116TH CONGRESS 1ST SESSION	S.
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To amend titles XVIII and XIX of the Social Security Act to make improvements to the treatment of the United States territories under the Medicare and Medicaid programs, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. Sanders (for himself and Mr. Merkley) introduced the following bill; which was read twice and referred to the Committee on

A BILL

- To amend titles XVIII and XIX of the Social Security Act to make improvements to the treatment of the United States territories under the Medicare and Medicaid programs, 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; TABLE OF CONTENTS.
 - 4 (a) Short Title.—This Act may be cited as the
 - 5 "Territories Health Equity Act of 2019".
- 6 (b) Table of Contents.—The table of contents of
- 7 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—MEDICAID

- Sec. 101. Elimination of general Medicaid funding limitations ("cap") for territories.
- Sec. 102. Elimination of specific Federal medical assistance percentage (FMAP) limitation for territories; temporary increase in FMAP for Puerto Rico and the Virgin Islands to 100 percent.
- Sec. 103. Application of Medicaid waiver authority to all of the territories.
- Sec. 104. Permitting Medicaid DSH allotments for territories.

TITLE II—MEDICARE

Subtitle A—Part A

- Sec. 201. Calculation of Medicare DSH payments for IPPS hospitals in Puerto Rico
- Sec. 202. Rebasing target amount for hospitals in territories.
- Sec. 203. Medicare DSH target adjustment for hospitals in territories.

Subtitle B—Part B

Sec. 211. Application of part B deemed enrollment process to residents of Puerto Rico; special enrollment period and limit on late enrollment penalties.

Subtitle C—Medicare Advantage (Part C)

Sec. 221. Adjustment in benchmark for low-base payment counties in Puerto Rico.

Subtitle D—Part D

- Sec. 231. Improved use of allocated prescription drug funds by territories.
- Sec. 232. Report on treatment of territories under Medicare part D.

TITLE III—MISCELLANEOUS

- Sec. 301. Modified treatment of territories with respect to application of ACA annual health insurance provider fees.
- Sec. 302. Medicaid and CHIP territory transparency and information.
- Sec. 303. Report on exclusion of territories from Exchanges.
- Sec. 304. Access to coverage for individuals in certain areas without any available Exchange plans.
- Sec. 305. Extension of family-to-family health information centers program to territories.

1 TITLE I—MEDICAID

2 SEC. 101. ELIMINATION OF GENERAL MEDICAID FUNDING

- 3 LIMITATIONS ("CAP") FOR TERRITORIES.
- 4 (a) In General.—Section 1108 of the Social Secu-
- 5 rity Act (42 U.S.C. 1308) is amended—

1	(1) in subsection (f), in the matter preceding
2	paragraph (1), by striking "subsection (g)" and in-
3	serting "subsections (g) and (h)";
4	(2) in subsection $(g)(2)$, in the matter pre-
5	ceding subparagraph (A), by inserting "subsection
6	(h)" after "subject to"; and
7	(3) by adding at the end the following new sub-
8	section:
9	"(h) Sunset of Medicaid Funding Limitations
10	FOR PUERTO RICO, THE VIRGIN ISLANDS, GUAM, THE
11	NORTHERN MARIANA ISLANDS, AND AMERICAN SAMOA.—
12	Subsections (f) and (g) shall not apply to Puerto Rico,
13	the Virgin Islands, Guam, the Northern Mariana Islands,
14	and American Samoa beginning with fiscal year 2020.".
15	(b) Conforming Amendments.—
16	(1) Section 1902(j) of the Social Security Act
17	(42 U.S.C. 1396a(j)) is amended by striking ", the
18	limitation in section 1108(f),".
19	(2) Section 1903(u) of the Social Security Act
20	(42 U.S.C. 1396b(u)) is amended by striking para-
21	graph (4).
22	(c) Effective Date.—The amendments made by
23	this section shall apply beginning with fiscal year 2020.

