H. R. 1999

To delay and offset the sequester under the Statutory Pay-As-You-Go Act of 2010 as a result of the enactment of the American Rescue Plan Act of 2021, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

March 18, 2021

Mr. Smith of Missouri (for himself, Mr. Brady, Mr. Burgess, Mr. Comer, Mr. Harris, Mr. Wenstrup, and Mrs. Rodgers of Washington) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committees on Energy and Commerce, Oversight and Reform, the Budget, and Education and Labor, 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

A BILL

To delay and offset the sequester under the Statutory Pay-As-You-Go Act of 2010 as a result of the enactment of the American Rescue Plan Act of 2021, 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 "Protect Seniors and
- 5 Cut Waste Act".

1 SEC. 2. PAYGO ACT SEQUESTER.

- 2 The budgetary effects of the American Rescue Plan
- 3 Act of 2021 shall not be counted for purposes of deter-
- 4 mining whether a sequester occurs under the report issued
- 5 after Congress adjourns to end the 1st session of the
- 6 117th Congress and during January 2022 under section
- 7 5 of the Statutory Pay-As-You-Go Act of 2010.
- 8 SEC. 3. SUPPLEMENTAL APPROPRIATIONS FOR THE PUB-
- 9 LIC HEALTH AND SOCIAL SERVICES EMER-
- 10 GENCY FUND.
- 11 (a) Supplemental Appropriation.—There is ap-
- 12 propriated, out of any amounts in the Treasury not other-
- 13 wise appropriated, for an additional amount for "Public
- 14 Health and Social Services Emergency Fund'",
- 15 \$12,300,000,000, to remain available until expended, to
- 16 prevent, prepare for, and respond to coronavirus, domesti-
- 17 cally or internationally, which shall be for necessary ex-
- 18 penses to reimburse, through grants or other mechanisms,
- 19 eligible health care providers for health care related ex-
- 20 penses or lost revenues that are attributable to
- 21 coronavirus.
- 22 (b) Conditions.—The following conditions shall
- 23 apply with respect to funds appropriated by subsection
- 24 (a):
- 25 (1) Such funds may not be used to reimburse
- 26 expenses or losses that have been reimbursed from

- other sources or that other sources are obligated to reimburse.
 - (2) Recipients of payments under this section shall submit reports and maintain documentation as the Secretary of Health and Human Services determines are needed to ensure compliance with conditions that are imposed by this subsection for such payments, and such reports and documentation shall be in such form, with such content, and in such time as the Secretary may prescribe for such purpose.
 - (3) The term "eligible health care providers" means public entities, Medicare or Medicaid enrolled suppliers and providers, and such for-profit entities and not-for-profit entities not otherwise described in this paragraph as the Secretary may specify, within the United States (including territories), that provide diagnoses, testing, or care for individuals with possible or actual cases of COVID-19.
 - (4) The Secretary shall, on a rolling basis, review applications and make payments under this section.
 - (5) Funds appropriated under this section shall be available for building or construction of temporary structures, leasing of properties, medical supplies and equipment including personal protective

- equipment and testing supplies, increased workforce and trainings, emergency operation centers, retrofitting facilities, and surge capacity.
 - (6) In this section, the term "payment" means a pre-payment, prospective payment, or retrospective payment, as determined appropriate by the Secretary.
 - (7) Payments under this section shall be made in consideration of the most efficient payment systems practicable to provide emergency payment.
 - (8) To be eligible for a payment under this section, an eligible health care provider shall submit to the Secretary an application that includes a statement justifying the need of the provider for the payment and the eligible health care provider shall have a valid tax identification number.
 - (9) For any reimbursement by the Secretary from the Provider Relief Fund to an eligible health care provider that is a subsidiary of a parent organization, the parent organization may, allocate (through transfers or otherwise) all or any portion of such reimbursement among the subsidiary eligible health care providers of the parent organization, including reimbursements referred to by the Secretary as "Targeted Distribution" payments, among sub-

sidiary eligible health care providers of the parent organization, except that responsibility for reporting the reallocated reimbursement shall remain with the original recipient of such reimbursement.

(10) For any reimbursement from the Provider Relief Fund to an eligible health care provider for health care related expenses or lost revenues that are attributable to coronavirus (including reimbursements made before the date of the enactment of this Act), such provider may calculate such lost revenues using the Frequently Asked Questions guidance released by the Department of Health and Human Services in June 2020, including the difference between such provider's budgeted and actual revenue budget if such budget had been established and approved prior to March 27, 2020.

