

S 1634

Medicare Prescription Drug Coverage Improvement Act

Congress: 111 (2009–2011, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Aug 6, 2009

Current Status: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S9030-9038)

Latest Action: Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S9030-9038) (Aug 6, 2009)

Official Text: <https://www.congress.gov/bill/111th-congress/senate-bill/1634>

Sponsor

Name: Sen. Rockefeller, John D., IV [D-WV]

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

Cosponsors (4 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Akaka, Daniel K. [D-HI]	D · HI		Aug 6, 2009
Sen. Brown, Sherrod [D-OH]	D · OH		Aug 6, 2009
Sen. Begich, Mark [D-AK]	D · AK		Aug 7, 2009
Sen. Whitehouse, Sheldon [D-RI]	D · RI		Sep 8, 2009

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Aug 6, 2009

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Medicare Prescription Drug Coverage Improvement Act - Directs the Secretary of Health and Human Services (HHS) to establish a Federal Coordinated Health Care Office within the Centers for Medicare & Medicaid Services to bring together Medicare and Medicaid officials in order to: (1) integrate benefits more effectively under title XVIII (Medicare) of the Social Security Act (SSA) and SSA title XIX (Medicaid); and (2) improve coordination between the federal government and states for individuals dually eligible for benefits under both programs

Amends Part D (Voluntary Prescription Drug Benefit Program) of SSA title XVIII to direct the HHS Secretary to: (1) offer one or more Medicare operated prescription drug plans with a service area consisting of the entire United States; and (2) enter into negotiations with pharmaceutical manufacturers to reduce the purchase cost of covered part D drugs for eligible part D individuals who enroll in such a plan. Provides a premium subsidy and cost-sharing for subsidy eligible individuals. Directs the Secretary to establish a formulary that meets certain requirements.

Outlines accreditation requirements for all specialized Medicare Advantage plans. Revises requirements relating to specialized Medicare Advantage plans for special needs individuals.

Requires continuous updating of eligibility and enrollment data for dual eligible individuals, continuity of prescription drug coverage for such individuals, and collection and sharing of drug utilization data and formulary information for them.

Requires each contractor under the HHS Point of Sale Facilitated Enrollment process to enroll full-benefit dual eligible individuals into a Medicare operated prescription drug plan.

Requires the Secretary to lower covered part D drug prices on behalf of Medicare beneficiaries by: (1) negotiating directly with pharmaceutical manufacturers for additional discounts, rebates, and other price concessions; (2) entering into rebate agreements with manufacturers; (3) educating physicians and pharmacists on the comparative clinical effectiveness of covered part D drugs; and (4) instituting prescription drug prices negotiated under the Federal Supply Schedule of the General Services Administration (GSA) for the reimbursement of covered part D drugs.

Revises requirements for the financial assistance available to low-income Medicare beneficiaries, including those related to enrollment, a Medicare plan complaint system, and use of a single, uniform exceptions and appeals process.

Actions Timeline

- **Aug 6, 2009:** Introduced in Senate
- **Aug 6, 2009:** Sponsor introductory remarks on measure. (CR S9029-9030)
- **Aug 6, 2009:** Read twice and referred to the Committee on Finance. (text of measure as introduced: CR S9030-9038)