

109TH CONGRESS  
1ST SESSION

# H. R. 1478

To amend title 10, United States Code, to provide limited TRICARE program eligibility for members of the Ready Reserve of the Armed Forces, to provide financial support for continuation of health insurance for mobilized members of reserve components of the Armed Forces, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 5, 2005

Mr. TURNER (for himself, Mr. COOPER, Mr. SMITH of New Jersey, Mr. BROWN of Ohio, Mrs. MCCARTHY, Mr. MCGOVERN, Mr. PASTOR, and Mr. PETERSON of Minnesota) introduced the following bill; which was referred to the Committee on Armed Services, and in addition to the Committees on Energy and Commerce, Education and the Workforce, and 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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## A BILL

To amend title 10, United States Code, to provide limited TRICARE program eligibility for members of the Ready Reserve of the Armed Forces, to provide financial support for continuation of health insurance for mobilized members of reserve components of the Armed Forces, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “National Guard and  
3 Reserve Comprehensive Health Benefits Act of 2005”.

4 **SEC. 2. TRICARE COVERAGE FOR MEMBERS OF THE READY**  
5 **RESERVE.**

6 (a) ELIGIBILITY.—Section 1076b of title 10, United  
7 States Code, is amended to read as follows:

8 **“§ 1076b. TRICARE program: coverage for members**  
9 **of the ready reserve**

10 “(a) ELIGIBILITY.—Members of the Selected Reserve  
11 of the Ready Reserve and members of the Individual  
12 Ready Reserve described in subsection 10144(b) of this  
13 title are eligible, subject to subsection (h)(1), to enroll in  
14 the following TRICARE program options:

15 “(1) TRICARE Prime.

16 “(2) TRICARE Standard.

17 “(b) TYPES OF COVERAGE.—(1) A member eligible  
18 under subsection (a) may enroll for either of the following  
19 types of coverage:

20 “(A) Self alone coverage.

21 “(B) Self and family coverage.

22 “(2) An enrollment by a member for self and family  
23 covers the member and the dependents of the member who  
24 are described in subparagraph (A), (D), or (I) of section  
25 1072(2) of this title.

1       “(c) OPEN ENROLLMENT PERIODS.—The Secretary  
2 of Defense shall provide for at least one open enrollment  
3 period each year. During an open enrollment period, a  
4 member eligible under subsection (a) may enroll in the  
5 TRICARE program or change or terminate an enrollment  
6 in the TRICARE program.

7       “(d) SCOPE OF CARE.—(1) A member and the de-  
8 pendants of a member enrolled in the TRICARE program  
9 under this section shall be entitled to the same benefits  
10 under this chapter as a member of the uniformed services  
11 on active duty or a dependent of such a member, respec-  
12 tively.

13       “(2) Section 1074(c) of this title shall apply with re-  
14 spect to a member enrolled in the TRICARE program  
15 under this section.

16       “(e) PREMIUMS.—(1) The Secretary of Defense shall  
17 charge premiums for coverage pursuant to enrollments  
18 under this section. The Secretary shall prescribe for each  
19 of the TRICARE program options referred to in sub-  
20 section (a) a premium for self alone coverage and a pre-  
21 mium for self and family coverage.

22       “(2) The monthly amount of the premium in effect  
23 for a month for a type of coverage under this section shall  
24 be the amount equal to 28 percent of the total amount

1 determined by the Secretary on an appropriate actuarial  
2 basis as being reasonable for the coverage.

3       “(3) The premiums payable by a member under this  
4 subsection may be deducted and withheld from basic pay  
5 payable to the member under section 204 of title 37 or  
6 from compensation payable to the member under section  
7 206 of such title. The Secretary shall prescribe the re-  
8 quirements and procedures applicable to the payment of  
9 premiums by members not entitled to such basic pay or  
10 compensation.

11       “(4) Amounts collected as premiums under this sub-  
12 section shall be credited to the appropriation available for  
13 the Defense Health Program Account under section 1100  
14 of this title, shall be merged with sums in such Account  
15 that are available for the fiscal year in which collected,  
16 and shall be available under subsection (b) of such section  
17 for such fiscal year.

