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(Original Signature of Member)

119TH CONGRESS
1ST SESSION

H. R. _____

To amend titles II and XVIII of the Social Security Act to lower the Medicare eligibility age to 50, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Ms. JAYAPAL introduced the following bill; which was referred to the Committee on _____

A BILL

To amend titles II and XVIII of the Social Security Act to lower the Medicare eligibility age to 50, and for other purposes.

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 “Improving Medicare
5 Coverage Act”.

6 **SEC. 2. MEDICARE ELIGIBILITY EXPANSION.**

7 (a) IN GENERAL.—Section 226 of the Social Security
8 Act (42 U.S.C. 426) is amended—

1 (1) by striking “65” each place it appears and
2 inserting “50”; and

3 (2) in subsection (a)—

4 (A) in paragraph (2)(A)—

5 (i) by inserting “would be entitled to
6 those benefits but for age,” after “section
7 202,”; and

8 (ii) by inserting “(not including age)”
9 after “meets all the criteria”; and

10 (B) in the matter at the end—

11 (i) by inserting “, in the case of an in-
12 dividual who has attained age 65 before
13 the date that is 6 months after the date of
14 the enactment of the Improving Medicare
15 Coverage Act,” after “beginning with”;
16 and

17 (ii) by inserting “and, in the case of
18 an individual who has not attained age 65
19 before the date that is 6 months after the
20 date of the enactment of the Improving
21 Medicare Coverage Act, the first month
22 after the month that is 5 months after
23 such date of enactment for which the indi-
24 vidual meets the conditions specified in
25 paragraphs (1) and (2)” after “and (2)”.

1 (b) ENROLLMENT PERIODS FOR PART B BENE-
2 FITS.—Section 1837(d) of the Social Security Act (42
3 U.S.C. 1395p(d)) is amended—

4 (1) by striking “(d) In the case of” and insert-
5 ing “(d)(1) Subject to paragraph (2), in the case
6 of”; and

7 (2) by adding at the end the following new
8 paragraph:

9 “(2) In the case of an individual described in para-
10 graph (1) who has attained the age of 50 but not attained
11 the age of 65 before the date that is 6 months after the
12 date of the enactment of the Improving Medicare Coverage
13 Act, such individual’s initial enrollment period shall begin
14 on the date that is 3 months after such date of enactment,
15 and shall end on the date that is 11 months after such
16 date of enactment.”.

17 (c) CONFORMING AMENDMENTS.—

18 (1) HOSPITAL INSURANCE BENEFITS FOR THE
19 AGED.—Section 1811 of the Social Security Act (42
20 U.S.C. 1395c) is amended—

21 (A) by striking “65” each place it appears
22 and inserting “50”; and

23 (B) by striking “(or would be eligible for
24 such benefits if certain government employment
25 were covered employment under such title)”

1 and inserting “(or would be eligible for such
2 benefits if certain government employment were
3 covered employment under such title, or would
4 be eligible for such benefits but for age)”.

5 (2) HOSPITAL INSURANCE BENEFITS FOR UNIN-
6 SURED ELDERLY INDIVIDUALS NOT OTHERWISE ELI-
7 GIBLE.—Section 1818 of such Act (42 U.S.C.
8 1395i-2) is amended—

9 (A) in subsection (a)(1), by striking “65”
10 and inserting “50”; and

11 (B) in subsection (d)—

12 (i) in paragraph (1), by striking “65”
13 and inserting “50”; and

14 (ii) in paragraph (3), by striking “65”
15 and inserting “50”.

16 (3) HOSPITAL INSURANCE BENEFITS FOR DIS-
17 ABLED INDIVIDUALS WHO HAVE EXHAUSTED OTHER
18 ENTITLEMENT.—Section 1818A(a)(1) of such Act
19 (42 U.S.C. 1395i-2a(a)(1)) is amended by striking
20 “65” and inserting “50”.

21 (4) ELIGIBLE INDIVIDUALS.—Section 1836(2)
22 of such Act (42 U.S.C. 1395o(2)) is amended by
23 striking “65” and inserting “50”.

24 (5) ENROLLMENT PERIODS.—Section 1837 of
25 such Act (42 U.S.C. 1395p), as amended by sub-

1 section (b), is further amended by striking “65”
2 each place it appears and inserting “50”.

3 (6) COVERAGE PERIOD.—Section 1838 of the
4 such Act (42 U.S.C. 1395q) is amended—

5 (A) by striking “65” each place it appears
6 and inserting “50”; and

7 (B) in subsection (a)(2)—

8 (i) by striking “subsection (d)” each
9 place it appears and inserting “subsection
10 (d)(1)”;

11 (ii) in subparagraph (D), by striking
12 “; or” and inserting “, or”; and

13 (iii) by adding at the end the fol-
14 lowing new subparagraph:

15 “(E) in the case of an individual who enrolls
16 pursuant to subsection (d)(2) of section 1837, on
17 the date that is 6 months after the date of the en-
18 actment of the Improving Medicare Coverage Act;
19 or”.

