the replacement policies may duplicate medicare benefits.

IN THE SENATE OF THE UNITED STATES

OCTOBER 5 (legislative day, OCTOBER 2), 1998

Mr. D'AMATO introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to permit the replacement of health insurance policies for certain disabled medicare beneficiaries notwithstanding that the replacement policies may duplicate medicare benefits.

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

1 **SECTION 1. PERMITTING REPLACEMENT OF CERTAIN**
 2 **HEALTH INSURANCE POLICIES BY CERTAIN**
 3 **DISABLED MEDICARE BENEFICIARIES NOT-**
 4 **WITHSTANDING DUPLICATION OF MEDICARE**
 5 **BENEFITS.**

6 Section 1882(d)(3)(A) of the Social Security Act (42
 7 U.S.C. 1395ss(d)(3)(A)) is amended—

8 (1) in clause (vi)(III), by inserting “or (ix)”
 9 after “(v)”;

10 (2) in clause (viii), by striking “or (vi)(III)”
 11 and inserting “(vi)(III), or (ix)” each place it ap-
 12 pears; and

13 (3) by adding at the end the following new
 14 clause:

15 “(ix) For purposes of this subparagraph, a health in-
 16 surance policy (which may be a contract for a health main-
 17 tenance organization) that becomes effective on or after
 18 January 1, 1999, is not considered to ‘duplicate’ health
 19 benefits under this title or title XIX or under another
 20 health insurance policy if it—

21 “(I) provides comprehensive health care benefits
 22 that replace the benefits provided by another health
 23 insurance policy that was originally purchased before
 24 January 1, 1996, and that has been maintained pur-
 25 suant to a State law governing the sale or dis-

1 continuation of health insurance contracts sold to in-
2 dividuals;

3 “(II) is being provided to an individual who is
4 enrolled (or is eligible to be enrolled) under part B
5 on the basis of being entitled to benefits under part
6 A pursuant to section 226(b); and

7 “(III) is otherwise prevented by this subpara-
8 graph from purchasing a health insurance policy to
9 replace an existing policy that has been maintained
10 by an insurer pursuant to a State law.”.

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