(11) Of the amount made available in the third paragraph under the heading "Department of Health and Human Services—Office of the Secretary—Public Health and Social Services Emergency Fund" in Public Law 116–136, not less than 85 percent of the unobligated balances available as of the date of enactment of this Act and of any funds recovered from health care providers after the date of enactment of this Act shall be for any suc-

- cessor to the Phase 3 General Distribution allocation to make payments to eligible health care providers based on applications that consider financial losses and changes in operating expenses occurring in fiscal year 2021 that are attributable to coronavirus.
 - (12) Not later than 3 years after final payments are made under this section, the Office of Inspector General of the Department of Health and Human Services shall transmit a final report on audit findings with respect to this program to the Committees on Appropriations of the House of Representatives and the Senate.
- (13) Nothing in this section limits the authority of the Inspector General or the Comptroller General to conduct audits of interim payments at an earlier date.
- (14) Not later than 60 days after the date of enactment of this Act, the Secretary of Health and Human Services shall provide a report to the Committees on Appropriations of the House of Representatives and the Senate on the obligation of funds, including obligations to such eligible health care providers, summarized by State of the payment receipt. Such report shall be updated and submitted

to such Committees every 60 days until funds are
expended.

(c) Emergency Designations.—

- (1) Amounts repurposed in subsection (b) that were previously designated by the Congress as an emergency requirement pursuant to the Balanced Budget and Emergency Deficit Control Act of 1985 are designated by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985.
- (2) The amount appropriated by subsection (a) is designated by the Congress as being for an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985.
- (3) Each amount designated in this Act by the Congress as an emergency requirement pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985 shall be available only if the President subsequently so designates all such amounts and transmits such designations to the Congress.
- 24 (d) APPLICATION OF PROVISIONS.—Amounts appro-25 priated pursuant to this section and pursuant to title II

1	of Public Law 117–2 shall be subject to the requirements
2	contained in Public Law 116–260 for funds for programs
3	authorized under sections 330 through 340 of the Public
4	Health Service Act.
5	SEC. 4. CORONAVIRUS STATE FISCAL RECOVERY FUND AD-
6	JUSTMENT.
7	(a) In General.—Section 602 of the Social Security
8	Act is amended—
9	(1) in subsection $(a)(1)$, by striking
10	"\$219,800,000,000" and inserting
11	"\$79,800,000,000"; and
12	(2) in subsection (b)(3), by striking
13	"\$195,300,000,000" and inserting
14	"\$55,300,000,000".
15	(b) Effective Date.—The amendments made by
16	subsection (a) shall take effect as if included in the enact-
17	ment of the American Rescue Plan Act of 2021.
18	SEC. 5. TECHNICAL CORRECTIONS.
19	(a) Rural Health Clinic Payments.—
20	(1) In General.—Section 1833(f)(3) of the
21	Social Security Act (42 U.S.C. 1395l(f)(3)) is
22	amended—
23	(A) in subparagraph (A)—
24	(i) in clause (i), by striking subclauses
25	(I) and (II) and inserting the following:

1	"(I) with respect to a rural health
2	clinic that had a per visit payment amount
3	established for services furnished in
4	2020—
5	"(aa) the per visit payment
6	amount applicable to such rural
7	health clinic for rural health clinic
8	services furnished in 2020, increased
9	by the percentage increase in the MEI
10	applicable to primary care services
11	furnished as of the first day of 2021;
12	or
13	"(bb) the limit described in para-
14	graph $(2)(A)$; and
15	"(II) with respect to a rural health
16	clinic that did not have a per visit payment
17	amount established for services furnished
18	in 2020—
19	"(aa) the per visit payment
20	amount applicable to such rural
21	health clinic for rural health clinic
22	services furnished in 2021; or
23	"(bb) the limit described in para-
24	graph (2)(A); and"; and

1	(ii) in clause (ii)(I), by striking
2	"under clause (i)(I)" and inserting "under
3	subclause (I) or (II) of clause (i), as appli-
4	cable,"; and
5	(B) in subparagraph (B)—
6	(i) in the matter preceding clause (i),
7	by striking "2019, was" and inserting
8	"2020";
9	(ii) in clause (i), by inserting "was"
10	after "(i)"; and
11	(iii) by striking clause (ii) and insert-
12	ing the following:
13	"(ii)(I) was enrolled under section 1866(j)
14	(including temporary enrollment during the
15	emergency period described in section
16	1135(g)(1)(B) for such period); or
17	"(II) submitted an application for enroll-
18	ment under section 1866(j) (or requested such
19	a temporary enrollment for such period) that
20	was received not later than December 31,
21	2020.".
22	(2) Effective date.—The amendments made
23	by this subsection shall take effect as if included in
24	the enactment of the Consolidated Appropriations
25	Act, 2021 (Public Law 116–260).

