

HR 2487

Preserving Medicare for All Act of 2005

Congress: 109 (2005–2007, Ended)

Chamber: House

Policy Area: Health

Introduced: May 19, 2005

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Jun 3, 2005)

Official Text: <https://www.congress.gov/bill/109th-congress/house-bill/2487>

Sponsor

Name: Rep. Cardin, Benjamin L. [D-MD-3]

Party: Democratic • **State:** MD • **Chamber:** Senate

Cosponsors

No cosponsors are listed for this bill.

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Jun 3, 2005
Ways and Means Committee	House	Referred to	May 26, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Preserving Medicare for All Act of 2005 - Amends title XVIII (Medicare) of the Social Security Act, as amended by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, to repeal provisions prohibiting the Secretary of Health and Human Services from: (1) interfering with the negotiations between drug manufacturers and pharmacies and prescription drug plan sponsors; and (2) requiring a particular formulary to institute a price structure for the reimbursement of covered Medicare part D drugs.

Allows the Medicare part D (Voluntary Prescription Drug Benefit Program) eligible individual, as an alternative to the current choice of coverage in at least two qualifying plans in the area in which the individual resides, to choose enrollment in a nationwide prescription drug plan offered by the Secretary (to replace enrollment in a fallback prescription drug plan in any case in which such plans are not available).

Directs the Secretary, through the Administrator of the Centers for Medicare & Medicaid Services, to: (1) take necessary steps to qualify and serve as a prescription drug plan sponsor; and (2) offer a prescription drug plan that offers basic prescription drug coverage throughout the United States, with a \$35 premium for 2006, adjusted annually thereafter.

Requires such a plan to be in addition to, and not in lieu of, other prescription drug plans offered.

Provides for full reimbursement to employers for the cost of qualified retiree drug coverage, and permits their costs to count towards senior's catastrophic limits.

Abolishes the comparative cost adjustment program.

Eliminates the MA Regional Plan Stabilization Fund.

Repeals certain cost containment requirements.

Actions Timeline

- **Jun 3, 2005:** Referred to the Subcommittee on Health.
- **May 26, 2005:** Referred to the Subcommittee on Health.
- **May 20, 2005:** Sponsor introductory remarks on measure. (CR E1046)
- **May 19, 2005:** Introduced in House
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- **May 19, 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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