

Union Calendar No. 262

115TH CONGRESS
1ST SESSION

H. R. 3922

[Report No. 115–359, Part I]

To extend funding for certain public health programs, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 3, 2017

Mr. WALDEN introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, 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

OCTOBER 19, 2017

Reported from the Committee on Energy and Commerce with an amendment
[Strike out all after the enacting clause and insert the part printed in *italic*]

OCTOBER 19, 2017

The Committee on Ways and Means discharged; committed to the Committee of the Whole House on the State of the Union and ordered to be printed

[For text of introduced bill, see copy of bill as introduced on October 3, 2017]

A BILL

To extend funding for certain public health 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.**

4 *This Act may be cited as the “Community Health And*
 5 *Medical Professionals Improve Our Nation Act of 2017” or*
 6 *the “CHAMPION Act”.*

7 **SEC. 2. TABLE OF CONTENTS.**

8 *The table of contents for this Act is as follows:*

Sec. 1. Short title.

Sec. 2. Table of contents.

TITLE I—EXTENSION OF PUBLIC HEALTH PROGRAMS

Sec. 101. Extension for community health centers and the National Health Ser-
vice Corps.

Sec. 102. Extension for special diabetes programs.

Sec. 103. Reauthorization of program of payments to teaching health centers that
operate graduate medical education programs.

Sec. 104. Extension for family-to-family health information centers.

Sec. 105. Youth empowerment program; personal responsibility education.

TITLE II—OFFSETS

Sec. 201. Providing for qualified health plan grace period requirements for issuer
receipt of advance payments of cost-sharing reductions and pre-
mium tax credits that are more consistent with State law grace
period requirements.

Sec. 202. Prevention and Public Health Fund.

9 **TITLE I—EXTENSION OF PUBLIC**
 10 **HEALTH PROGRAMS**

11 **SEC. 101. EXTENSION FOR COMMUNITY HEALTH CENTERS**
 12 **AND THE NATIONAL HEALTH SERVICE CORPS.**

13 *(a) COMMUNITY HEALTH CENTERS FUNDING.—Sec-*
 14 *tion 10503(b)(1)(E) of the Patient Protection and Afford-*
 15 *able Care Act (42 U.S.C. 254b–2(b)(1)(E)) is amended by*
 16 *striking “2017” and inserting “2019”.*

1 **(b) OTHER COMMUNITY HEALTH CENTERS PROVI-**
2 *SIONS.—Section 330 of the Public Health Service Act (42*
3 *U.S.C. 254b) is amended—*

4 *(1) in subsection (b)(1)(A)(ii), by striking*
5 *“abuse” and inserting “use disorder”;*

6 *(2) in subsection (b)(2)(A), by striking “abuse”*
7 *and inserting “use disorder”;*

8 *(3) in subsection (c)—*

9 *(A) in paragraph (1), by striking subpara-*
10 *graphs (B) through (D);*

11 *(B) by striking “(1) IN GENERAL” and all*
12 *that follows through “The Secretary” and insert-*
13 *ing the following:*

14 *“(1) CENTERS.—The Secretary”; and*

15 *(C) in paragraph (1), as amended, by redес-*
16 *ignating clauses (i) through (v) as subpara-*
17 *graphs (A) through (E) and moving the margin*
18 *of each of such redesignated subparagraph 2 ems*
19 *to the left;*

20 *(4) by striking subsection (d) and inserting the*
21 *following:*

22 *“(d) IMPROVING QUALITY OF CARE.—*

23 *(1) SUPPLEMENTAL AWARDS.—The Secretary*
24 *may award supplemental grant funds to health cen-*
25 *ters funded under this section to implement evidence-*

1 *based models for increasing access to high-quality pri-*
2 *mary care services, which may include models related*
3 *to—*

4 *“(A) improving the delivery of care for in-*
5 *dividuals with multiple chronic conditions;*

6 *“(B) workforce configuration;*

7 *“(C) reducing the cost of care;*

8 *“(D) enhancing care coordination;*

9 *“(E) expanding the use of telehealth and*
10 *technology-enabled collaborative learning and ca-*
11 *capacity building models;*

12 *“(F) care integration, including integration*
13 *of behavioral health, mental health, or substance*
14 *use disorder services; and*

15 *“(G) addressing emerging public health or*
16 *substance use disorder issues to meet the health*
17 *needs of the population served by the health cen-*
18 *ter.*

19 *“(2) SUSTAINABILITY.—In making supplemental*
20 *awards under this subsection, the Secretary may con-*
21 *sider whether the health center involved has submitted*
22 *a plan for continuing the activities funded under this*
23 *subsection after supplemental funding is expended.*