20 (7) AMOUNTS OF PREMIUMS.—Section 1839 of
21 such Act (42 U.S.C. 1395r) is amended—

22 (A) in subsection (a)(1)—

23 (i) by striking the first sentence and
24 inserting “The Secretary shall, during Sep-
25 tember of 1983 through September of

1 2025, determine the monthly actuarial rate
2 for enrollees age 65 and over which shall
3 be applicable for the succeeding calendar
4 year (including, for 2026, with respect to
5 individuals who enroll pursuant to sub-
6 section (d)(2) of section 1837) and, during
7 September of 2026 and of each year there-
8 after, determine the monthly actuarial
9 value for enrollees age 50 and over which
10 shall be applicable for the succeeding cal-
11 endar year.”; and

12 (ii) by inserting “for years before
13 2027 and with respect to those enrollees
14 age 50 or older (for 2027 and subsequent
15 years)” after “age 65 and older”;

16 (B) in subsection (a)(3)—

17 (i) by striking “for enrollees age 65
18 and over, determined according to para-
19 graph (1),” and inserting “determined ac-
20 cording to paragraph (1)”;

21 (ii) by striking “age 65 and older”;

22 (C) in subsection (a)(4)—

23 (i) by striking the first sentence and
24 inserting “The Secretary shall, during Sep-
25 tember of 1983 through September of

1 2025, determine the monthly actuarial rate
2 for disabled enrollees under age 65 which
3 shall be applicable for the succeeding cal-
4 endar year and, during September of 2026
5 and of each year thereafter, determine the
6 monthly actuarial value for disabled enroll-
7 ees under age 50 which shall be applicable
8 for the succeeding calendar year.”; and

9 (ii) by inserting “(for years before
10 2027) and with respect to those disabled
11 enrollees under age 50 (for 2027 and sub-
12 sequent years)” after “to disabled enrollees
13 under age 65”;

14 (D) in subsection (b), by inserting “(in the
15 case of an individual who attained the age of 65
16 before the date that is 6 months after the date
17 of the enactment of the Improving Medicare
18 Coverage Act) or the age of 50 (in the case of
19 an individual who did not attain the age of 65
20 before the date that is 6 months after such date
21 of enactment)” after “the age of 65”;

22 (E) in subsection (d), by inserting “(in the
23 case of an individual who attained the age of 65
24 before the date that is 6 months after the date
25 of the enactment of the Improving Medicare

1 Coverage Act) or the age of 50 (in the case of
2 an individual who did not attain the age of 65
3 before the date that is 6 months after such date
4 of enactment)” after “age 65”;

5 (F) in subsection (i)(3)(A), by inserting
6 “(for years before 2027) or for enrollees age 50
7 and older (for 2027 and subsequent years)”
8 after “age 65 and older”; and

9 (G) in subsection (j), by inserting “(for
10 years before 2027) or for enrollees age 50 and
11 older (for 2027 and subsequent years)” after
12 “age 65 and older”.

13 (8) APPROPRIATIONS TO COVER GOVERNMENT
14 CONTRIBUTIONS AND CONTINGENCY RESERVE.—Sec-
15 tion 1844(a) of such Act (42 U.S.C. 1395w(a)) is
16 amended by striking “65” each place it appears and
17 inserting “50”.

18 (9) ELIGIBILITY, ELECTION, AND ENROLL-
19 MENT.—Section 1851(e)(4) of such Act (42 U.S.C.
20 1395w–21(e)(4)) is amended in the matter at the
21 end by striking “65” and inserting “50”.

22 (10) PREMIUMS; LATE ENROLLMENT PEN-
23 ALTY.—Section 1860D–13(b)(7)(B)(i) of such Act
24 (42 U.S.C. 1395w–113(b)(7)(B)(i)) is amended by
25 inserting “(in the case of an individual who attained

1 the age of 65 before the date that is 6 months after
2 the date of the enactment of the Improving Medicare
3 Coverage Act) or age 50 (in the case of an individual
4 who did not attain the age of 65 before the date that
5 is 6 months after such date of enactment)” after
6 “65”.

7 (11) INDIVIDUALS AT RISK FOR DIABETES.—
8 Section 1861(yy)(2)(F)(iv) of such Act (42 U.S.C.
9 1395x(yy)(2)(F)(iv)) is amended by striking “65”
10 and inserting “50”.

11 (12) EXCLUSIONS FROM COVERAGE AND MEDI-
12 CARE AS A SECONDARY PAYER.—Section
13 1862(b)(1)(A)(i)(II) of such Act (42 U.S.C.
14 1395y(b)(1)(A)(i)(II)) is amended by striking “65”
15 each place it appears and inserting “50”.

