AMENDMENT TO H.R. 1628

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Page 62, beginning on line 2, strike "to carry out the purpose described in section 2202(2) in such States by providing payments to appropriate entities described in such section with respect to claims that exceed \$1,000,000" and insert "to carry out the Federal Invisible Risk Sharing Program in such States under section 2205".

Page 64, line 25, strike all that follows the first period.

Page 64, after line 25, insert the following:

1 "SEC. 2205. FEDERAL INVISIBLE RISK SHARING PROGRAM.

- 2 "(a) In General.—There is established within the
- 3 Patient and State Stability Fund a Federal Invisible Risk
- 4 Sharing Program (in this section referred to as the 'Pro-
- 5 gram'), to be administered by the Secretary of Health and
- 6 Human Services, acting through the Administrator of the
- 7 Centers for Medicare & Medicaid Services (in this section
- 8 referred to as the 'Administrator'), to provide payments
- 9 to health insurance issuers with respect to claims for eligi-

1	ble individuals for the purpose of lowering premiums for
2	health insurance coverage offered in the individual market.
3	"(b) Funding.—
4	"(1) APPROPRIATION.—For the purpose of pro-
5	viding funding for the Program there is appro-
6	priated, out of any money in the Treasury not other-
7	wise appropriated \$15,000,000,000 for the period
8	beginning on January 1, 2018, and ending with De-
9	cember 31, 2026.
10	"(2) USE OF UNALLOCATED FUNDS.—Funds
11	provided under section $2204(c)(2)(B)$ to carry out
12	this section are in addition to the amount appro-
13	priated under paragraph (1).
14	"(c) Operation of Program.—
15	"(1) IN GENERAL.—The Administrator shall es-
16	tablish, after consultation with health care con-
17	sumers, health insurance issuers, State insurance
18	commissioners, and other stakeholders and after tak-
19	ing into consideration high cost health conditions
20	and other health trends that generate high cost, pa-
21	rameters for the operation of the Program consistent
22	with this section.
23	"(2) Deadline for initial operation.—Not
24	later than 60 days after the date of the enactment
25	of this title, the Administrator shall establish suffi-

1	cient parameters to specify how the Program will op-
2	erate for plan year 2018.
3	"(3) State operation of program.—The
4	Administrator shall establish a process for a State to
5	operate the Program in such State beginning with
6	plan year 2020.
7	"(d) Details of Program.—The parameters for
8	the Program shall include the following:
9	"(1) Eligible individuals.—A definition for
10	eligible individuals.
11	"(2) Health status statements.—The de-
12	velopment and use of health status statements with
13	respect to such individuals.
14	"(3) Standards for qualification .—
15	"(A) AUTOMATIC QUALIFICATION.—The
16	identification of health conditions that auto-
17	matically qualify individuals as eligible individ-
18	uals at the time of application for health insur-
19	ance coverage.
20	"(B) Voluntary qualification.—A
21	process under which health insurance issuers
22	may voluntarily qualify individuals, who do not
23	automatically qualify under subparagraph (A),
24	as eligible individuals at the time of application
25	for such coverage.

1	"(4) Percentage of insurance premiums
2	TO BE APPLIED.—The percentage of the premiums
3	paid, to health insurance issuers for health insur-
4	ance coverage by eligible individuals, that shall be
5	collected and deposited to the credit (and available
6	for the use) of the Program.
7	"(5) Attachment dollar amount and pay-
8	MENT PROPORTION.—The dollar amount of claims
9	for eligible individuals after which the Program will
10	provide payments to health insurance issuers and
11	the proportion of such claims above such dollar
12	amount that the Program will pay.".