24 *“(3) SPECIAL CONSIDERATION.—The Secretary*
25 *may give special consideration to applications for*

1 *supplemental funding under this subsection that seek*
2 *to address significant barriers to access to care in*
3 *areas with a greater shortage of health care providers*
4 *and health services relative to the national average.”;*

5 *(5) in subsection (e)(1)—*

6 *(A) in subparagraph (B)—*

7 *(i) by striking “2 years” and inserting*
8 *“1 year”; and*

9 *(ii) by adding at the end the following:*
10 *“The Secretary shall not make a grant*
11 *under this paragraph unless the applicant*
12 *provides assurances to the Secretary that*
13 *within 120 days of receiving grant funding*
14 *for the operation of the health center, the*
15 *applicant will submit, for approval by the*
16 *Secretary, an implementation plan to meet*
17 *the requirements of subsection (l)(3). The*
18 *Secretary may extend such 120-day period*
19 *for achieving compliance upon a demonstra-*
20 *tion of good cause by the health center.”;*
21 *and*

22 *(B) in subparagraph (C)—*

23 *(i) in the subparagraph heading, by*
24 *striking “AND PLANS”;*

1 (ii) by striking “or plan (as described
2 in subparagraphs (B) and (C) of subsection
3 (c)(1))”;

4 (iii) by striking “or plan, including
5 the purchase” and inserting the following:
6 “including—

7 “(i) the purchase”;

8 (iv) by inserting “, which may include
9 data and information systems” after “of
10 equipment”;

11 (v) by striking the period at the end
12 and inserting a semicolon; and

13 (vi) by adding at the end the following:

14 “(ii) the provision of training and
15 technical assistance; and

16 “(iii) other activities that—

17 “(I) reduce costs associated with
18 the provision of health services;

19 “(II) improve access to, and
20 availability of, health services provided
21 to individuals served by the centers;

22 “(III) enhance the quality and co-
23 ordination of health services; or

24 “(IV) improve the health status of
25 communities.”;

1 (6) in subsection (e)(5)(B)—

2 (A) in the heading of subparagraph (B), by
3 striking “AND PLANS”; and

4 (B) by striking “and subparagraphs (B)
5 and (C) of subsection (c)(1) to a health center or
6 to a network or plan” and inserting “to a health
7 center or to a network”;

8 (7) by striking subsection (s);

9 (8) by redesignating subsections (g) through (r)
10 as subsections (h) through (s), respectively;

11 (9) by inserting after subsection (f), the fol-
12 lowing:

13 “(g) *NEW ACCESS POINTS AND EXPANDED SERV-*
14 *ICES.*—

15 “(1) *APPROVAL OF NEW ACCESS POINTS.*—

16 “(A) *IN GENERAL.*—*The Secretary may ap-*
17 *prove applications for grants under subpara-*
18 *graph (A) or (B) of subsection (e)(1) to establish*
19 *new delivery sites.*

20 “(B) *SPECIAL CONSIDERATION.*—*In car-*
21 *rying out subparagraph (A), the Secretary may*
22 *give special consideration to applicants that*
23 *have demonstrated the new delivery site will be*
24 *located within a sparsely populated area, or an*

1 *area which has a level of unmet need that is*
2 *higher relative to other applicants.*

3 “(C) *CONSIDERATION OF APPLICATIONS.—*
4 *In carrying out subparagraph (A), the Secretary*
5 *shall approve applications for grants under sub-*
6 *paragraphs (A) and (B) of subsection (e)(1) in*
7 *such a manner that the ratio of the medically*
8 *underserved populations in rural areas which*
9 *may be expected to use the services provided by*
10 *the applicants involved to the medically under-*
11 *served populations in urban areas which may be*
12 *expected to use the services provided by the ap-*
13 *plicants is not less than two to three or greater*
14 *than three to two.*

15 “(D) *SERVICE AREA OVERLAP.—If in car-*
16 *rying out subparagraph (A) the applicant pro-*
17 *poses to serve an area that is currently served by*
18 *another health center funded under this section,*
19 *the Secretary may consider whether the award of*
20 *funding to an additional health center in the*
21 *area can be justified based on the unmet need for*
22 *additional services within the catchment area.*

