

S 1180

Choose Medicare Act

Congress: 117 (2021–2023, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Apr 15, 2021

Current Status: Read twice and referred to the Committee on Finance.

Latest Action: Read twice and referred to the Committee on Finance. (Apr 15, 2021)

Official Text: <https://www.congress.gov/bill/117th-congress/senate-bill/1180>

Sponsor

Name: Sen. Merkley, Jeff [D-OR]

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

Cosponsors (12 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Baldwin, Tammy [D-WI]	D · WI		Apr 15, 2021
Sen. Blumenthal, Richard [D-CT]	D · CT		Apr 15, 2021
Sen. Duckworth, Tammy [D-IL]	D · IL		Apr 15, 2021
Sen. Durbin, Richard J. [D-IL]	D · IL		Apr 15, 2021
Sen. Feinstein, Dianne [D-CA]	D · CA		Apr 15, 2021
Sen. Murphy, Christopher [D-CT]	D · CT		Apr 15, 2021
Sen. Reed, Jack [D-RI]	D · RI		Apr 15, 2021
Sen. Schatz, Brian [D-HI]	D · HI		Apr 15, 2021
Sen. Shaheen, Jeanne [D-NH]	D · NH		Apr 15, 2021
Sen. Smith, Tina [D-MN]	D · MN		Apr 15, 2021
Sen. Van Hollen, Chris [D-MD]	D · MD		Apr 15, 2021
Sen. Booker, Cory A. [D-NJ]	D · NJ		Apr 22, 2021

Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Apr 15, 2021

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
117 HR 5011	Identical bill	Aug 16, 2021: Referred to the Subcommittee on Health.

Choose Medicare Act

This bill requires the Department of Health and Human Services (HHS) to establish public health insurance plans and addresses health insurance costs. Such public plans must be offered on health insurance exchanges and (1) meet the requirements of a qualified health plan; (2) cover benefits at the gold plan level; and (3) cover reproductive services, including abortions.

Additionally, the bill makes a series of changes related to health insurance costs, including

- requiring employers to refer employees to health care navigators to assist with enrollment,
- establishing an annual limit on out-of-pocket costs for services under Medicare,
- providing HHS with the authority to negotiate prices under the Medicare prescription drug benefit program,
- expanding the premium-assistance credit by benchmarking the credit amount to the second-lowest cost gold plan and increasing the income threshold for eligibility,
- requiring qualified health plans to reduce cost sharing for low-income plan holders,
- providing funding for states to provide reinsurance to health insurance issuers and to assist individuals with out-of-pocket costs for plans offered through health insurance exchanges,
- applying the premium rate-setting requirements to large group health plans, and
- requiring HHS or states to take corrective actions to address unreasonable premium rates set by insurance issuers.

Actions Timeline

- **Apr 15, 2021:** Introduced in Senate
- **Apr 15, 2021:** Read twice and referred to the Committee on Finance.