

109TH CONGRESS
1ST SESSION

S. 1239

To amend the Indian Health Care Improvement Act to permit the Indian Health Service, an Indian tribe, a tribal organization, or an urban Indian organization to pay the monthly part D premium of eligible medicare beneficiaries.

IN THE SENATE OF THE UNITED STATES

JUNE 14, 2005

Mr. MCCAIN (for himself, Mr. DORGAN, and Mr. BAUCUS) introduced the following bill; which was read twice and referred to the Committee on Indian Affairs

A BILL

To amend the Indian Health Care Improvement Act to permit the Indian Health Service, an Indian tribe, a tribal organization, or an urban Indian organization to pay the monthly part D premium of eligible medicare beneficiaries.

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 “American Indian El-
5 derly and Disabled Access to Health Care Act of 2005”.

1 **SEC. 2. PAYMENT OF MEDICARE MONTHLY PART D PRE-**
2 **MIUM.**

3 (a) IN GENERAL.—Section 404 of the Indian Health
4 Care Improvement Act (25 U.S.C. 1644) is amended by
5 adding at the end the following new subsection:

6 “(d) PAYMENT OF MONTHLY PART D PREMIUM
7 UNDER THE MEDICARE PROGRAM.—

8 “(1) PAYMENT OF MONTHLY PART D PRE-
9 MIUM.—The Service, an Indian tribe, a tribal orga-
10 nization, or an urban Indian organization may use
11 appropriated funds or funds collected pursuant to
12 the authority granted in this title to pay the monthly
13 beneficiary premium (as determined under section
14 1860D–13 of the Social Security Act (42 U.S.C.
15 1395w–113) of an eligible medicare beneficiary en-
16 rolled in a prescription drug plan or an MA–PD
17 plan under part D of title XVIII of such Act (42
18 U.S.C. 1395w–101 et seq.).

19 “(2) CONSIDERATIONS.—In deciding whether to
20 pay the premium of an eligible medicare beneficiary
21 under paragraph (1), the Indian Health Service, In-
22 dian tribe, tribal organization, or urban Indian orga-
23 nization shall consider the cost effectiveness of pay-
24 ing such premium for such individual, taking into
25 account—

1 “(A) the beneficiary’s expected drug utili-
2 zation; and

3 “(B) other factors that the Service, Indian
4 tribe, tribal organization, or urban Indian orga-
5 nization determines appropriate for the purpose
6 of determining the cost effectiveness of paying
7 such premium.

8 “(3) ELIGIBLE BENEFICIARY DEFINED.—The
9 term ‘eligible medicare beneficiary’ means an indi-
10 vidual who—

11 “(A) is an Indian;

12 “(B) is a part D eligible individual (as de-
13 fined in section 1860D–1(a)(3)(A) of the Social
14 Security Act (42 U.S.C. 1395w–101(a)(3)(A)));
15 and

16 “(C) is not a subsidy eligible individual
17 who receives a full premium subsidy under
18 1860D–14(a)(1)(A) of such Act (42 U.S.C.
19 1395w–114(a)(1)(A)).”.

20 (b) EFFECTIVE DATE.—The amendment made by
21 this section shall apply to monthly beneficiary premium
22 payments made with respect to months beginning on or
23 after January 1, 2006.

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