23 “(2) *APPROVAL OF EXPANDED SERVICE APPLICA-*
24 *TIONS.—*

1 “(A) *IN GENERAL.*—*The Secretary may ap-*
2 *prove applications for grants under subpara-*
3 *graph (A) or (B) of subsection (e)(1) to expand*
4 *the capacity of the applicant to provide required*
5 *primary health services described in subsection*
6 *(b)(1) or additional health services described in*
7 *subsection (b)(2).*

8 “(B) *PRIORITY EXPANSION PROJECTS.*—*In*
9 *carrying out subparagraph (A), the Secretary*
10 *may give special consideration to expanded serv-*
11 *ice applications that seek to address emerging*
12 *public health or behavioral health, mental health,*
13 *or substance abuse issues through increasing the*
14 *availability of additional health services de-*
15 *scribed in subsection (b)(2) in an area in which*
16 *there are significant barriers to accessing care.*

17 “(C) *CONSIDERATION OF APPLICATIONS.*—
18 *In carrying out subparagraph (A), the Secretary*
19 *shall approve applications for applicants in such*
20 *a manner that the ratio of the medically under-*
21 *served populations in rural areas which may be*
22 *expected to use the services provided by the ap-*
23 *plicants involved to the medically underserved*
24 *populations in urban areas which may be ex-*
25 *pected to use the services provided by such appli-*

1 *cants is not less than two to three or greater*
2 *than three to two.”;*

3 *(10) in subsection (i) (as so redesignated)—*

4 *(A) in paragraph (1), by striking “and*
5 *children and youth at risk of homelessness” and*
6 *inserting “, children and youth at risk of home-*
7 *lessness, homeless veterans, and veterans at risk*
8 *of homelessness”;* and

9 *(B) in paragraph (5)—*

10 *(i) by striking subparagraph (B);*

11 *(ii) by redesignating subparagraph (C)*
12 *as subparagraph (B); and*

13 *(iii) in subparagraph (B) (as so redesi-*
14 *gnated)—*

15 *(I) in the subparagraph heading,*
16 *by striking “ABUSE” and inserting*
17 *“USE DISORDER”;* and

18 *(II) by striking “abuse” and in-*
19 *serting “use disorder”;*

20 *(11) in subsection (l) (as so redesignated)—*

21 *(A) in paragraph (2)—*

22 *(i) in the paragraph heading, by in-*
23 *serting “UNMET” before “NEED”;*

24 *(ii) in the matter preceding subpara-*
25 *graph (A), by inserting “and an applica-*

1 *tion for a grant under subsection (g)” after*
2 *“subsection (e)(1)”;*

3 *(iii) in subparagraph (A), by inserting*
4 *“unmet” before “need for health services”;*

5 *(iv) in subparagraph (B), by striking*
6 *“and” at the end;*

7 *(v) in subparagraph (C), by striking*
8 *the period at the end and inserting “; and”;*
9 *and*

10 *(vi) by adding after subparagraph (C)*
11 *the following:*

12 *“(D) in the case of an application for a*
13 *grant pursuant to subsection (g)(1), a dem-*
14 *onstration that the applicant has consulted with*
15 *appropriate State and local government agen-*
16 *cies, and health care providers regarding the*
17 *need for the health services to be provided at the*
18 *proposed delivery site.”;*

19 *(B) in paragraph (3)—*

20 *(i) in the matter preceding subpara-*
21 *graph (A), by inserting “or subsection (g)”*
22 *after “subsection (e)(1)(B)”;*

23 *(ii) in subparagraph (B), by striking*
24 *“in the catchment area of the center” and*
25 *inserting “, including other health care pro-*

1 *viders that provide care within the*
2 *catchment area, local hospitals, and spe-*
3 *cialty providers in the catchment area of*
4 *the center, to provide access to services not*
5 *available through the health center and to*
6 *reduce the non-urgent use of hospital emer-*
7 *gency departments”;*

8 *(iii) in subparagraph (H)(ii), by in-*
9 *serting “who shall be directly employed by*
10 *the center” after “approves the selection of*
11 *a director for the center”;*

12 *(iv) in subparagraph (L), by striking*
13 *“and” at the end;*

14 *(v) in subparagraph (M), by striking*
15 *the period and inserting “; and”; and*

16 *(vi) by inserting after subparagraph*
17 *(M), the following:*

18 *“(N) the center has written policies and*
19 *procedures in place to ensure the appropriate use*
20 *of Federal funds in compliance with applicable*
21 *Federal statutes, regulations, and the terms and*
22 *conditions of the Federal award.”; and*

23 *(C) by striking paragraph (4);*

24 *(12) in subsection (m) (as so redesignated), by*
25 *adding at the end the following: “Funds expended to*