16 (13) CERTIFICATION OF MEDICARE SUPPLE-
17 MENTAL HEALTH INSURANCE POLICIES.—Section
18 1882(s) of such Act (42 U.S.C. 1395ss(s)) is
19 amended—

20 (A) in paragraph (2)—

21 (i) in subparagraph (A), by striking
22 “65 years of age or older” and inserting
23 “entitled to benefits under part A under
24 subsection (a) of section 226, or would be
25 entitled to benefits under such subsection

1 but for paragraph (2) of such subsection,”;
2 and

3 (ii) in subparagraph (D), by inserting
4 “(in the case of an individual who attained
5 the age of 65 before the date that is 6
6 months after the date of the enactment of
7 the Improving Medicare Coverage Act) or
8 50 years of age or older (in the case of an
9 individual who did not attain the age of 65
10 before the date that is 6 months after such
11 date of enactment)” after “older”; and
12 (B) in paragraph (3)(B)—

13 (i) in clause (ii), by inserting “(in the
14 case of an individual who attained the age
15 of 65 before the date that is 6 months
16 after the date of the enactment of the Im-
17 proving Medicare Coverage Act) or 50
18 years of age or older (in the case of an in-
19 dividual who did not attain the age of 65
20 before the date that is 6 months after such
21 date of enactment)” after “older”; and

22 (ii) in clause (vi), by striking “eligible
23 for benefits under part A at age 65” and
24 inserting “entitled to part A benefits under
25 section 226(a)”.

1 (14) HOSPITAL PROVIDERS OF EXTENDED
2 CARE SERVICES.—Section 1883(z)(2)(A) of such Act
3 (42 U.S.C. 1395tt(z)(2)(A)) is amended by inserting
4 “(in the case of an individual who attained the age
5 of 65 before the date that is 6 months after the date
6 of the enactment of the Improving Medicare Cov-
7 erage Act or age 50 (in the case of an individual
8 who did not attain the age of 65 before the date that
9 is 6 months after such date of enactment)” after
10 “65”.

11 (15) MEDICARE SUBVENTION DEMONSTRATION
12 PROJECT FOR MILITARY RETIREES.—Section
13 1896(a)(4) of such Act (42 U.S.C. 1395ggg(a)(4)) is
14 amended—

15 (A) in subparagraph (B)—

16 (i) in clause (i), by striking “benefits
17 under part A of this title” and inserting
18 “part A benefits under section 226(a)”;
19 and

20 (ii) in clause (ii), by striking the semi-
21 colon at the end and inserting “; and”;

22 (B) in subparagraph (C), by striking “;
23 and” and inserting a period; and

24 (C) by striking subparagraph (D).

1 (d) ELIGIBILITY FOR PREMIUM ASSISTANCE.—Cov-
2 erage provided under the Medicare program under title
3 XVIII of the Social Security Act pursuant to this section
4 (relating to coverage of individuals who have attained the
5 age of 50 but have not attained the age of 65) shall be
6 treated as coverage under a qualified health plan in the
7 individual market enrolled in through an Exchange where
8 the individual resides for purposes of section 36B of the
9 Internal Revenue Code of 1986 other than subsection
10 (c)(2)(B) thereof.

11 (e) AUTOMATIC ENROLLMENT OF INDIVIDUALS EN-
12 TITLED TO PART A.—The Secretary of Health and
13 Human Services shall establish procedures to provide for
14 the automatic enrollment of individuals who become enti-
15 tled to benefits under part A of title XVIII of the Social
16 Security Act as of the date that is 6 months after the
17 date of the enactment of this Act pursuant to this section
18 in descending order of age with enrollment of such individ-
19 uals beginning not later than 3 months after such date
20 of enactment and completed not later than 11 months
21 after such date of enactment.

22 (f) CLARIFICATION REGARDING COVERAGE OF DE-
23 PENDENTS.—Nothing in this section shall be construed
24 to—

1 (1) provide coverage under the Medicare pro-
2 gram of a dependent who is not otherwise eligible for
3 such coverage as an individual; or

4 (2) affect a dependent's eligibility under a
5 group health plan, qualified health plan offered on
6 an Exchange, or any other health plan for which the
7 dependent is otherwise eligible.

8 (g) CLARIFICATION OF MEDICARE AS SECONDARY
9 PAYER.—Nothing in this section shall affect the require-
10 ments under section 1862(b) of the Social Security Act
11 (42 U.S.C. 1395y(b)) (relating to Medicare as secondary
12 payer).

13 (h) EFFECTIVE DATE.—

14 (1) IN GENERAL.—Subject to paragraph (2),
15 the amendments made by this section shall take ef-
16 fect on the date that is 6 months after the date of
17 the enactment of this Act.

18 (2) EXCEPTIONS.—The amendments made by
19 subsection (b) and subsection (c)(1)(G) shall take ef-
20 fect on the date of enactment of this Act.

21 **SEC. 3. MEDICARE COST ASSISTANCE PROGRAM.**

22 (a) IN GENERAL.—Title XVIII of the Social Security
23 Act (42 U.S.C. 1395 et seq.) is amended by adding at
24 the end the following new section:

1 **“SEC. 1899C. MEDICARE COST ASSISTANCE PROGRAM.**

2 “(a) IN GENERAL.—Effective beginning on the date
3 that is 6 months after the date of the enactment of the
4 Improving Medicare Coverage Act, in the case of a Medi-
5 care Cost Assistance Program eligible individual (as de-
6 fined in subsection (b)(1)), the Secretary shall provide
7 Medicare cost assistance for the following costs incurred
8 with respect to the individual:

9 “(1)(A) premiums under section 1818; and

10 “(B) premiums under section 1839.

