

HR 4447

Medicaid Indian Health Act of 2005 Congress: 109 (2005–2007, Ended)

Chamber: House Policy Area: Health Introduced: Dec 6, 2005

Current Status: Referred to the Subcommittee on Health.

Latest Action: Referred to the Subcommittee on Health. (Dec 16, 2005) **Official Text:** https://www.congress.gov/bill/109th-congress/house-bill/4447

Sponsor

Name: Rep. Pallone, Frank, Jr. [D-NJ-6]

Party: Democratic • State: NJ • Chamber: House

Cosponsors (13 total)

Cosponsor	Party / State	Role Date Joined
Rep. Waxman, Henry A. [D-CA-30]	D · CA	Dec 6, 2005
Rep. McDermott, Jim [D-WA-7]	D · WA	Dec 8, 2005
Del. Christensen, Donna M. [D-VI-At Large]	$D \cdot VI$	Dec 14, 2005
Rep. Grijalva, Raúl M. [D-AZ-7]	$D \cdot AZ$	Dec 14, 2005
Rep. Hastings, Alcee L. [D-FL-23]	$D \cdot FL$	Dec 14, 2005
Rep. Herseth, Stephanie [D-SD-At Large]	$D \cdot SD$	Dec 14, 2005
Rep. Honda, Michael M. [D-CA-15]	D · CA	Dec 14, 2005
Rep. Berman, Howard L. [D-CA-28]	D · CA	Dec 15, 2005
Rep. Rangel, Charles B. [D-NY-15]	$D \cdot NY$	Dec 22, 2005
Rep. Solis, Hilda L. [D-CA-32]	D · CA	Dec 22, 2005
Rep. Kucinich, Dennis J. [D-OH-10]	D · OH	Jan 31, 2006
Rep. Fattah, Chaka [D-PA-2]	D · PA	Feb 8, 2006
Rep. Price, David E. [D-NC-4]	D · NC	Mar 30, 2006

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Dec 16, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
109 S 2074	Identical bill	Nov 18, 2005: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S13384-13385)

Summary (as of Dec 6, 2005)

Medicaid Indian Health Act of 2005 - Amends title XIX (Medicaid) of the Social Security Act to: (1) apply 100% of the federal medical assistance percentage (FMAP) to services furnished to an Indian by an urban Indian health program; (2) prohibit the imposition of premiums, deductibles, copayments, and other cost-sharing on Indians; (3) prohibit recovery against estates of Indians; (4) require consultation with Indian tribes prior to approval of "Section 115" waivers; (5) provide for the treatment of medical expenses paid by or on behalf of an Indian by an Indian health program as medical care costs for purposes of determining medically needy eligibility; and (6) give states the option to exempt Indians from reductions in eligibility or benefits.

Requires a Medicaid managed care organization contracting with an Indian Health Service (IHS) facility or program that is not a federally-qualified health center or a rural health clinic to provide payment at the highest level and amount that it would make for the services if they were furnished by a provider that is not an IHS facility or program.

Actions Timeline

• Dec 16, 2005: Referred to the Subcommittee on Health.

Dec 6, 2005: Introduced in House
Dec 6, 2005: Introduced in House

• Dec 6, 2005: Referred to the House Committee on Energy and Commerce.