1 *carry out activities under this subsection and oper-*
2 *ational support activities under subsection (n) shall*
3 *not exceed 3 percent of the amount appropriated for*
4 *this section for the fiscal year involved.”;*

5 *(13) in subsection (q) (as so redesignated), by*
6 *striking “grants for new health centers under sub-*
7 *sections (c) and (e)” and inserting “operating grants*
8 *under subsection (e), applications for new access*
9 *points and expanded service pursuant to subsection*
10 *(g)”;*

11 *(14) in subsection (r)(4) (as so redesignated), by*
12 *adding at the end the following: “A waiver provided*
13 *by the Secretary under this paragraph may not re-*
14 *main in effect for more than 1 year and may not be*
15 *extended after such period. An entity may not receive*
16 *more than one waiver under this paragraph in con-*
17 *secutive years.”;*

18 *(15) in subsection (s)(3) (as so redesignated)—*

19 *(A) by striking “appropriate committees of*
20 *Congress a report concerning the distribution of*
21 *funds under this section” and inserting the fol-*
22 *lowing: “Committee on Health, Education,*
23 *Labor, and Pensions of the Senate, and the Com-*
24 *mittee on Energy and Commerce of the House of*

1 *Representatives, a report including, at a minimum—*
2 *imum—*

3 *“(A) the distribution of funds for carrying*
4 *out this section”;*

5 *(B) by striking “populations. Such report*
6 *shall include an assessment” and inserting the*
7 *following: “populations;*

8 *“(B) an assessment”;*

9 *(C) by striking “and the rationale for any*
10 *substantial changes in the distribution of funds.”*
11 *and inserting a semicolon; and*

12 *(D) by adding at the end the following:*

13 *“(C) the distribution of awards and funding*
14 *for new or expanded services in each of rural*
15 *areas and urban areas;*

16 *“(D) the distribution of awards and fund-*
17 *ing for establishing new access points, and the*
18 *number of new access points created;*

19 *“(E) the amount of unexpended funding for*
20 *loan guarantees and loan guarantee authority*
21 *under title XVI;*

22 *“(F) the rationale for any substantial*
23 *changes in the distribution of funds;*

24 *“(G) the rate of closures for health centers*
25 *and access points;*

1 “(H) the number and reason for any grants
2 awarded pursuant to subsection (e)(1)(B); and

3 “(I) the number and reason for any waivers
4 provided pursuant to subsection (r)(4).”; and
5 (16) in subsection (s) (as so redesignated) by
6 adding at the end the following new paragraph:

7 “(5) *FUNDING FOR PARTICIPATION OF HEALTH*
8 *CENTERS IN ALL OF US RESEARCH PROGRAM.—In ad-*
9 *dition to any amounts made available pursuant to*
10 *subsection (d) of this section, paragraph (1) of this*
11 *subsection, section 402A of this Act, or section 10503*
12 *of the Patient Protection and Affordable Care Act,*
13 *there is authorized to be appropriated, and there is*
14 *appropriated, out of any monies in the Treasury not*
15 *otherwise appropriated, to the Secretary \$25,000,000*
16 *for fiscal year 2018 to support the participation of*
17 *health centers in the All of Us Research Program*
18 *under the Precision Medicine Initiative under section*
19 *498E of this Act.”.*

20 (c) *NATIONAL HEALTH SERVICE CORPS.—Section*
21 *10503(b)(2)(E) of the Patient Protection and Affordable*
22 *Care Act (42 U.S.C. 254b–2(b)(2)(E)) is amended by strik-*
23 *ing “2017” and inserting “2019”.*

24 (d) *APPLICATION.—Amounts appropriated pursuant*
25 *to this section for fiscal year 2018 or 2019 are subject to*

1 *the requirements contained in Public Law 115–31 for funds*
2 *for programs authorized under sections 330 through 340 of*
3 *the Public Health Service Act (42 U.S.C. 254b–256).*

4 (e) *CONFORMING AMENDMENTS.—Section 3014(h) of*
5 *title 18, United States Code, is amended—*

6 (1) *in paragraph (1), by striking “, as amended*
7 *by section 221 of the Medicare Access and CHIP Re-*
8 *authorization Act of 2015,”; and*

9 (2) *in paragraph (4), by inserting “and section*
10 *101(d) of the Community Health And Medical Profes-*
11 *sionals Improve Our Nation Act of 2017” after “sec-*
12 *tion 221(c) of the Medicare Access and CHIP Reau-*
13 *thorization Act of 2015”.*

