

109TH CONGRESS
2D SESSION

H. R. 4663

To authorize the Secretary of Health and Human Services to reimburse States for expenditures associated with the implementation of the Medicare prescription drug benefit for dual eligible individuals.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 31, 2006

Mr. BRADLEY of New Hampshire introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To authorize the Secretary of Health and Human Services to reimburse States for expenditures associated with the implementation of the Medicare prescription drug benefit for dual eligible individuals.

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. AUTHORIZATION OF STATE REIMBURSEMENT**
2 **FOR EXPENDITURES ASSOCIATED WITH THE**
3 **IMPLEMENTATION OF THE MEDICARE PRE-**
4 **SCRIPTION DRUG BENEFIT FOR DUAL ELIGI-**
5 **BLE INDIVIDUALS.**

6 (a) IN GENERAL.—Notwithstanding section 1935(d)
7 of the Social Security Act (42 U.S.C. 1396u–5(d)) or any
8 other provision of law, with respect to covered part D
9 drugs (as defined in section 1860D–2(e) of such Act (42
10 U.S.C. 1395w–102(e)) for full-benefit dual eligible individ-
11 uals (as defined in section 1935(c)(6) of such Act (42
12 U.S.C. 1396u–5(c)(6)) who are enrolled in a prescription
13 drug plan under part D of title XVIII of such Act (or
14 an MA–PD plan under part C of such title), the Secretary
15 of Health and Human Services is authorized to fully reim-
16 burse a State (as defined for purposes of title XIX of such
17 Act) for the costs described in subsection (b).

18 (b) COSTS DESCRIBED.—For purposes of subsection
19 (a), costs described in this subsection are costs incurred
20 by the State as a result of the implementation of any pro-
21 gram, with respect to access to covered part D drugs for
22 individuals described in subsection (a), that is consistent
23 with the guidance to States issued by the Centers of Medi-
24 care & Medicaid on January 14, 2006, titled “Transitional
25 State—Part D Plan Coordination of Benefits”, without
26 regard to the date of implementation of the program or

1 the duration of the program. Such costs include copay-
2 ments made on behalf of such individuals, administrative
3 costs, and costs associated with disputed claim reconcili-
4 ation.

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