1	SEC. 102. ELIMINATION OF SPECIFIC FEDERAL MEDICAL
2	ASSISTANCE PERCENTAGE (FMAP) LIMITA-
3	TION FOR TERRITORIES; TEMPORARY IN-
4	CREASE IN FMAP FOR PUERTO RICO AND
5	THE VIRGIN ISLANDS TO 100 PERCENT.
6	Section 1905(b) of the Social Security Act (42 U.S.C.
7	1396d(b)) is amended—
8	(1) in clause (2), by inserting "for fiscal years
9	before fiscal year 2020" after "American Samoa";
10	and
11	(2) by adding at the end the following new sen-
12	tence: "Notwithstanding the first sentence of this
13	subsection, for each of fiscal years 2020 and 2021,
14	the Federal medical assistance percentage for Puerto
15	Rico and the Virgin Islands shall be 100 percent.".
16	SEC. 103. APPLICATION OF MEDICAID WAIVER AUTHORITY
17	TO ALL OF THE TERRITORIES.
18	(a) In General.—Section 1902(j) of the Social Se-
19	curity Act (42 U.S.C. 1396a(j)) is amended—
20	(1) by striking "American Samoa and the
21	Northern Mariana Islands" and inserting "Puerto
22	Rico, the Virgin Islands, Guam, the Northern Mar-
23	iana Islands, and American Samoa";
24	(2) by striking "American Samoa or the North-
25	ern Mariana Islands" and inserting "Puerto Rico,

1	the Virgin Islands, Guam, the Northern Mariana Is-
2	lands, or American Samoa'';
3	(3) by inserting "(1)" before "Notwith-
4	standing";
5	(4) by inserting "except as otherwise provided
6	in this subsection," after "Notwithstanding any
7	other requirement of this title"; and
8	(5) by adding at the end the following:
9	"(2) The Secretary may not waive under this sub-
10	section—
11	"(A) the requirement of subsection
12	(a)(10)(A)(i)(IX) (relating to coverage of adults for-
13	merly under foster care) with respect to any terri-
14	tory;
15	"(B) the requirement to provide medical assist-
16	ance for early and periodic screening, diagnostic,
17	and treatment services (as defined in section
18	1905(r)) for individuals who are eligible for assist-
19	ance under the program and who under the age of
20	21; or
21	"(C) the requirement to provide for payment
22	for services described in section 1905(a)(2)(C) fur-
23	nished by a Federally-qualified health center and
24	services described in section 1905(a)(2)(B) furnished

1	by a rural health clinic in accordance with the provi-
2	sions of subsection (bb).".
3	(b) Effective Date.—The amendments made by
4	this section shall apply beginning October 1, 2019.
5	SEC. 104. PERMITTING MEDICAID DSH ALLOTMENTS FOR
6	TERRITORIES.
7	Section 1923(f) of the Social Security Act (42 U.S.C.
8	1396r-4(f)) is amended—
9	(1) in paragraph (6), by adding at the end the
10	following new subparagraph:
11	"(C) Territories.—
12	"(i) FISCAL YEAR 2020.—For fiscal
13	year 2020, the DSH allotment for Puerto
14	Rico, the Virgin Islands, Guam, the North-
15	ern Mariana Islands, and American Samoa
16	shall bear the same ratio to \$300,000,000
17	as the ratio of the number of individuals
18	who are low-income or uninsured and re-
19	siding in such respective territory (as esti-
20	mated from time to time by the Secretary)
21	bears to the sums of the number of such
22	individuals residing in all of the territories.
23	"(ii) Subsequent fiscal year.—
24	For each subsequent fiscal year, the DSH
25	allotment for each such territory is subject

1	to an increase in accordance with para-
2	graph (3)."; and
3	(2) in paragraph (9), by inserting before the pe-
4	riod at the end the following: ", and includes, begin-
5	ning with fiscal year 2020, Puerto Rico, the Virgin
6	Islands, Guam, the Northern Mariana Islands, and
7	American Samoa''.
8	TITLE II—MEDICARE
9	Subtitle A—Part A
10	SEC. 201. CALCULATION OF MEDICARE DSH PAYMENTS FOR
11	IPPS HOSPITALS IN PUERTO RICO.
12	Section 1886(d)(9)(D)(iii) of the Social Security Act
13	(42 U.S.C. 1395ww(d)(9)(D)(iii)) is amended to read as
14	follows:
15	"(iii) Subparagraph (F) (relating to dispropor-
16	tionate share payments), including application of
17	subsection (r), except that for this purpose—
18	"(I) the sum described in clause (ii) of this
19	subparagraph shall be substituted for the sum
20	referred to in paragraph (5)(F)(ii)(I); and
21	"(II) for discharges occurring on or after
22	October 1, 2019, subclause (I) of paragraph
23	(5)(F)(vi) shall be applied by substituting for
24	the numerator described in such subclause the
25	number of subsection (d) Puerto Rico hospital's