14 **SEC. 102. EXTENSION FOR SPECIAL DIABETES PROGRAMS.**

15 (a) *SPECIAL DIABETES PROGRAM FOR TYPE I DIABE-*
16 *TES.—Section 330B(b)(2)(C) of the Public Health Service*
17 *Act (42 U.S.C. 254c–2(b)(2)(C)) is amended by striking*
18 *“2017” and inserting “2019”.*

19 (b) *SPECIAL DIABETES PROGRAM FOR INDIANS.—Sec-*
20 *tion 330C(c)(2) of the Public Health Service Act (42 U.S.C.*
21 *254c–3(c)(2)) is amended—*

22 (1) *in subparagraph (C), by striking “and” at*
23 *the end;*

24 (2) *in subparagraph (D), by striking the period*
25 *at the end and inserting “and \$112,500,000 for the*

1 *period consisting of the second, third, and fourth*
 2 *quarters of fiscal year 2018; and”;* and

3 *(3) by adding at the end the following:*

4 *“(E) \$150,000,000 for fiscal year 2019.”.*

5 **SEC. 103. REAUTHORIZATION OF PROGRAM OF PAYMENTS**
 6 **TO TEACHING HEALTH CENTERS THAT OPER-**
 7 **ATE GRADUATE MEDICAL EDUCATION PRO-**
 8 **GRAMS.**

9 *(a) PAYMENTS.—Subsection (a) of section 340H of the*
 10 *Public Health Service Act (42 U.S.C. 256h) is amended to*
 11 *read as follows:*

12 *“(a) PAYMENTS.—*

13 *“(1) IN GENERAL.—Subject to subsection (h)(2),*
 14 *the Secretary shall make payments under this section*
 15 *for direct expenses and indirect expenses to qualified*
 16 *teaching health centers that are listed as sponsoring*
 17 *institutions by the relevant accrediting body for—*

18 *“(A) maintenance of existing approved*
 19 *graduate medical residency training programs;*

20 *“(B) expansion of existing approved grad-*
 21 *uate medical residency training programs; and*

22 *“(C) establishment of new approved grad-*
 23 *uate medical residency training programs, as*
 24 *appropriate.*

1 “(2) *PRIORITY.*—*In making payments pursuant*
2 *to paragraph (1)(C), the Secretary shall give priority*
3 *to qualified teaching health centers that—*

4 “(A) *serve a health professional shortage*
5 *area with a designation in effect under section*
6 *332 or a medically underserved community (as*
7 *defined in section 799B); or*

8 “(B) *are located in a rural area (as defined*
9 *in section 1886(d)(2)(D) of the Social Security*
10 *Act).”.*

11 (b) *FUNDING.*—*Subsection (g) of section 340H of the*
12 *Public Health Service Act (42 U.S.C. 256h) is amended—*

13 (1) *by striking “To carry out” and inserting the*
14 *following:*

15 “(1) *IN GENERAL.*—*To carry out”;*

16 (2) *by striking “and \$15,000,000 for the first*
17 *quarter of fiscal year 2018” and inserting “,*
18 *\$15,000,000 for the first quarter of fiscal year 2018,*
19 *\$111,500,000 for the period consisting of the second,*
20 *third, and fourth quarters of fiscal year 2018, and*
21 *\$126,500,000 for fiscal year 2019, to remain available*
22 *until expended”; and*

23 (3) *by adding at the end the following:*

24 “(2) *ADMINISTRATIVE EXPENSES.*—*Of the*
25 *amount made available to carry out this section for*

1 *any fiscal year, the Secretary may not use more than*
2 *5 percent of such amount for the expenses of admin-*
3 *istering this section.”.*

4 *(c) ANNUAL REPORTING.—Subsection (h)(1) of section*
5 *340H of the Public Health Service Act (42 U.S.C. 256h)*
6 *is amended—*

7 *(1) by redesignating subparagraph (D) as sub-*
8 *paragraph (H); and*

9 *(2) by inserting after subparagraph (C) the fol-*
10 *lowing:*

11 *“(D) The number of patients treated by*
12 *residents described in paragraph (4).*

13 *“(E) The number of visits by patients treat-*
14 *ed by residents described in paragraph (4).*

15 *“(F) Of the number of residents described in*
16 *paragraph (4) who completed their residency*
17 *training at the end of such residency academic*
18 *year, the number and percentage of such resi-*
19 *dents entering primary care practice (meaning*
20 *any of the areas of practice listed in the defini-*
21 *tion of a primary care residency program in sec-*
22 *tion 749A).*

23 *“(G) Of the number of residents described in*
24 *paragraph (4) who completed their residency*
25 *training at the end of such residency academic*

1 year, the number and percentage of such resi-
2 dents who entered practice at a health care facil-
3 ity—

4 “(i) primarily serving a health profes-
5 sional shortage area with a designation in
6 effect under section 332 or a medically un-
7 derserved community (as defined in section
8 799B); or

9 “(ii) located in a rural area (as de-
10 fined in section 1886(d)(2)(D) of the Social
11 Security Act).”.