1	(b) Additional Amount for Certain Hospitals
2	WITH HIGH DISPROPORATIONATE SHARE.—Effective as
3	if included in the enactment of section 203(a) of title $\rm II$
4	of division CC of Public Law 116–260, subsection (g) of
5	section 1923 of the Social Security Act (42 U.S.C. 1396r–
6	4) amended by such section 203(a) is amended by adding
7	at the end the following new paragraph:
8	"(3) Additional amount for certain hos-
9	PITALS WITH HIGH DISPROPORATIONATE SHARE.—
10	"(A) IN GENERAL.—In the case of a hos-
11	pital with high disproportionate share (as de-
12	fined in subparagraph (B)) located in a State
13	referenced in subsection (e) of section 4721 of
14	the Balanced Budget Act of 1997, a payment
15	adjustment during a State fiscal year shall be
16	considered consistent with subsection (c) if the
17	payment adjustment does not exceed 175 per-
18	cent of the costs of furnishing hospital services
19	during the year, but only if the Governor of the
20	State certifies to the satisfaction of the Sec-
21	retary that the hospital's applicable minimum
22	amount is used for health services during the
23	year. In determining the amount that is used
24	for such services during a year, there shall be
25	excluded any amounts received under the Public

1	Health Service Act, title V, title XVIII, or from
2	third party payors (not including the State plan
3	under this title) that are used for providing
4	such services during the year.
5	"(B) Hospital with high
6	DISPROPORATIONATE SHARE DEFINED.—In
7	subparagraph (A), a hospital is a 'hospital with
8	high disproportionate share' if—
9	"(i) the hospital is owned or operated
10	by the State (or by an instrumentality or
11	a unit of government within the State);
12	and
13	"(ii) the hospital—
14	"(I) meets the requirement de-
15	scribed in subparagraphs (A) or (B)
16	of subsection (b)(1); or
17	"(II) has the largest number of
18	inpatient days attributable to individ-
19	uals entitled to benefits under the
20	State plan of any hospital in such
21	State for the previous fiscal year.
22	"(C) Applicable minimum amount de-
23	FINED.—In subparagraph (A), the 'applicable
24	minimum amount' for a hospital for a fiscal
25	year is equal to the difference between the

1	amount of the hospital's payment adjustment
2	for the fiscal year and the costs to the hospital
3	of furnishing hospital services described in
4	paragraph (1)(A) during the fiscal year.".
5	SEC. 6. INDIVIDUALS NOT LAWFULLY PRESENT IN UNITED
6	STATES PRECLUDED FROM 2021 RECOVERY
7	REBATES.
8	(a) In General.—Section 6428B(c) of the Internal
9	Revenue Code of 1986, as added by the American Rescue
10	Plan Act of 2021, is amended by striking "and" at the
11	end of paragraph (2), by redesignating paragraph (3) as
12	paragraph (4), and by inserting after paragraph (2) the
13	following new paragraph:
14	"(3) any individual who was not lawfully
15	present in the United States as of the date of the
16	enactment of the American Rescue Plan Act of
17	2021, and".
18	(b) Effective Date.—The amendments made by
19	this section shall take effect as if included in the enact-
20	ment of section 9601 of the American Rescue Plan Act
21	of 2021.
22	SEC. 7. INCARCERATED INDIVIDUALS PRECLUDED FROM
23	2021 RECOVERY REBATES.
24	(a) In General.—Section 6428B(c) of the Internal
25	Revenue Code of 1986, as added by the American Rescue

Plan Act of 2021 and amended by the preceding provisions of this Act, is amended by striking "and" at the 3 end of paragraph (3), by redesignating paragraph (4) as 4 paragraph (5), and by inserting after paragraph (3) the 5 following new paragraph: 6 "(4) any individual who was incarcerated on the 7 date of the enactment of the American Rescue Plan 8 Act of 2021, and". 9 (b) Effective Date.—The amendments made by 10 this section shall take effect as if included in the enactment of section 9601 of the American Rescue Plan Act of 2021. 12 SEC. 8. REQUIRING A SOCIAL SECURITY NUMBER TO RE-14 CEIVE COBRA CONTINUATION COVERAGE. 15 (a) In General.—Section 9501(a)(3) of the American Rescue Plan Act of 2021 (Public Law 117–2) is amended— 17 18 (1) in subparagraph (A), by striking at the end "and"; 19 20 (2) in subparagraph (B), by striking the period at the end and inserting "; and"; and 21 22 (3) by adding at the end the following new sub-23 paragraph: "(C) has been issued a social security 24

number (as defined in section 24(h)(7) of the

1	Internal Revenue Code of 1986) by the Social
2	Security Administration.".
3	(b) Effective Date.—The amendment made by
4	subsection (a) shall take effect as if included in the enact-
5	ment of section 9501 of the American Rescue Plan Act
6	of 2021.
7	SEC. 9. RESCISSIONS OF AMERICAN RESCUE PLAN ACT OF
8	2021 FUNDS.
9	Of the funds appropriated by the American Rescue
10	Plan Act of 2021 (Public Law 117–2), all unobligated
11	funds available under the following provisions of such Act
12	are hereby rescinded:
13	(1) Section 2021 (relating to the National En-
14	dowment for the Arts).
15	(2) Section 2022 (relating to the National En-
16	dowment for the Humanities).
17	(3) Section 4001 (relating to the Emergency
18	Federal Employee Leave Fund).

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