11 “(2) Coinsurance under this title (including co-
12 insurance described in section 1813).

13 “(3) Deductibles established under this title (in-
14 cluding those described in section 1813 and section
15 1833(b)).

16 “(4) The difference between the amount that is
17 paid under section 1833(a) and the amount that
18 would be paid under such section if any reference to
19 a percent less than 100 percent therein were deemed
20 a reference to ‘100 percent’.

21 “(b) DETERMINATION OF ELIGIBILITY.—

22 “(1) MEDICARE COST ASSISTANCE PROGRAM
23 ELIGIBLE INDIVIDUAL DEFINED.—The term ‘Medi-
24 care Cost Assistance Program eligible individual’
25 means an individual who—

1 “(A) is eligible for and is receiving medical
2 assistance for the payment of medicare cost-
3 sharing under a State Medicaid program pursu-
4 ant to clause (i), (iii), or (iv) of section
5 1902(a)(10)(E) as of the day prior to the date
6 that is 6 months after the date of the enact-
7 ment of the Improving Medicare Coverage Act;
8 or

9 “(B)(i) is entitled to hospital insurance
10 benefits under part A (including an individual
11 entitled to such benefits pursuant to an enroll-
12 ment under section 1818); and

13 “(ii) has income at or below 200 percent of
14 the poverty line applicable to a family of the
15 size involved.

16 “(2) JOINT DETERMINATION BY COMMISSIONER
17 OF SOCIAL SECURITY FOR LIS AND MEDICARE COST
18 ASSISTANCE.—

19 “(A) IN GENERAL.—The determination of
20 whether an individual is a Medicare Cost As-
21 sistance Program eligible individual described in
22 paragraph (1) shall be determined by the Com-
23 missioner of Social Security jointly with the de-
24 termination of whether an individual is a sub-
25 sidy eligible individual described in section

1 1860D–14(a)(3). Such determination shall be
2 made with respect to eligibility for Medicare
3 cost assistance under this section and premium
4 and cost-sharing subsidies under section
5 1860D–14 upon application of an individual for
6 a determination with respect to eligibility for ei-
7 ther such assistance or such subsidies. There
8 are authorized to be appropriated to the Social
9 Security Administration such sums as may be
10 necessary for the determination of eligibility
11 under this paragraph.

12 “(B) EFFECTIVE PERIOD.—Determina-
13 tions under this paragraph with respect to eligi-
14 bility for each of such assistance or such sub-
15 sidies shall be effective beginning with the
16 month in which the individual applies for a de-
17 termination described in subparagraph (A) and
18 shall remain in effect until such time as the
19 Secretary determines the individual is no longer
20 eligible as determined under subparagraph
21 (C)(ii).

22 “(C) REDETERMINATIONS.—With respect
23 to eligibility determinations under this para-
24 graph—

1 “(i) redeterminations shall be made at
2 the same time with respect to eligibility for
3 Medicare cost assistance under this section
4 and cost-sharing subsidies under section
5 1860D–14, but not more frequently than
6 once every 12 months;

7 “(ii) a redetermination shall automati-
8 cally determine that an individual remains
9 eligible for such assistance or subsidies un-
10 less—

11 “(I) the Commissioner has infor-
12 mation indicating that the individual’s
13 circumstances have changed such that
14 the individual is no longer eligible for
15 such assistance or subsidies;

16 “(II) the Commissioner sends no-
17 tice to the individual regarding such
18 information that requests a response
19 either confirming or correcting such
20 information; and

21 “(III) the individual either con-
22 firms such information or fails to pro-
23 vide documentation indicating that
24 such circumstances have not changed

1 within 60 days of receiving the notice
2 described in subclause (II);

3 “(iii) the Commissioner shall establish
4 procedures for appeals of such determina-
5 tions that are similar to the procedures de-
6 scribed in the third sentence of section
7 1631(c)(1)(A); and

8 “(iv) judicial review of the final deci-
9 sion of the Commissioner made after a
10 hearing shall be available to the same ex-
11 tent, and with the same limitations, as pro-
12 vided in subsections (g) and (h) of section
13 205.

14 “(D) TREATMENT OF MEDICAID BENE-
15 FICIARIES.—The Secretary shall provide that
16 individuals who are full-benefit dual eligible in-
17 dividuals (as defined in section 1935(c)(6)) or
18 who are recipients of supplemental security in-
19 come benefits under title XVI shall be treated
20 as a Medicare Cost Assistance Program eligible
21 individual described in paragraph (1) and, in
22 the case of such individual who is a part D eli-
23 gible individual, a subsidy eligible individual de-
24 scribed in section 1860D–14(a)(3).