12 (d) *REPORT ON TRAINING COSTS.*—Not later than
13 March 31, 2019, the Secretary of Health and Human Serv-
14 ices shall submit to the Congress a report on the direct grad-
15 uate expenses of approved graduate medical residency
16 training programs, and the indirect expenses associated
17 with the additional costs of teaching residents, of qualified
18 teaching health centers (as such terms are used or defined
19 in section 340H of the Public Health Service Act (42 U.S.C.
20 256h)).

21 (e) *DEFINITION.*—Subsection (j) of section 340H of the
22 Public Health Service Act (42 U.S.C. 256h) is amended—

23 (1) by redesignating paragraphs (2) and (3) as
24 paragraphs (3) and (4), respectively; and

1 (A) in clause (v), by striking “and” at the
2 end;

3 (B) in clause (vi), by striking the period at
4 the end and inserting “; and”; and

5 (C) by adding at the end the following new
6 clause:

7 “(vii) \$6,000,000 for each of fiscal years 2018
8 and 2019.”;

9 (2) in paragraph (3)(C), by inserting before the
10 period the following: “, and with respect to fiscal
11 years 2018 and 2019, such centers shall also be devel-
12 oped in all territories and at least one such center
13 shall be developed for Indian tribes”; and

14 (3) by amending paragraph (5) to read as fol-
15 lows:

16 “(5) For purposes of this subsection—

17 “(A) the term ‘Indian tribe’ has the meaning
18 given such term in section 4 of the Indian Health
19 Care Improvement Act (25 U.S.C. 1603);

20 “(B) the term ‘State’ means each of the 50 States
21 and the District of Columbia; and

22 “(C) the term ‘territory’ means Puerto Rico,
23 Guam, American Samoa, the Virgin Islands, and the
24 Northern Mariana Islands.”.

1 **SEC. 105. YOUTH EMPOWERMENT PROGRAM; PERSONAL RE-**
2 **SPONSIBILITY EDUCATION.**

3 (a) *YOUTH EMPOWERMENT PROGRAM.*—

4 (1) *IN GENERAL.*—Section 510 of the Social Se-
5 curity Act (42 U.S.C. 710) is amended to read as fol-
6 lows:

7 **“SEC. 510. YOUTH EMPOWERMENT PROGRAM.**

8 **“(a) IN GENERAL.**—

9 “(1) *ALLOTMENTS TO STATES.*—For the purpose
10 described in subsection (b), the Secretary shall, for
11 each of fiscal years 2018 and 2019, allot to each State
12 which has transmitted an application for the fiscal
13 year under section 505(a) an amount equal to the
14 product of—

15 “(A) the amount appropriated pursuant to
16 subsection (e)(1) for the fiscal year, minus the
17 amount reserved under subsection (e)(2) for the
18 fiscal year; and

19 “(B) the proportion that the number of low-
20 income children in the State bears to the total of
21 such numbers of children for all the States.

22 “(2) *OTHER ALLOTMENTS.*—

23 “(A) *OTHER ENTITIES.*—For the purpose
24 described in subsection (b), the Secretary shall,
25 for each of fiscal years 2018 and 2019, for any
26 State which has not transmitted an application

1 *for the fiscal year under section 505(a), allot to*
2 *one or more entities in the State the amount that*
3 *would have been allotted to the State under*
4 *paragraph (1) if the State had submitted such*
5 *an application.*

6 “(B) *PROCESS.*—*The Secretary shall select*
7 *the recipients of allotments under subparagraph*
8 *(A) by means of a competitive grant process*
9 *under which—*

10 “(i) *not later than 30 days after the*
11 *deadline for the State involved to submit an*
12 *application for the fiscal year under section*
13 *505(a), the Secretary publishes a notice so-*
14 *liciting grant applications; and*

15 “(ii) *not later than 120 days after such*
16 *deadline, all such applications must be sub-*
17 *mitted.*