1	patient days for the cost reporting period in-
2	volved which were made up of patients who (for
3	such days) were entitled to benefits under part
4	A of this title and were—
5	"(aa) entitled to supplementary secu-
6	rity income benefits (excluding any State
7	supplementation) under title XVI of this
8	Act;
9	"(bb) eligible for medical assistance
10	under a State plan under title XIX; or
11	"(cc) receiving aid or assistance under
12	any plan of the State approved under title
13	I, X, XIV, or XVI.".
14	SEC. 202. REBASING TARGET AMOUNT FOR HOSPITALS IN
15	TERRITORIES.
16	Section 1886(b)(3) of the Social Security Act (42
17	U.S.C. 1395ww(b)(3)) is amended by adding at the end
18	the following new subparagraph:
19	"(M)(i) For each cost reporting period be-
20	ginning on or after October 1, 2019, in the case
2021	ginning on or after October 1, 2019, in the case of a hospital located in a territory of the United
21	of a hospital located in a territory of the United
21 22	of a hospital located in a territory of the United States, there shall be substituted for the target
212223	of a hospital located in a territory of the United States, there shall be substituted for the target amount otherwise determined under subpara-

1	in an amount of payment under this section to
2	the hospital for such period that is greater than
3	the amount of payment that would be made
4	under this section to the hospital for such pe-
5	riod if this subparagraph were not to apply.
6	"(ii) For purposes of this subparagraph,
7	the term 'rebased target amount' has the mean-
8	ing given the term 'target amount' in subpara-
9	graph (A), except that—
10	"(I) there shall be substituted for the
11	preceding 12-month cost reporting period
12	the 12-month cost reporting period begin-
13	ning during fiscal year 2015 (or, at the op-
14	tion of the hospital, beginning during fiscal
15	year 2017);
16	``(II) any reference in subparagraph
17	(A)(i) to the 'first such cost reporting pe-
18	riod' is deemed a reference to the first cost
19	reporting period following the 12-month
20	cost reporting period beginning during fis-
21	cal year 2015 (or, at the option of the hos-
22	pital, beginning during fiscal year 2017);
23	and
24	"(III) the applicable percentage in-
25	crease shall only be applied under subpara-

1	graph (B)(ii) for cost reporting periods be-
2	ginning on or after October 1, 2019.
3	"(iii) Nothing in this subparagraph shall
4	affect any pending request by a hospital for a
5	new target amount for any cost reporting pe-
6	riod beginning during a fiscal year before fiscal
7	year 2020.''.
8	SEC. 203. MEDICARE DSH TARGET ADJUSTMENT FOR HOS-
9	PITALS IN TERRITORIES.
10	Section 1886(b)(3) of the Social Security Act (42
11	U.S.C. 1395ww(b)(3)), as amended by section 202, is fur-
12	ther amended by adding at the end the following new sub-
13	paragraph:
14	"(N)(i) For each cost reporting period be-
15	ginning on or after October 1, 2019, in the case
16	of a hospital that is located in a territory of the
17	United States other than Puerto Rico and that
18	would be a subsection (d) hospital if it were lo-
19	cated in one of the 50 States, the target
20	amount shall be increased by—
21	"(I) in the case that such hospital has
22	a disproportionate patient percentage of
23	not less than 15 percent and not greater
24	than 40 percent, 10 percent; and

1	"(II) in the case that such hospital
2	has a disproportionate patient percentage
3	of greater than 40 percent, 10 percent plus
4	60 percent of the number of percentage
5	points by which such hospital's dispropor-
6	tionate patient percentage exceeds 40 per-
7	cent.
8	"(ii) For purposes of this subparagraph,
9	the term 'disproportionate patient percentage'
10	has the meaning given such term in subsection
11	(d)(5)(F)(vi), except that in applying such
12	meaning any reference under such subsection to
13	individuals entitled to supplementary security
14	income under title XVI shall be deemed for pur-
15	poses of this subparagraph to include individ-
16	uals—
17	"(I) eligible for medical assistance
18	under a State plan under title XIX; or
19	"(II) receiving aid or assistance under
20	any plan of the territory approved under
21	title I, X, XIV, or XVI.".