25 “(E) SIMPLIFIED APPLICATION FORM.—

1 “(i) IN GENERAL.—The Secretary
2 shall develop and distribute a simplified
3 application form for use by individuals in
4 applying for Medicare cost assistance
5 under this section and premium and cost-
6 sharing subsidies under section 1860D–14.
7 Such form shall be easily readable by ap-
8 plicants and uniform nationally. The Sec-
9 retary shall provide for the translation of
10 such application form into at least the 10
11 languages (other than English) that are
12 most often used by individuals applying for
13 hospital insurance benefits under section
14 226 or 226A and shall make the translated
15 forms available to the Commissioner of So-
16 cial Security.

17 “(ii) CONSULTATION.—In developing
18 such form, the Secretary shall consult with
19 beneficiary groups.

20 “(3) INCOME DETERMINATIONS.—For purposes
21 of applying this section—

22 “(A) in the case of an individual who is
23 not treated as a Medicare Cost Assistance Pro-
24 gram eligible individual or a subsidy eligible in-
25 dividual under paragraph (2)(D), income shall

1 be determined in the manner described under
2 section 1612 for purposes of the supplemental
3 security income program, except that support
4 and maintenance furnished in kind shall not be
5 counted as income; and

6 “(B) the term ‘poverty line’ has the mean-
7 ing given such term in section 673(2) of the
8 Community Services Block Grant Act (42
9 U.S.C. 9902(2)), including any revision re-
10 quired by such section.

11 “(c) BENEFICIARY PROTECTIONS.—

12 “(1) IN GENERAL.—In the case in which the
13 payment for Medicare cost assistance for a Medicare
14 Cost Assistance Program eligible individual with re-
15 spect to an item or service is reduced or eliminated
16 the individual shall not have any legal liability to
17 make payment to a provider of services or supplier
18 or to an organization described in section
19 1903(m)(1)(A) for the service, and any lawful sanc-
20 tion that may be imposed upon a provider of services
21 or supplier or such an organization for excess
22 charges under this title or title XIX shall apply to
23 the imposition of any charge imposed upon the indi-
24 vidual in such case.

1 “(2) CLARIFICATION.—This paragraph shall
2 not be construed as preventing payment of any
3 medicare cost assistance by a medicare supplemental
4 policy or an employer retiree health plan on behalf
5 of an individual.

6 “(d) ADMINISTRATION.—

7 “(1) IN GENERAL.—The Secretary shall estab-
8 lish procedures for the administration of the pro-
9 gram under this section.

10 “(2) FUNDING.—For purposes of carrying out
11 this section, the Secretary shall make payments from
12 the Federal Hospital Insurance Trust Fund under
13 section 1817 and the Federal Supplementary Med-
14 ical Insurance Trust Fund under section 1841, in
15 such proportion as the Secretary determines appro-
16 priate, of such amounts as the Secretary determines
17 necessary to provide Medicare cost assistance under
18 this section.

19 “(e) REFERENCES TO MEDICARE COST-SHARING.—
20 Effective beginning on the date that is 6 months after the
21 date of the enactment of the Improving Medicare Coverage
22 Act, any reference to medicare cost-sharing described in
23 section 1905(p) shall be deemed a reference to Medicare
24 cost assistance under this section.

1 “(f) OUTREACH EFFORTS.—For provisions relating
2 to outreach efforts to increase awareness of the availability
3 of Medicare cost assistance, see section 1144.”.

4 (b) SPECIAL ENROLLMENT PERIOD.—

5 (1) NO PREMIUM PENALTY.—Section 1839(b)
6 of the Social Security Act (42 U.S.C. 1395r(b)) is
7 amended, in the last sentence, by inserting the fol-
8 lowing before the period: “or, effective beginning on
9 the date that is 6 months after the date of the en-
10 actment of the Improving Medicare Coverage Act,
11 for individuals who are Medicare Cost Assistance
12 Program eligible individuals (as defined in section
13 1899C(b)(1)).”.

14 (2) SPECIAL ENROLLMENT PERIOD.—Section
15 1837 of the Social Security Act (42 U.S.C. 1395p)
16 is amended by adding at the end the following new
17 subsection:

18 “(o) SPECIAL ENROLLMENT PERIOD FOR MEDICARE
19 COST ASSISTANCE PROGRAM ELIGIBLE INDIVIDUAL.—

20 “(1) IN GENERAL.—Effective beginning on the
21 date that is 6 months after the date of the enact-
22 ment of the Improving Medicare Coverage Act, the
23 Secretary shall establish special enrollment periods
24 for Medicare Cost Assistance Program eligible indi-
25 viduals (as defined in section 1899C(b)(1)).

1 “(2) COVERAGE PERIOD.—In the case of an in-
2 dividual who enrolls during the special enrollment
3 period provided under paragraph (1), the coverage
4 period under this part shall—

5 “(A) begin on the first day of the first
6 month in which the individual applies for a de-
7 termination under section 1899C(b)(2)(A); and

8 “(B) remain in effect until such time as
9 the Secretary determines the individual no
10 longer eligible as determined under section
11 1899C(b)(2)(C)(ii).”.