18       “(f) OTHER CHARGES.—A person who receives  
19 health care pursuant to an enrollment in a TRICARE pro-  
20 gram option under this section, including a member who  
21 receives such health care, shall be subject to the same  
22 deductibles, copayments, and other nonpremium charges  
23 for health care as apply under this chapter for health care  
24 provided under the same TRICARE program option to de-

1 pendants described in subparagraph (A), (D), or (I) of sec-  
2 tion 1072(2) of this title.

3 “(g) TERMINATION OF ENROLLMENT.—(1) A mem-  
4 ber enrolled in the TRICARE program under this section  
5 may terminate the enrollment only during an open enroll-  
6 ment period provided under subsection (c), except as pro-  
7 vided in subsection (h)(2).

8 “(2) An enrollment of a member for self alone or for  
9 self and family under this section shall terminate on the  
10 first day of the first month beginning after the date on  
11 which the member ceases to be eligible under subsection  
12 (a).

13 “(3) The enrollment of a member under this section  
14 may be terminated on the basis of failure to pay the pre-  
15 mium charged the member under this section.

16 “(h) RELATIONSHIP TO TRANSITION TRICARE COV-  
17 ERAGE UPON SEPARATION FROM ACTIVE DUTY.—(1) A  
18 member may not enroll in the TRICARE program under  
19 this section while entitled to transitional health care under  
20 subsection (a) of section 1145 of this title or while author-  
21 ized to receive health care under subsection (c) of such  
22 section.

23 “(2) A member who enrolls in the TRICARE pro-  
24 gram under this section within 90 days after the date of  
25 the termination of the member’s entitlement or eligibility

1 to receive health care under subsection (a) or (c) of section  
2 1145 of this title may terminate the enrollment at any  
3 time within one year after the date of the enrollment.

4 “(i) REGULATIONS.—The Secretary of Defense, in  
5 consultation with the other administering Secretaries,  
6 shall prescribe regulations for the administration of this  
7 section.”.

8 (b) DEFINITIONS.—(1) Section 1072 of title 10,  
9 United States Code, is amended by adding at the end the  
10 following new paragraphs:

11 “(10) The term ‘TRICARE Prime’ means the  
12 managed care option of the TRICARE program.

13 “(11) The term ‘TRICARE Standard’ means  
14 the option of the TRICARE program that is also  
15 known as the Civilian Health and Medical Program  
16 of the Uniformed Services.”.

17 (2) Section 1097a(f) of such title is amended by  
18 striking “DEFINITIONS.—In this section:” and all that fol-  
19 lows through “(2) The term” and inserting “CATCHMENT  
20 AREA DEFINED.—In this section, the term”.

21 (c) PERIOD FOR IMPLEMENTATION.—Section 1076b  
22 of title 10, United States Code (as added by subsection  
23 (a)), shall apply with respect to months that begin on or  
24 after the date that is 180 days after the date of the enact-  
25 ment of this Act.

1 (d) CONFORMING REPEALS.—

2 (1) Section 1076d of title 10, United States  
3 Code, is repealed, and the table of sections at the be-  
4 ginning of chapter 55 of such title is amended by  
5 striking out the item relating to such section.

6 (2) Subsection (b) of section 701 of the Ronald  
7 W. Reagan National Defense Authorization Act for  
8 Fiscal Year 2005 (Public Law 108–375; 118 Stat.  
9 1981) is repealed.

10 **SEC. 3. ALLOWANCE FOR CONTINUATION OF NON-TRICARE**

11 **HEALTH BENEFITS COVERAGE FOR CERTAIN**

12 **MOBILIZED RESERVES.**

13 (a) PAYMENT OF PREMIUMS.—(1) Chapter 55 of title  
14 10, United States Code, is amended by inserting after sec-  
15 tion 1078a the following new section:

16 **“§ 1078b. Continuation of non-TRICARE health bene-**

17 **fits plan coverage for certain reserves**

18 **called or ordered to active duty and their**

19 **dependents**

20 “(a) PAYMENT OF PREMIUMS.—The Secretary con-  
21 cerned shall pay the applicable premium to continue in  
22 force any qualified health benefits plan coverage for an  
23 eligible reserve component member for the benefits cov-  
24 erage continuation period if timely elected by the member

1 in accordance with regulations prescribed under sub-  
2 section (j).

3 “(b) ELIGIBLE MEMBER.—A member of a reserve  
4 component is eligible for payment of the applicable pre-  
5 mium for continuation of qualified health benefits plan  
6 coverage under subsection (a) while serving on active duty  
7 pursuant to a call or order issued under a provision of  
8 law referred to in section 101(a)(13)(B) of this title dur-  
9 ing a war or national emergency declared by the President  
10 or Congress.