1	Subtitle B—Part B
2	SEC. 211. APPLICATION OF PART B DEEMED ENROLLMENT
3	PROCESS TO RESIDENTS OF PUERTO RICO;
4	SPECIAL ENROLLMENT PERIOD AND LIMIT
5	ON LATE ENROLLMENT PENALTIES.
6	(a) Application of Part B Deemed Enrollment
7	PROCESS TO RESIDENTS OF PUERTO RICO.—Section
8	1837(f)(3) of the Social Security Act (42 U.S.C.
9	1395p(f)(3)) is amended by striking ", exclusive of Puerto
10	Rico".
11	(b) Effective Date.—The amendment made by
12	subsection (a) shall apply to individuals whose initial en-
13	rollment period under section 1837(d) of the Social Secu-
14	rity Act begins on or after the first day of the effective
15	month, specified by the Secretary of Health and Human
16	Services under section 1839(j)(1)(C) of such Act, as added
17	by subsection $(c)(2)$.
18	(c) Transition Providing Special Enrollment
19	PERIOD AND LIMIT ON LATE ENROLLMENT PENALTIES
20	FOR CERTAIN MEDICARE BENEFICIARIES.—Section 1839
21	of the Social Security Act (42 U.S.C. 1395r) is amend-
22	ed—
23	(1) in the first sentence of subsection (b), by in-
24	serting "subject to section 1839(j)(2)," after "sub-
25	section (i)(4) or (l) of section 1837,"; and

1	(2) by adding at the end the following new sub-
2	section:
3	"(j) Special Rules for Certain Residents of
4	Puerto Rico.—
5	"(1) Special enrollment period, coverage
6	PERIOD FOR RESIDENTS WHO ARE ELIGIBLE BUT
7	NOT ENROLLED.—
8	"(A) IN GENERAL.—In the case of a tran-
9	sition individual (as defined in paragraph (3))
10	who is not enrolled under this part as of the
11	day before the first day of the effective month
12	(as defined in subparagraph (C)), the Secretary
13	shall provide for a special enrollment period
14	under section 1837 of 7 months beginning with
15	such effective month during which the indi-
16	vidual may be enrolled under this part.
17	"(B) COVERAGE PERIOD.—In the case of
18	such an individual who enrolls during such spe-
19	cial enrollment period, the coverage period
20	under section 1838 shall begin on the first day
21	of the second month after the month in which
22	the individual enrolls.
23	"(C) Effective month defined.—In
24	this section, the term 'effective month' means a
25	month, not earlier than October 2020 and not

1	later than January 2021, specified by the Sec-
2	retary.
3	"(2) Reduction in late enrollment pen-
4	ALTIES FOR CURRENT ENROLLEES AND INDIVID-
5	UALS ENROLLING DURING TRANSITION.—
6	"(A) IN GENERAL.—In the case of a tran-
7	sition individual who is enrolled under this part
8	as of the day before the first day of the effec-
9	tive month or who enrolls under this part on or
10	after the date of the enactment of this sub-
11	section but before the end of the special enroll-
12	ment period under paragraph (1)(A), the
13	amount of the late enrollment penalty imposed
14	under section 1839(b) shall be recalculated by
15	reducing the penalty to 15 percent of the pen-
16	alty otherwise established.
17	"(B) APPLICATION.—Subparagraph (A)
18	shall be applied in the case of a transition indi-
19	vidual who—
20	"(i) is enrolled under this part as of
21	the month before the effective month, for
22	premiums for months beginning with such
23	effective month; or
24	"(ii) enrolls under this part on or
25	after the date of the enactment of this Act

1	and before the end of the special enroll-
2	ment period under paragraph (1)(A), for
3	premiums for months during the coverage
4	period under this part which occur during
5	or after the effective month.
6	"(C) Loss of reduction if individual
7	TERMINATES ENROLLMENT.—Subparagraph
8	(A) shall not apply to a transition individual if
9	the individual terminates enrollment under this
10	part after the end of the special enrollment pe-
11	riod under paragraph (1).
12	"(3) Transition individual defined.—In
13	this section, the term 'transition individual' means
14	an individual who resides in Puerto Rico and who
15	would have been deemed enrolled under this part
16	pursuant to section 1837(f) before the first day of
17	the effective month but for the fact that the indi-
18	vidual was a resident of Puerto Rico, regardless of
19	whether the individual is enrolled under this part as
20	of such first day.".

