

HR 15

National Health Insurance Act

Congress: 109 (2005–2007, Ended)

Chamber: House

Policy Area: Health

Introduced: Jan 4, 2005

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jan 25, 2005)

Official Text: <https://www.congress.gov/bill/109th-congress/house-bill/15>

Sponsor

Name: Rep. Dingell, John D. [D-MI-15]

Party: Democratic • **State:** MI • **Chamber:** House

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

| Committee | Chamber | Activity | Date |
|-------------------------------|---------|-------------|--------------|
| Energy and Commerce Committee | House | Referred To | Jan 4, 2005 |
| Ways and Means Committee | House | Referred to | Jan 25, 2005 |

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

National Health Insurance Act - Requires that medical services, hospital services, and other personal health services be made available to eligible individuals in all U.S. health-service areas as rapidly as possible. Sets forth minimum income requirements for eligibility.

Allows health care professionals and hospitals to enter into agreements to furnish services to eligible individuals.

Gives responsibility for administration of the benefits provided under this Act to local administrative committees or officers.

Allows a State to assume responsibility for administration of the personal health benefits provided under this Act.

Establishes: (1) the National Health Insurance Board in the Department of Health and Human Services (HHS); and (2) the National Advisory Medical Policy Council.

Requires the Secretary of HHS to determine the eligibility of any individual for benefits under this Act.

Limits benefits under this Act for an individual to only those services for which the individual is not eligible under Medicare.

Requires the Board to: (1) determine the sums to be made available for the provision of personal health-service benefits; and (2) allot amounts to each State based on population, available professional services and facilities, and the cost of compensation.

Allows the Board to make grants for the training of professionals providing benefits under this Act.

Amends the Internal Revenue Code to impose a value added tax of five percent on each sale of property, performance of services, and importation of property in the United States by a taxable person in a commercial-type transaction. Sets forth exceptions, including for food, housing, medical care, exports, interest, governmental entities, and certain tax-exempt organizations.

Establishes the National Health Care Trust Fund and appropriates to it amounts equal to the revenue received by the Treasury from such tax.

Requires the Secretary to study and report on the various methods to control the costs of providing personal health benefits under this Act.

Actions Timeline

- **Jan 25, 2005:** Referred to the Subcommittee on Health.
- **Jan 4, 2005:** Introduced in House
- **Jan 4, 2005:** Referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, 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.

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