

THE CHURCH OF  
**JESUS CHRIST**  
OF LATTER-DAY SAINTS

NOV 13 2007

MISSIONARY DEPARTMENT  
50 E. North Temple St. Rm. 345W  
Salt Lake City, Utah 84150-5400

6 November 2007

Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attention: CMS—4129-P  
Mail Stop C4-26-05  
7500 Security Boulevard  
Baltimore, MD 21244-1850

RE: Special Enrollment Period for Volunteers Outside of the United States  
§406.25 and §407.21

To Whom It May Concern:

I am writing in behalf of The Church of Jesus Christ of Latter-day-Saints (the Church) regarding the proposed rule (4129-P) published pursuant to changes incorporated in the Deficit Reduction Act of 2005. These changes created a special enrollment period (SEP) for “certain international volunteers.” Missionaries of the Church who are over age 65, eligible for Medicare, and who are serving outside of the United States should qualify for this special enrollment period.

However, some of the language used in the proposed rule differs from the language in the statute in a small but significant way. This difference creates an unnecessary disincentive for our senior missionaries to take advantage of the new SEP provisions.

Under section 1837(k)(3) of the Act, an individual qualifies as an international volunteer if he or she is “serving in a *program* outside of the United States that covers *at least a 12 month period*, and that is sponsored by an organization described in section 501(c)(3) of the Internal Revenue Code of 1986....” In addition, the statute requires that the “individual must also have health insurance coverage to cover medical services while serving overseas in the program.”

One section of the proposed rule states, in essence, that an individual must actually serve outside of the United States for 12 consecutive months. Our missionaries serving outside of the United States are assigned a term of service that is 18 months or longer. In other words, they do serve in a “program” that covers at least a 12 month period. They are expected to serve the full term of their assignment, and they know this when they leave the United States. This in actual practice is what happens. In the last five years there have been 4,737 individual missionaries over age 65 who have been assigned outside of the United States. Of this number, only 37 have returned home within 12 months of leaving. In these cases they returned home because of a personal crisis. They may have had an accident or other type of medical emergency or there may have been special circumstances back home that required their attention.

Under your proposed rule, a prospective missionary must determine if they are willing to take the risk that they may be one of the few that has an unfortunate experience that would require them to return to the United States before 12 months have passed. If this happens, they would be without Medicare coverage for three to 15 months and their Part B premium would be surcharged for the rest of their lives if they are not granted the SEP. Most will not be willing to take that risk because the consequences are so harsh.

It seems that the intent of the changes incorporated into the Deficit Reduction Act were to help these international volunteers who are required to purchase health insurance. Furthermore, the language of the statute seems to provide a way for CMS to extend this help. We would, accordingly, strongly encourage you to modify the proposed rule to clearly require that such individuals be in a "program that lasts at least 12 months," rather than require 12 completed months of service.

**Perhaps a little background** on the missionary program would be helpful. We have Medicare-eligible missionaries that serve in 157 countries around the world. They serve at their own expense and receive no subsidy from the Church except for their travel expenses to and from their assigned country. They are required to have health insurance, and because Medicare does not cover them while outside of the United States they must purchase another policy.

If these missionaries are required to continue their Medicare Part B coverage they will pay two premiums but receive coverage only from the non-Medicare plan. This is a significant financial hardship for many missionaries. Their situation is not unlike Medicare-eligible individuals who continue working in the United States and have a medical plan through their employer. These employees are not required to pay Medicare Part B Premiums until they actually retire. International missionaries are not paid a salary but they do continue to work voluntarily, and they cannot use their Medicare benefits while they do so. It seems fair and equitable that they be granted the same privilege as employees who are eligible for Medicare but who maintain their own medical plan until their work ends and Medicare becomes their primary coverage.

Our missionaries provide a tremendous service to the people of the countries where they are assigned. They are deeply loved and highly respected and are invaluable emissaries of good will. We respectfully request that you modify the proposed rule to be consistent with the language and intent **of the statute.**

Sincerely,

A handwritten signature in black ink, appearing to read "Richard G. Hinckley". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Richard G. Hinckley  
Executive Director