12 (3) CONFORMING SUNSET OF STATE AGREE-
13 MENTS RELATING TO ENROLLMENT OF QUALIFIED
14 MEDICARE BENEFICIARIES.—

15 (A) PART A.—Section 1818(g) of the So-
16 cial Security Act (42 U.S.C. 1395i–2(g)) is
17 amended by adding at the end the following
18 new paragraph:

19 “(3) SUNSET.—This subsection shall not apply on or
20 after the date that is 6 months after the date of the enact-
21 ment of the Improving Medicare Coverage Act.”.

22 (B) PART B.—Section 1843(h) of the So-
23 cial Security Act (42 U.S.C. 1395v(h)) is
24 amended by adding at the end the following
25 new paragraph:

1 “(3) SUNSET WITH RESPECT TO QUALIFIED MEDI-
2 CARE BENEFICIARIES.—This subsection shall not apply
3 with respect to qualified medicare beneficiaries on or after
4 the date that is 6 months after the date of the enactment
5 of the Improving Medicare Coverage Act.”.

6 (c) PUBLIC AWARENESS CAMPAIGN.—Section 1144
7 of the Social Security Act (42 U.S.C. 1320b–14) is
8 amended by adding at the end the following new sub-
9 section:

10 “(d) PUBLIC AWARENESS CAMPAIGN.—

11 “(1) IN GENERAL.—The Commissioner shall
12 conduct a public awareness campaign to educate
13 Medicare beneficiaries on the availability of Medicare
14 cost assistance for low-income individuals under sec-
15 tion 1899C.

16 “(2) COORDINATION.—In carrying out such
17 public awareness campaign, the Commissioner shall
18 coordinate with State health insurance assistance
19 programs described in subsection (a)(1)(A) of sec-
20 tion 119 of the Medicare Improvements for Patients
21 and Providers Act of 2008 (42 U.S.C. 1395b–3
22 note), the Administrator of the Administration for
23 Community Living, and the Administrator of the
24 Centers for Medicare & Medicaid Services.

1 “(3) FUNDING.—There are hereby appropriated
2 to the Commissioner, out of any funds in the Treas-
3 ury not otherwise appropriated, \$10,000,000 for
4 each of fiscal years 2026 through 2028, to provide
5 grants to State health insurance assistance pro-
6 grams to carry out outreach and education activities
7 under the public awareness campaign pursuant to
8 this subsection.”.

9 **SEC. 4. MOVING MEDICARE COST-SHARING BENEFITS**
10 **FROM MEDICAID TO MEDICARE.**

11 (a) ENDING MOST MEDICARE COST-SHARING BENE-
12 FITS UNDER MEDICAID.—Section 1902(a)(10) of the So-
13 cial Security Act (42 U.S.C. 1396a(a)(10)) is amended—

14 (1) by inserting “for calendar quarters begin-
15 ning before the date that is 6 months after the date
16 of the enactment of the Improving Medicare Cov-
17 erage Act,” before “for making” each place it ap-
18 pears in clauses (i), (iii), and (iv) of subparagraph
19 (E); and

20 (2) in the matter following subparagraph (G)—

21 (A) by inserting “furnished during cal-
22 endar quarters beginning before the date that is
23 6 months after the date of the enactment of the
24 Improving Medicare Coverage Act” after “(de-
25 scribed in section 1905(p)(3))”;

1 (B) by striking “(XV)” and inserting “,
2 (XV)”;

3 (C) by striking “and (XVIII)” and insert-
4 ing “, (XVIII)”;

5 (D) by inserting “, and (XIX) no medical
6 assistance for medicare cost-sharing, other than
7 medical assistance for medicare cost-sharing for
8 qualified disabled and working individuals de-
9 scribed in section 1905(s), shall be made avail-
10 able after the date that is 6 months after the
11 date of the enactment of the Improving Medi-
12 care Coverage Act” before the semicolon at the
13 end.

14 (b) CONFORMING AMENDMENTS.—

15 (1) TITLE XIX.—

16 (A) Section 1903(i) of such Act (42 U.S.C.
17 1396b(i)) is amended—

18 (i) in paragraph (26), by striking “;
19 and” and inserting a semicolon;

20 (ii) in paragraph (27), by striking the
21 period at the end and inserting “; and”;
22 and

23 (iii) by inserting after paragraph (27)
24 the following new paragraph:

1 “(28) with respect to any amount expended for
2 medical assistance for medicare cost-sharing (other
3 than medical assistance for medicare cost-sharing
4 for qualified disabled and working individuals de-
5 scribed in section 1905(s)) furnished during cal-
6 endar quarters beginning on or after the date that
7 is 6 months after the date of the enactment of the
8 Improving Medicare Coverage Act.”.