18 “(b) *PURPOSE.*—

19 “(1) *IN GENERAL.*—*Except for research under*
20 *paragraph (5) and information collection and report-*
21 *ing under paragraph (6), the purpose of an allotment*
22 *under subsection (a) to a State (or to another entity*
23 *in the State pursuant to subsection (a)(2)) is to en-*
24 *able the State or other entity to implement education*

1 *exclusively on sexual risk avoidance (meaning volun-*
2 *tarily refraining from sexual activity).*

3 “(2) *REQUIRED COMPONENTS.—Education on*
4 *sexual risk avoidance pursuant to an allotment under*
5 *this section shall—*

6 “(A) *ensure that the unambiguous and pri-*
7 *mary emphasis and context for each topic de-*
8 *scribed in paragraph (3) is a message to youth*
9 *that normalizes the optimal health behavior of*
10 *avoiding nonmarital sexual activity;*

11 “(B) *be medically accurate and complete;*

12 “(C) *be age-appropriate; and*

13 “(D) *be based on adolescent learning and*
14 *developmental theories for the age group receiv-*
15 *ing the education.*

16 “(3) *TOPICS.—Education on sexual risk avoid-*
17 *ance pursuant to an allotment under this section*
18 *shall address each of the following topics:*

19 “(A) *The holistic individual and societal*
20 *benefits associated with personal responsibility,*
21 *self-regulation, goal setting, healthy decision-*
22 *making, and a focus on the future.*

23 “(B) *The advantage of refraining from non-*
24 *marital sexual activity in order to improve the*

1 *future prospects and physical and emotional*
2 *health of youth.*

3 “(C) *The increased likelihood of avoiding*
4 *poverty when youth attain self-sufficiency and*
5 *emotional maturity before engaging in sexual ac-*
6 *tivity.*

7 “(D) *The foundational components of*
8 *healthy relationships and their impact on the*
9 *formation of healthy marriages and safe and sta-*
10 *ble families.*

11 “(E) *How other youth risk behaviors, such*
12 *as drug and alcohol usage, increase the risk for*
13 *teen sex.*

14 “(F) *How to resist and avoid, and receive*
15 *help regarding, sexual coercion and dating vio-*
16 *lence, recognizing that even with consent teen sex*
17 *remains a youth risk behavior.*

18 “(4) *CONTRACEPTION.—Education on sexual risk*
19 *avoidance pursuant to an allotment under this section*
20 *shall ensure that—*

21 “(A) *any information provided on contra-*
22 *ception is medically accurate and ensures that*
23 *students understand that contraception offers*
24 *physical risk reduction, but not risk elimination;*
25 *and*

1 “(B) *the education does not include dem-*
2 *onstrations, simulations, or distribution of con-*
3 *traceptive devices.*

4 “(5) *RESEARCH.—*

5 “(A) *IN GENERAL.—A State or other entity*
6 *receiving an allotment pursuant to subsection (a)*
7 *may use up to 20 percent of such allotment to*
8 *build the evidence base for sexual risk avoidance*
9 *education by conducting or supporting research.*

10 “(B) *REQUIREMENTS.—Any research con-*
11 *ducted or supported pursuant to subparagraph*
12 *(A) shall be—*

13 “(i) *rigorous;*

14 “(ii) *evidence-based; and*

15 “(iii) *designed and conducted by inde-*
16 *pendent researchers who have experience in*
17 *conducting and publishing research in peer-*
18 *reviewed outlets.*

19 “(6) *INFORMATION COLLECTION AND REPORT-*
20 *ING.—A State or other entity receiving an allotment*
21 *pursuant to subsection (a) shall, as specified by the*
22 *Secretary—*

23 “(A) *collect information on the programs*
24 *and activities funded through the allotment; and*

1 “(B) submit reports to the Secretary on the
2 data from such programs and activities.

3 “(c) NATIONAL EVALUATION.—

4 “(1) IN GENERAL.—The Secretary shall—

5 “(A) in consultation with appropriate State
6 and local agencies, conduct one or more rigorous
7 evaluations of the education funded through this
8 section and associated data; and

9 “(B) submit a report to the Congress on the
10 results of such evaluations, together with a sum-
11 mary of the information collected pursuant to
12 subsection (b)(6).

13 “(2) CONSULTATION.—In conducting the evalua-
14 tions required by paragraph (1), including the estab-
15 lishment of evaluation methodologies, the Secretary
16 shall consult with relevant stakeholders.

17 “(d) APPLICABILITY OF CERTAIN PROVISIONS.—

18 “(1) Sections 503, 507, and 508 apply to allot-
19 ments under subsection (a) to the same extent and in
20 the same manner as such sections apply to allotments
21 under section 502(c).

