

115TH CONGRESS  
1ST SESSION

# H. R. \_\_\_\_\_

To amend the Patient Protection and Affordable Care Act to provide temporary relief from the annual fee imposed on health insurance providers.

---

## IN THE HOUSE OF REPRESENTATIVES

Mrs. NOEM introduced the following bill; which was referred to the Committee on \_\_\_\_\_

## A BILL

To amend the Patient Protection and Affordable Care Act to provide temporary relief from the annual fee imposed on health insurance providers.

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

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Protecting Families  
5 and Small Businesses Act of 2017”.

6 **SECTION 1. RELIEF FROM ANNUAL FEE ON HEALTH INSUR-**  
7 **ANCE PROVIDERS.**

8 (a) PARTIAL RELIEF FOR 2018 FOR CERTAIN PRO-  
9 VIDERS.—

1           (1) IN GENERAL.—Section 9010 of the Patient  
2           Protection and Affordable Care Act is amended by  
3           adding at the end the following new subsection:

4           “(k) OPTIONAL RELIEF FOR 2018.—

5           “(1) IN GENERAL.—In the case of a covered en-  
6           tity that meets the requirements of paragraph (2),  
7           the fee described in subsection (a)(1) shall be re-  
8           duced by the sum of the premium rebates provided  
9           pursuant to paragraph (2).

10           “(2) REBATES FOR INDIVIDUALS.—A covered  
11           entity meets the requirements of this paragraph if  
12           such entity demonstrates to the satisfaction of the  
13           Secretary of the Treasury (in consultation with the  
14           Secretary of Health and Human Services, Adminis-  
15           trator of the Centers for Medicare and Medicaid  
16           Services, and the National Association of Insurance  
17           Commissioners, as appropriate) that such entity will  
18           provide —

19           “(A) not later than April 30, 2019, to each  
20           individual enrolled in calendar year 2018 in a  
21           qualified rebate plan offered by such entity a  
22           premium rebate equal to the lesser of—

23           “(i) 2 percent of the net premiums  
24           written for coverage under such plan for  
25           such individual for calendar year 2018, or

1                   “(ii) the amount of the premiums de-  
2                   scribed in subparagraph (A) paid by such  
3                   individual, and

4                   “(B) for individuals who will receive a pre-  
5                   mium rebate described in subparagraph (A)  
6                   after September 30, 2018, notice to such indi-  
7                   viduals by such date of such premium rebate.

8                   “(3) QUALIFIED REBATE PLAN.—For purposes  
9                   of this subsection, the term ‘qualified rebate plan’  
10                  means, with respect to a covered entity, any com-  
11                  bination, as elected by the covered entity, of the fol-  
12                  lowing categories of health plans:

13                  “(A) A health plan offered in the indi-  
14                  vidual market.

15                  “(B) A health plan offered in the group  
16                  market.

17                  “(C) A Medicare Advantage plan under  
18                  part C of title XVIII of the Social Security Act.

19                  “(D) A prescription drug plan offered  
20                  under part D of such title XVIII.

21                  “(4) REDUCTION IN PREMIUMS TREATED AS  
22                  REBATES.—For purposes of this subsection, a reduc-  
23                  tion in premiums owed by an individual for a month  
24                  shall be treated as a premium rebate paid to such  
25                  individual on the first day of such month.

1           “(1) MEDICAID MANAGED CARE PLANS REDUCTION  
2 FOR 2018.—In the case of a medicaid managed care orga-  
3 nization (as defined in section 1903(m)(1)(A) of the Social  
4 Security Act), the fee described in subsection (a)(1) shall  
5 be reduced by an amount equal to 2 percent of the net  
6 premiums written for coverage under a medicaid managed  
7 care plan (under section 1903(m) or section 1932 of such  
8 Act) for calendar year 2018.”.

9           (2) CONFORMING AMENDMENT.—Paragraph (1)  
10 of section 9010(b) of the Patient Protection and Af-  
11 fordable Care Act is amended by striking “the fee  
12 under this section” and inserting “the amount deter-  
13 mined under this subsection”.

14           (b) RELIEF FOR 2019.—

15           (1) IN GENERAL.—Section 9010(j) of the Pa-  
16 tient Protection and Affordable Care Act is amended  
17 by striking “and” at the end of paragraph (1), by  
18 striking the period at the end of paragraph (2) and  
19 inserting “, and ending before January 1, 2019,  
20 and”, and by adding at the end the following new  
21 paragraph:

22           “(3) beginning after December 31, 2019.”.

23           (c) MEDICAL LOSS RATIO.—Section 2718 of the  
24 Public Health Service Act is amended by adding at the  
25 end the following new subsection:

1           “(f) AMOUNTS EXPENDED FOR PREMIUM REBATES  
2 NOT INCLUDED.—No amount expended pursuant to sub-  
3 sections (k) or (l) of section 9010 of the Patient Protec-  
4 tion and Affordable Care Act shall be taken into account  
5 for purposes of this section.”.

6           (d) EFFECTIVE DATE.—

7           (1) The amendments made by subsections (a)  
8 and (b) shall apply with respect to calendar years  
9 beginning after December 31, 2017.

10           (2) The amendment made by subsection (c)  
11 shall apply with respect to plan years beginning  
12 after December 31, 2017.