1	Subtitle C—Medicare Advantage
2	(Part C)
3	SEC. 221. ADJUSTMENT IN BENCHMARK FOR LOW-BASE
4	PAYMENT COUNTIES IN PUERTO RICO.
5	Section 1853(n) of the Social Security Act (42 U.S.C
6	1395w-23(n)) is amended—
7	(1) in paragraph (1), by striking "and (5)" and
8	inserting "(5), and (6)";
9	(2) in paragraph (4), by striking "In no case"
10	and inserting "Subject to paragraph (6), in no
11	case"; and
12	(3) by adding at the end the following new
13	paragraph:
14	"(6) Special rules for blended bench-
15	MARK AMOUNT FOR TERRITORIES.—
16	"(A) In General.—Subject to subpara-
17	graph (B), the blended benchmark amount for
18	an area in a territory for a year (beginning with
19	2020) shall not be less than 80 percent of the
20	national average of the base payment amounts
21	specified in subparagraph (2)(E) for such year
22	for areas within the 50 States and the District
23	of Columbia.
24	"(B) LIMITATION.—In no case shall the
25	blended benchmark amount for an area in a

1	territory for a year under subparagraph (A) ex-
2	ceed the lowest blended benchmark amount for
3	any area within the 50 States and the District
4	of Columbia for such year.".
5	Subtitle D—Part D
6	SEC. 231. IMPROVED USE OF ALLOCATED PRESCRIPTION
7	DRUG FUNDS BY TERRITORIES.
8	Section 1935(e) of the Social Security Act (42 U.S.C.
9	1396u-5(e)) is amended by adding at the end the fol-
10	lowing new paragraph:
11	"(5) Improved use of funds for low-in-
12	COME PART D ELIGIBLE INDIVIDUALS.—This sub-
13	section shall be applied beginning with fiscal year
14	2020 as follows, notwithstanding any other provision
15	of this title:
16	"(A) CLARIFYING STATE FLEXIBILITY TO
17	COVER NON-DUAL-ELIGIBLE INDIVIDUALS.—In
18	this title, the term 'medical assistance' includes
19	financial assistance furnished by a State under
20	this subsection to part D eligible individuals
21	who, if they were residing in one of the 50
22	States or the District of Columbia, would qual-
23	ify as subsidy eligible individuals under section
24	1860D-14(a)(3), and without regard to wheth-

I	er such individuals otherwise quality for medical
2	assistance under this title.
3	"(B) 100 percent fmap to reflect no
4	STATE MATCHING REQUIRED FOR PART D LOW
5	INCOME SUBSIDIES.—The Federal medical as-
6	sistance percentage applicable to the assistance
7	furnished under this subsection is 100 percent.
8	"(C) Limited funding for special
9	RULES.—Subparagraphs (A) and (B), and the
10	provision of medical assistance for covered part
11	D drugs to low-income part D eligible individ-
12	uals for a State and period under this sub-
13	section, is limited to the amount specified in
14	paragraph (3) for such State and period.".
15	SEC. 232. REPORT ON TREATMENT OF TERRITORIES
16	UNDER MEDICARE PART D.
17	Paragraph (4) of section 1935(e) of the Social Secu-
18	rity Act (42 U.S.C. 1396u-5(e)) is amended to read as
19	follows:
20	"(4) Report on application of sub-
21	SECTION.—
22	"(A) In General.—Not later than Feb-
23	ruary 1, 2021, the Secretary shall submit to
24	Congress a report on the application of this

1	subsection during the period beginning fisca
2	year 2006 and ending fiscal year 2020.
3	"(B) Information to be included in
4	REPORT.—Such report shall include—
5	"(i) program guidance issued by the
6	Secretary to implement this subsection;
7	"(ii) for each territory, information or
8	the increased amount under paragraph (3)
9	and how the territory has applied such
10	amount, including the territory's program
11	design, expenditures, and number of indi-
12	viduals (and dual-eligible individuals) as-
13	sisted; and
14	"(iii) differences between how such
15	territories are treated under part D of title
16	XVIII and under this title compared with
17	the treatment of the 50 States and the
18	District of Columbia under such part and
19	this title for different fiscal years within
20	the period covered under the report.
21	"(C) RECOMMENDATIONS.—Such report
22	shall include recommendations for improving
23	prescription drug coverage for low-income indi-
24	viduals in each territory, including rec-