9 (B) Section 1905(a) of such Act (42
10 U.S.C. 1396d(a)) is amended, in the first sen-
11 tence, by inserting “furnished during calendar
12 quarters beginning before the date that is 6
13 months after the date of the enactment of the
14 Improving Medicare Coverage Act” after “medi-
15 care cost-sharing”.

16 (C) Section 1933(g) of such Act (42
17 U.S.C. 1396u-3(g)) is amended—

18 (i) in paragraph (2)(Q), by striking
19 “paragraph (4), for each subsequent year”
20 and inserting “paragraphs (4) and (5), for
21 each subsequent year (prior to the date
22 that is 6 months after the date of the en-
23 actment of the Improving Medicare Cov-
24 erage Act”; and

1 (ii) by adding at the end the fol-
2 lowing:

3 “(5) SUNSET.—No individual shall be selected
4 to be a qualifying individual for any calendar year
5 or period under this section beginning on or after
6 the date that is 6 months after the date of the en-
7 actment of the Improving Medicare Coverage Act,
8 and no State allocation shall be made for any fiscal
9 year or period under this section beginning on or
10 after the date that is 6 month after such date of en-
11 actment.”.

12 (D) Section 1935(a) of such Act (42
13 U.S.C. 1396u–5(a)) is amended—

14 (i) in paragraph (2), by striking
15 “make determinations” and inserting
16 “prior to the date that is 6 months after
17 the date of the enactment of the Improving
18 Medicare Coverage Act, make determina-
19 tions”; and

20 (ii) in paragraph (3), by inserting
21 “prior to the date that is 6 months after
22 the date of the enactment of the Improving
23 Medicare Coverage Act,” before “the State
24 shall”.

1 (2) TITLE XI.—Section 1144 of the Social Se-
2 curity Act (42 U.S.C. 1320b–14) is amended—

3 (A) in subsection (a)—

4 (i) in paragraph (1)(A)—

5 (I) by striking “sections
6 1902(a)(10)(E) and 1933” and in-
7 serting “section 1902(a)(10)(E) and
8 (prior to the date that is 6 months
9 after the date of the enactment of the
10 Improving Medicare Coverage Act)
11 section 1933”;

12 (II) by striking “for the transi-
13 tional assistance under section
14 1860D–31(f), or” and inserting a
15 comma; and

16 (III) by inserting “, or for Medi-
17 care premium and cost-sharing assist-
18 ance under section 1899C (in the case
19 of months beginning on or after the
20 date that is 6 months after the date
21 of the enactment of the Improving
22 Medicare Coverage Act)” before the
23 semicolon; and

24 (ii) by striking paragraph (2) and in-
25 serting the following:

1 “(2) CONTENT OF NOTICE.—Any notice fur-
2 nished under paragraph (1) shall state that eligi-
3 bility for such medical assistance, subsidies, or pro-
4 gram is conditioned upon meeting the applicable eli-
5 gibility criteria.”;

6 (B) in subsection (b)(1)(A)—

7 (i) by striking “sections
8 1902(a)(10)(E) and 1933” and inserting
9 “section 1902(a)(10)(E) and (prior to the
10 date that is 6 months after the date of the
11 enactment of the Improving Medicare Cov-
12 erage Act) section 1933”;

13 (ii) by striking “for transitional as-
14 sistance under section 1860D–31(f), or”;
15 and

16 (iii) by inserting “, or for Medicare
17 premium and cost-sharing assistance under
18 section 1899C” before the semicolon; and

19 (C) in subsection (c)—

20 (i) in paragraph (1)(B), by inserting
21 “, and (beginning on the date that is 6
22 months after the date of the enactment of
23 the Improving Medicare Coverage Act)
24 provide an application for enrollment

1 under the Medicare Savings Program” be-
2 fore the period;

3 (ii) in paragraph (2), in the para-
4 graph header, by inserting “MEDICARE
5 SAVINGS PROGRAM APPLICATION AND” be-
6 fore “LIS APPLICATION”; and

7 (iii) in paragraph (7), by striking
8 “means the program of medical assist-
9 ance” and all that follows through the pe-
10 riod and inserting “means—

11 “(A) prior to the date that is 6 months
12 after the date of the enactment of the Improv-
13 ing Medicare Coverage Act, the program of
14 medical assistance for payment of the cost of
15 medicare cost-sharing under the Medicaid pro-
16 gram pursuant to sections 1902(a)(10)(E) and
17 1933; and

18 “(B) beginning on the date that is 6
19 months after the date of the enactment of the
20 Improving Medicare Coverage Act, the program
21 for medical assistance for payment of the cost
22 of medicare cost-sharing for qualified disabled
23 and working individuals described in section
24 1905(s) pursuant to section 1902(a)(10)(E)(ii)

1 and medicare premium and cost-sharing assist-
2 ance provided under section 1899C.”.