11 “(c) QUALIFIED HEALTH BENEFITS PLAN COV-  
12 ERAGE.—For the purposes of this section, health benefits  
13 plan coverage for a member called or ordered to active  
14 duty is qualified health benefits plan coverage if—

15 “(1) the coverage was in force on the date on  
16 which the Secretary notified the member that  
17 issuance of the call or order was pending or, if no  
18 such notification was provided, the date of the call  
19 or order;

20 “(2) on such date, the coverage applied to the  
21 member and dependents of the member described in  
22 subparagraph (A), (D), or (I) of section 1072(2) of  
23 this title; and

24 “(3) the coverage has not lapsed.

1       “(d) APPLICABLE PREMIUM.—The applicable pre-  
2 mium payable under this section for continuation of health  
3 benefits plan coverage in the case of a member is the  
4 amount of the premium payable by the member for the  
5 coverage of the member and dependents.

6       “(e) MAXIMUM AMOUNT.—The total amount that  
7 may be paid for the applicable premium of a health bene-  
8 fits plan for a member under this section in a fiscal year  
9 may not exceed the amount determined by multiplying—

10           “(1) the sum of one plus the number of the  
11 member’s dependents covered by the health benefits  
12 plan, by

13           “(2) the per capita cost of providing TRICARE  
14 coverage and benefits for dependents under this  
15 chapter for such fiscal year, as determined by the  
16 Secretary of Defense.

17       “(f) BENEFITS COVERAGE CONTINUATION PE-  
18 RIOD.—The benefits coverage continuation period under  
19 this section for qualified health benefits plan coverage in  
20 the case of a member called or ordered to active duty is  
21 the period that—

22           “(1) begins on the date of the call or order; and

23           “(2) ends on the earlier of the date on which—

24                   “(A) the member’s eligibility for transi-  
25 tional health care under section 1145(a) of this

1 title terminates under paragraph (3) of such  
2 section; or

3 “(B) the member elects to terminate the  
4 continued qualified health benefits plan cov-  
5 erage of the dependents of the member.

6 “(g) EXTENSION OF PERIOD OF COBRA COV-  
7 ERAGE.—Notwithstanding any other provision of law—

8 “(1) any period of coverage under a COBRA  
9 continuation provision (as defined in section  
10 9832(d)(1) of the Internal Revenue Code of 1986)  
11 for a member under this section shall be deemed to  
12 be equal to the benefits coverage continuation period  
13 for such member under this section; and

14 “(2) with respect to the election of any period  
15 of coverage under a COBRA continuation provision  
16 (as so defined), rules similar to the rules under sec-  
17 tion 4980B(f)(5)(C) of such Code shall apply.

18 “(h) NONDUPLICATION OF BENEFITS.—A dependent  
19 of a member who is eligible for benefits under qualified  
20 health benefits plan coverage paid on behalf of a member  
21 by the Secretary concerned under this section is not eligi-  
22 ble for benefits under the TRICARE program during a  
23 period of the coverage for which so paid.

24 “(i) REVOCABILITY OF ELECTION.—A member who  
25 makes an election under subsection (a) may revoke the

1 election. Upon such a revocation, the member's depend-  
2 ents shall become eligible for benefits under the  
3 TRICARE program as provided for under this chapter.

4 “(j) REGULATIONS.—The Secretary of Defense shall  
5 prescribe regulations for carrying out this section. The  
6 regulations shall include such requirements for making an  
7 election of payment of applicable premiums as the Sec-  
8 retary considers appropriate.”.

9 (2) The table of sections at the beginning of such  
10 chapter is amended by inserting after the item relating  
11 to section 1078a the following new item:

“1078b. Continuation of non-TRICARE health benefits plan coverage for cer-  
tain Reserves called or ordered to active duty and their depend-  
ents.”.

12 (b) APPLICABILITY.—Section 1078b of title 10,  
13 United States Code (as added by subsection (a)), shall  
14 apply with respect to calls or orders of members of reserve  
15 components of the Armed Forces to active duty as de-  
16 scribed in subsection (b) of such section, that are issued  
17 by the Secretary of a military department on or after the  
18 date of the enactment of this Act.

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