1	ommendations regarding each of the following
2	alternative approaches:
3	"(i) Adjusting the aggregate amount
4	specified in paragraph (3)(B).
5	"(ii) Allowing residents of the terri-
6	tories to be subsidy eligible individuals
7	under section 1860D-14, notwithstanding
8	subsection (a)(3)(F) of such section, or
9	providing substantially equivalent low-in-
10	come prescription drug subsidies to such
11	residents.".
12	TITLE III—MISCELLANEOUS
13	SEC. 301. MODIFIED TREATMENT OF TERRITORIES WITH
14	RESPECT TO APPLICATION OF ACA ANNUAL
•	RESPECT TO APPLICATION OF ACA ANNUAL
15	HEALTH INSURANCE PROVIDER FEES.
15 16	HEALTH INSURANCE PROVIDER FEES.
15 16	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Afford-
15 16 17	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Affordable Care Act (26 U.S.C. 4001 note prec.) is amended—
15 16 17 18	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Affordable Care Act (26 U.S.C. 4001 note prec.) is amended— (1) in subsection (b)(1), by inserting "subject
15 16 17 18	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Affordable Care Act (26 U.S.C. 4001 note prec.) is amended— (1) in subsection (b)(1), by inserting "subject to subsection (k)(1)," after "With respect to each
15 16 17 18 19	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Affordable Care Act (26 U.S.C. 4001 note prec.) is amended— (1) in subsection (b)(1), by inserting "subject to subsection (k)(1)," after "With respect to each covered entity,"; and
15 16 17 18 19 20 21	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Affordable Care Act (26 U.S.C. 4001 note prec.) is amended— (1) in subsection (b)(1), by inserting "subject to subsection (k)(1)," after "With respect to each covered entity,"; and (2) by adding at the end the following:
15 16 17 18 19 20 21	HEALTH INSURANCE PROVIDER FEES. Section 9010 of the Patient Protection and Affordable Care Act (26 U.S.C. 4001 note prec.) is amended— (1) in subsection (b)(1), by inserting "subject to subsection (k)(1)," after "With respect to each covered entity,"; and (2) by adding at the end the following: "(k) Special Rules for Treatment of Terri-

1	outside of the 50 States or the District of Columbia
2	for years beginning with 2020—
3	"(A) the amount of the fee under sub-
4	section (b) shall be 50 percent of the amount
5	of the fee otherwise determined;
6	"(B) the Secretary shall deposit the
7	amount of such fees collected for each territory
8	into a separate account; and
9	"(C) amounts in such an account for a ter-
10	ritory for a year are appropriated and shall be
11	available to the territory in accordance with
12	paragraph (2).
13	"(2) AVAILABILITY OF FUNDS.—Amounts made
14	available to a territory under paragraph (1)(C) with
15	respect to a territory for a year shall be made avail-
16	able to the territory, upon application of the terri-
17	tory to the Secretary of Health and Human Serv-
18	ices, only for the following purposes, as elected by
19	the territory in such application:
20	"(A) Increased prescription drug as-
21	SISTANCE FOR LOW-INCOME PART D ELIGIBLE
22	INDIVIDUALS.—For increasing the amount of
23	funds made available to the territory under sec-
24	tion 1935(e)(3) of the Social Security Act (42
25	U.S.C. 1396u-5(e)(3)) for assistance for low-in-

1	come part D eligible individuals in obtaining
2	part D covered drugs.
3	"(B) Satisfying state medical
4	MATCHING REQUIREMENT.—For the territory to
5	meet non-Federal matching requirements im-
6	posed with respect to obtaining Federal finan-
7	cial participation under title XIX of the Social
8	Security Act.".
9	SEC. 302. MEDICAID AND CHIP TERRITORY TRANSPARENCY
10	AND INFORMATION.
11	(a) Publication of Information on Federal
12	EXPENDITURES UNDER MEDICAID AND CHIP IN THE
13	Territories.—Not later than 180 days after the date
14	of the enactment of this Act, the Secretary of Health and
15	Human Services shall publish, and periodically update, or
16	the Internet site of the Centers for Medicare & Medicaid
17	Services information on Medicaid and CHIP carried out
18	in the territories of the United States. Such information
19	shall include, with respect to each such territory—
20	(1) the income levels established by the terri-
21	tory for purposes of eligibility of an individual to re-
22	ceive medical assistance under Medicaid or child
23	health assistance under CHIP;
24	(2) the number of individuals enrolled in Med-
25	icaid and CHIP in such territory;