3 (c) ENSURING THAT MEDICARE COST-SHARING
4 BENEFICIARIES UNDER MEDICAID RECEIVE MEDICARE
5 COST ASSISTANCE.—Not later than 3 months after the
6 date of the enactment of this Act, the Secretary of Health
7 and Human Services and the Commissioner of Social Se-
8 curity shall jointly develop and implement a transition
9 plan to ensure that all individuals who are eligible for and
10 are receiving medical assistance for the payment of medi-
11 care cost-sharing under a State Medicaid program pursu-
12 ant to clauses (i), (iii), and (iv) of section 1902(a)(10)(E)
13 of the Social Security Act (42 U.S.C. 1396a(a)(10)(E))
14 as of the day prior to the date that is 6 months after the
15 date of the enactment of this Act, receive Medicare cost
16 assistance under section 1899C of such Act, as added by
17 section 3, as of the date that is 6 months after such date
18 of enactment.

19 **SEC. 5. ENHANCING PRESCRIPTION DRUG AFFORDABILITY**
20 **BY EXPANDING ACCESS TO ASSISTANCE WITH**
21 **OUT-OF-POCKET COSTS UNDER MEDICARE**
22 **PART D FOR LOW-INCOME SENIORS AND IN-**
23 **DIVIDUALS WITH DISABILITIES.**

24 (a) EXPANDING ACCESS.—Section 1860D–14 of the
25 Social Security Act (42 U.S.C. 1395w–114) is amended—

1 (1) in subsection (a)—

2 (A) in the heading, by striking “150 PER-
3 CENT” and inserting “200 PERCENT”;

4 (B) in paragraph (1)—

5 (i) in the heading, by striking “135
6 PERCENT” and inserting “200 PERCENT”;
7 and

8 (ii) in the matter preceding subpara-
9 graph (A)—

10 (I) by striking “135 percent” and
11 inserting “200 percent”; and

12 (II) by striking “and who meets
13 the resources requirement described in
14 paragraph (3)(D) or who is covered
15 under this paragraph under para-
16 graph (3)(B)(i)” and inserting “or
17 who is covered under this paragraph
18 under paragraph (3)(B)(v)”;

19 (C) by striking paragraph (2);

20 (D) in paragraph (3)—

21 (i) in subparagraph (A)—

22 (I) in clause (i), by adding “and”
23 at the end;

24 (II) in clause (ii)—

1 (aa) by striking “150 per-
2 cent” and inserting “200 per-
3 cent”; and

4 (bb) by striking “; and” at
5 the end and inserting a period;
6 and

7 (III) by striking clause (iii);

8 (ii) by striking subparagraphs (B) and
9 (C) and inserting the following:

10 “(B) DETERMINATIONS.—For provisions
11 relating to joint determinations with respect to
12 eligibility for Medicare cost assistance under
13 section 1899C and premium and cost-sharing
14 subsidies under this section, see section
15 1899C(b)(2).

16 “(C) INCOME DETERMINATIONS.—For pur-
17 poses of applying this section—

18 “(i) in the case of an individual who
19 is not treated as a Medicare cost-sharing
20 assistance eligible individual and a subsidy
21 eligible individual under section
22 1899C(b)(2)(D), income shall be deter-
23 mined in the manner described under sec-
24 tion 1612 for purposes of the supplemental
25 security income program, except that sup-

1 port and maintenance furnished in kind
2 shall not be counted as income; and

3 “(ii) the term ‘poverty line’ has the
4 meaning given such term in section 673(2)
5 of the Community Services Block Grant
6 Act (42 U.S.C. 9902(2)), including any re-
7 vision required by such section.”; and

8 (iii) by striking subparagraphs (D),
9 (E), and (G); and

10 (E) in paragraph (4), by striking subpara-
11 graph (B); and

12 (2) in subsection (c)(1), in the second sentence,
13 by striking “subsections (a)(1)(D) and (a)(2)(E)”
14 and inserting “subsection (a)(1)(D)”.

15 (b) TREATMENT OF REDUCTION OF COST-SHARING
16 FOR INDIVIDUALS RECEIVING HOME AND COMMUNITY
17 BASED SERVICES.—Section 1860D–14(a)(1)(D) of the
18 Social Security Act (42 U.S.C. 1395w–114(a)(1)(D)) is
19 amended—

20 (1) by striking “who would be such an institu-
21 tionalized individual or couple, if the full-benefit
22 dual eligible individual were not”; and

23 (2) by striking “or subsection (c) or (d) of sec-
24 tion 1915 or under a State plan amendment under
25 subsection (i) of such section” and inserting “, sec-

1 tion 1115A, section 1915, or under a State plan
2 amendment”.

3 (c) EFFECTIVE DATE.—The amendments made by
4 this section shall apply to plan years beginning on or after
5 the date that is 6 months after the date of the enactment
6 of this Act, and apply on or after such date.

7 **SEC. 6. SUNSET.**

8 Effective on the date that is 5 years after the date
9 that is 6 months after the date of the enactment of the
10 Improving Medicare Coverage Act, this Act (including the
11 amendments made by this Act) is repealed, and any provi-
12 sion of law amended or repealed by this Act is hereby re-
13 stored or revived as if this Act had not been enacted into
14 law.