	TH CONGRESS 1ST SESSION
То	provide for temporary funding for health insurance cost-sharing reduction payments and provide targeted tax relief, and for other purposes.
	IN THE SENATE OF THE UNITED STATES
Mr	Hatch introduced the following bill; which was read twice and referred to the Committee on
	A BILL
To	provide for temporary funding for health insurance cost-
	sharing reduction payments and provide targeted tax re-
	lief, and for other purposes.
1	Be it enacted by the Senate and House of Representa-
2	$tives\ of\ the\ United\ States\ of\ America\ in\ Congress\ assembled,$
3	SECTION 1. SHORT TITLE.
4	This Act may be cited as the "Health Care Market
5	Certainty and Mandate Relief Act".
6	SEC. 2. COST SHARING REDUCTION PAYMENTS.
7	(a) In General.—
8	(1) APPROPRIATIONS.—There is appropriated

to the Secretary of Health and Human Services, out

of any funds in the Treasury not otherwise appro-

9

10

1 priated, such sums as may be necessary for pay-2 ments for cost-sharing reductions authorized by sec-3 tion 1402 of Public Law 111–148, including through 4 advanced payment of such reductions under section 5 1412 of such Public Law for plan years 2017, 2018, 6 and 2019 (and including for adjustments to any 7 prior obligations for such payments). 8 (2)ADJUSTMENTS.—Notwithstanding any 9 other provision of this Act, payments and other ac-10 tions for adjustments to obligations incurred prior to 11 December 31, 2019, may be made through Decem-12 ber 31, 2020. 13 (3) Limitation.—Amounts appropriated under 14 paragraph (1) shall not include payment to an issuer 15 of a qualified health plan that includes coverage of 16 abortion (other than any abortion necessary to save 17 the life of the mother or any abortion with respect 18 to a pregnancy that is the result of an act of rape 19 or incest). 20 (b) Special Rule for Plan Year 2018 Pay-21 MENTS.—Section 1402(c) of Public Law 111–148 (42) 22 U.S.C. 18071(c)) is amended— 23 (1) in paragraph (3)(A), by striking "An 24 issuer" and inserting "Subject to paragraph (6), an 25 issuer"; and

1	(2) by adding at the end the following new
2	paragraph:
3	"(6) Special rule for Plan Year 2018 Pay-
4	MENTS.—
5	"(A) In General.—The Secretary shall
6	make payments under paragraph (3)(A), includ-
7	ing through advanced payment for cost-sharing
8	reduction under section 1412, for plan year
9	2018 to an issuer of a qualified health plan,
10	subject to subparagraph (C), only if the Sec-
11	retary determines, based on a certification and
12	appropriate documentation from the issuer and
13	a certification from State regulators, that the
14	premium rates applied under such plan for such
15	plan year were based on the assumption of re-
16	ceiving payments under paragraph (3)(A) for
17	such plan year (including by reason of the plan
18	being offered in a State in which the State reg-
19	ulators instructed issuers of health plans in
20	such State to make such an assumption).
21	"(B) Recovery of Past Payments.—If
22	the Secretary makes payments to an issuer of
23	a qualified health plan under paragraph (3)(A)
24	for plan year 2018 and subsequently determines
25	that such issuer increased premium rates for

that plan year because the issuer expected, or
was instructed by applicable State regulators to
expect, that the issuer would not receive such
payments (or, in the case of such payments
made to an issuer of a qualified health plan for
plan year 2018 pursuant to subparagraph (C),
determines that such issuer did not reduce pre-
mium rates under such plan for such plan year
to such rates as described in clause (i)(I) of
such subparagraph) the Secretary may reduce
payments due to such issuer under paragraph
(3)(A) for a subsequent plan year by the
amount paid to such issuer under such para-
graph for plan year 2018.
"(C) Payments allowed in case of
ISSUERS IN STATES PROVIDING FOR PREMIUM
ADJUSTMENT PROCESS.—Notwithstanding sub-
paragraph (A), the Secretary may make pay-
ments under paragraph (3)(A) for plan year
2018 to an issuer of a qualified health plan not
otherwise eligible for such payments pursuant
to subparagraph (A) if—
"(i) the qualified health plan is of-
fered in a State for such plan year for
which the State insurance commissioner

1	notifies the Secretary of the Treasury and
2	the Secretary of Health and Human Serv-
3	ices of a process provided for in the State
4	under which—
5	"(I) issuers of qualified health
6	plans in such State choosing to par-
7	ticipate in such process are required
8	to reduce premium rates under such
9	plans for plan year 2018 to the rates
10	that would have been applied under
11	such plans for such plan year had the
12	issuers assumed payments for cost-
13	sharing reductions under such para-
14	graph would be received for such plan
15	year; and
16	"(II) the State submits to the
17	Secretaries information to verify that
18	the reduction of the premium rate
19	under a qualified health plan offered
20	by an issuer participating under such
21	process satisfies the reduction require-
22	ment described in subclause (I); and
23	"(ii) the issuer of such qualified
24	health plan chooses to participate in such
25	process.

1	"(D) RECONCILIATION PROCESS.—The
2	Secretary of the Treasury and the Secretary of
3	Health and Human Services shall adjust the
4	methodologies under section 156.430 of title 45,
5	Code of Federal Regulations (as in effect on the
6	date of enactment of the Health Care Market
7	Certainty and Mandate Relief Act), as may be
8	necessary to correct for any overpayments or
9	underpayments made under this section to an
10	issuer in accordance with this paragraph.".
11	SEC. 3. MORATORIUM ON INDIVIDUAL MANDATE.
12	Section 5000A of the Internal Revenue Code of 1986
13	is amended—
14	(1) in subsection (a), by striking "An applica-
15	ble" and inserting "Except as provided in subsection
16	(h), an applicable"; and
17	(2) by adding at the end the following new sub-
18	section:
19	"(h) Suspension.—This section shall not apply to
20	any month beginning after December 31, 2016, and before
21	January 1, 2022.".
22	SEC. 4. MORATORIUM ON EMPLOYER MANDATE.
23	Section 4980H of the Internal Revenue Code of 1986
24	is amended by adding at the end the following new sub-
25	section:

1	"(e) Suspension.—This section shall not apply to
2	any month beginning after December 31, 2014, and before
3	January 1, 2018.".
4	SEC. 5. MAXIMUM CONTRIBUTION LIMIT TO HEALTH SAV
5	INGS ACCOUNT INCREASED TO AMOUNT OF
6	DEDUCTIBLE AND OUT-OF-POCKET LIMITA
7	TION.
8	(a) In General.—Subsection (b) of section 223 of
9	the Internal Revenue Code of 1986 is amended by adding
10	at the end the following new paragraph:
11	"(9) Increased limitation.—In the case of
12	any month beginning after December 31, 2017, and
13	before January 1, 2023—
14	"(A) paragraph (2)(A) shall be applied by
15	substituting 'the amount in effect under sub-
16	section $(c)(2)(A)(ii)(I)$ ' for '\$2,250', and
17	"(B) paragraph (2)(B) shall be applied by
18	substituting 'the amount in effect under sub-
19	section (c)(2)(A)(ii)(II)' for '\$4,500'.".
20	(b) Effective Date.—The amendment made by
21	this section shall apply to taxable years beginning after
22	December 31, 2017.