1	(3) any State plan amendments in effect to
2	carry out Medicaid or CHIP in such territory;
3	(4) any waiver of the requirements of title XIX
4	or title XXI issued by the Secretary to carry out
5	Medicaid or CHIP in the territory, including a waiv-
6	er under section 1115 of the Social Security Act (42
7	U.S.C. 1315), any application for such a waiver, and
8	any documentation related to such application (in-
9	cluding correspondence);
10	(5) the amount of the Federal and non-Federal
11	share of expenditures under Medicaid and CHIP in
12	such territory;
13	(6) the systems in place for the furnishing of
14	health care items and services under Medicaid and
15	CHIP in such territory;
16	(7) the design of CHIP in such territory; and
17	(8) other information regarding the carrying
18	out of Medicaid and CHIP in the territory that is
19	published on such Internet site with respect to car-
20	rying out Medicaid and CHIP in each State and the
21	District of Columbia.
22	(b) Definitions.—In this section:
23	(1) CHIP.—The term "CHIP" means the
24	State Children's Health Insurance Program under
25	title XXI of the Social Security Act.

1	(2) Medicaid.—The term "Medicaid" means
2	the Medicaid program under title XIX of the Social
3	Security Act.
4	(3) Territory.—The term "territory of the
5	United States" includes Puerto Rico, the Virgin Is-
6	lands of the United States, Guam, the Northern
7	Mariana Islands, and American Samoa.
8	SEC. 303. REPORT ON EXCLUSION OF TERRITORIES FROM
9	EXCHANGES.
10	(a) In General.—Not later than February 1, 2020,
11	the Secretary of Health and Human Services shall submit
12	to Congress a report that details the adverse impacts in
13	each territory from the practical exclusion of the terri-
14	tories from the provisions of part II or III of subtitle D
15	of title I of the Patient Protection and Affordable Care
16	Act insofar as such provisions provide for the establish-
17	ment of an American Health Benefit Exchange or the ad-
18	ministration of a federally facilitated Exchange in each
19	State and in the District of Columbia for the purpose of
20	making health insurance more affordable and accessible
21	for individuals and small businesses.
22	(b) Information in Report.—The report shall in-
23	clude information on the following:
24	(1) An estimate of the total number of individ-
25	uals residing in each territory with health insurance

coverage, and the total number of individuals in each
 territory without health insurance coverage.

- (2) The number of health insurance issuers in each territory and the health insurance coverage each such issuer offers.
- (3) An estimate of the number of individuals residing in each territory who are denied premium and cost-sharing assistance that would otherwise be available to them for obtaining health insurance coverage through an Exchange if they resided in one of the 50 States or in the District of Columbia.
- (4) An estimate of the amount of Federal assistance described in paragraph (3) that is not being made available to residents of each territory.
- (5) An estimate of the number of small employers in each territory that would be eligible to purchase health insurance coverage through a Small Business Health Options Program (SHOP) Marketplace that would operate as part of an Exchange if the employers were in one of the 50 States or in the District of Columbia.

1	SEC. 304. ACCESS TO COVERAGE FOR INDIVIDUALS IN CER-
2	TAIN AREAS WITHOUT ANY AVAILABLE EX-
3	CHANGE PLANS.
4	Part 2 of subtitle D of title I of the Patient Protec-
5	tion and Affordable Care Act (42 U.S.C. 18031 et seq.)
6	is amended by adding at the end the following:
7	"SEC. 1314. ACCESS TO COVERAGE FOR INDIVIDUALS IN
8	CERTAIN AREAS WITHOUT ANY AVAILABLE
9	EXCHANGE PLANS.
10	"(a) In General.—
11	"(1) Coverage through DC exchange.—
12	Not later than 3 months after the date of enactment
13	of this section, the Secretary, in consultation with
14	the Secretary of the Treasury and the Director of
15	the Office of Personnel Management, shall establish
16	a mechanism to ensure that, for any plan year be-
17	ginning on or after the date described in subsection
18	(c), any individual described in paragraph (2) has
19	access to health insurance coverage which is at least
20	as broad as the coverage available to Members of
21	Congress and congressional staff (as defined in sec-
22	tion 1312(d)(3)(D)) through the Exchange operating
23	in the District of Columbia. Such individuals shall
24	be eligible for any premium tax credit under section
25	36B of the Internal Revenue Code of 1986, reduced
26	cost sharing under section 1402, and advance deter-

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mination and payment of such credits or such reduc-

2	tions under section 1412 to be administered by the
3	Secretary, in consultation with the Secretary of the
4	Treasury and the Director of the Office of Personnel
5	Management. The District of Columbia, its resi-
6	dents, and small businesses shall be held harmless
7	from any increased costs resulting from the enact-
8	ment of this section.
9	"(2) Individual described.—An individual
10	described in this paragraph is any individual who—
11	"(A) is not eligible to enroll in an em-
12	ployer-sponsored health plan (excluding such a
13	plan that would not be considered minimum es-
14	sential coverage due to the application of sub-
15	paragraph (C) of section 36B(c)(2) of the In-
16	ternal Revenue Code of 1986 if such subpara-
17	graph applied to such plan); and
18	"(B) is a bona fide resident of any posses-
19	sion of the United States (as determined under
20	section 937(a) of such Code) in which the Sec-
21	retary certifies that no qualified health plan is
22	offered through an Exchange established under
23	this title.
24	"(3) Possession of the united states.—
25	For purposes of this section, the term 'possession of

1 the United States' shall include such possessions as 2 are specified in section 937(a)(1) of the Internal 3 Revenue Code of 1986. 4

"(b) Treatment of Possessions.—

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"(1) Payments to possessions.—

"(A) MIRROR CODE POSSESSION.—The Secretary of the Treasury shall periodically (but not less frequently than annually) pay to each possession of the United States with a mirror code tax system amounts equal to the loss to that possession by reason of the application of this section (determined without regard to paragraph (2)) with respect to taxable years beginning after the date described in subsection (c). Such amounts shall be determined by the Secretary of the Treasury based on information provided by the government of the respective possession.

"(B) POSSESSIONS.—The OTHER Secretary of the Treasury shall periodically (but not less frequently than annually) pay to each possession of the United States which does not have a mirror code tax system amounts estimated by the Secretary of the Treasury as being equal to the aggregate benefits that would

1	have been provided to residents of such posses-
2	sion by reason of the application of this section
3	for any taxable years beginning after the date
4	described in subsection (c) if a mirror code tax
5	system had been in effect in such possession.
6	The preceding sentence shall not apply with re-
7	spect to any possession of the United States un-
8	less such possession has a plan, which has been
9	approved by the Secretary of the Treasury,
10	under which such possession will promptly dis-
11	tribute such payments to the residents of such
12	possession.
13	"(2) Coordination with credit allowed
14	AGAINST UNITED STATES INCOME TAXES.—No cred-
15	it shall be allowed against United States income
16	taxes for any taxable year under section 36B of the
17	Internal Revenue Code of 1986 to any person—
18	"(A) to whom a credit is allowed against
19	taxes imposed by the possession by reason of
20	this section (determined without regard to this
21	paragraph) for such taxable year, or
22	"(B) who is eligible for a payment under
23	a plan described in paragraph (1)(B) with re-
24	spect to such taxable year.

"(3) Mirror code tax system.—For pur-1 2 poses of this subsection, the term 'mirror code tax 3 system' means, with respect to any possession of the 4 United States, the income tax system of such posses-5 sion if the income tax liability of the residents of 6 such possession under such system is determined by 7 reference to the income tax laws of the United 8 States as if such possession were the United States. 9 "(4) Treatment of Payments.—For pur-10 poses of section 1324(b)(2) of title 31, United 11 States Code, or any similar rule of law, the pay-12 ments under this subsection shall be treated in the 13 same manner as a refund due from the credit al-14 lowed under section 36B of the Internal Revenue 15 Code of 1986. 16 "(c) DATE DESCRIBED.—The date described in this subsection is the date on which the Secretary establishes 18 the mechanism described in subsection (a)(1).". 19 SEC. 305. EXTENSION OF FAMILY-TO-FAMILY HEALTH IN-20 FORMATION CENTERS PROGRAM TO TERRI-21 TORIES. 22 Section 501(c)(3)(C) of the Social Security Act (42) 23 U.S.C. 701(c)) is amended by striking "years 2018 and 2019" and inserting "year 2018 and each fiscal year thereafter". 25