22 “(2) Sections 505 and 506 apply to allotments
23 under subsection (a) to the extent determined by the
24 Secretary to be appropriate.

25 “(e) FUNDING.—

1 “(1) *IN GENERAL.*—*To carry out this section,*
2 *there is appropriated, out of any money in the Treas-*
3 *ury not otherwise appropriated, \$75,000,000 for each*
4 *of fiscal years 2018 and 2019.*”

5 “(2) *RESERVATION.*—*The Secretary shall reserve,*
6 *for each of fiscal years 2018 and 2019, not more than*
7 *20 percent of the amount appropriated pursuant to*
8 *paragraph (1) for administering the program under*
9 *this section, including the conducting of national*
10 *evaluations and the provision of technical assistance*
11 *to the recipients of allotments.”.*”

12 (2) *EFFECTIVE DATE.*—*The amendment made by*
13 *this section takes effect on October 1, 2017.*

14 (b) *PERSONAL RESPONSIBILITY EDUCATION.*—

15 (1) *IN GENERAL.*—*Section 513 of the Social Se-*
16 *curity Act (42 U.S.C. 713) is amended—*

17 (A) *in subsection (a)(1)(A), by striking*
18 *“2017” and inserting “2019”; and*

19 (B) *in subsection (a)(4)—*

20 (i) *in subparagraph (A), by striking*
21 *“2017” each place it appears and inserting*
22 *“2019”; and*

23 (ii) *in subparagraph (B)—*

24 (I) *in the subparagraph heading,*
25 *by striking “3-YEAR GRANTS” and in-*

1 serting “*COMPETITIVE PREP GRANTS*”;

2 and

3 (II) in clause (i), by striking “so-
4 licit applications to award 3-year
5 grants in each of fiscal years 2012
6 through 2017” and inserting “continue
7 through fiscal year 2019 grants award-
8 ed for any of fiscal years 2015 through
9 2017”;

10 (C) in subsection (c)(1), by inserting after
11 “youth with HIV/AIDS,” the following: “victims
12 of human trafficking,”; and

13 (D) in subsection (f), by striking “2017”
14 and inserting “2019”.

15 (2) *EFFECTIVE DATE*.—The amendments made
16 by this subsection take effect on October 1, 2017.

TITLE II—OFFSETS

1
2 **SEC. 201. PROVIDING FOR QUALIFIED HEALTH PLAN GRACE**
3 **PERIOD REQUIREMENTS FOR ISSUER RE-**
4 **CEIPT OF ADVANCE PAYMENTS OF COST-**
5 **SHARING REDUCTIONS AND PREMIUM TAX**
6 **CREDITS THAT ARE MORE CONSISTENT WITH**
7 **STATE LAW GRACE PERIOD REQUIREMENTS.**

8 (a) *IN GENERAL.*—Section 1412(c) of the Patient Pro-
9 tection and Affordable Care Act (42 U.S.C. 18082(c)) is
10 amended—

11 (1) in paragraph (2)—

12 (A) in subparagraph (B)(iv)(II), by strik-
13 ing “a 3-month grace period” and inserting “a
14 grace period specified in subparagraph (C)”;

15 (B) by adding at the end the following new
16 subparagraphs:

17 “(C) *GRACE PERIOD SPECIFIED.*—For pur-
18 poses of subparagraph (B)(iv)(II), the grace pe-
19 riod specified in this subparagraph is—

20 “(i) for plan years beginning before
21 January 1, 2018, a 3-month grace period;
22 and

23 “(ii) for plan years beginning on or
24 after January 1, 2018—

1 “(I) in the case of an Exchange
2 operating in a State that has a State
3 law grace period in place, such State
4 law grace period; and

5 “(II) in the case of an Exchange
6 operating in a State that does not have
7 a State law grace period in place, a 1-
8 month grace period.

9 “(D) STATE LAW GRACE PERIOD.—For pur-
10 poses of subparagraph (C), the term ‘State law
11 grace period’ means, with respect to a State, a
12 grace period for nonpayment of premiums before
13 discontinuing coverage that is applicable under
14 the State law to health insurance coverage offered
15 in the individual market of the State.”; and

16 (2) in paragraph (3), by adding at the end the
17 following new sentence: “The requirements of para-
18 graph (2)(B)(iv) apply to an issuer of a qualified
19 health plan receiving an advanced payment under
20 this paragraph in the same manner and to the same
21 extent that such requirements apply to an issuer of a
22 qualified health plan receiving an advanced payment
23 under paragraph (2)(A).”.

24 (b) REPORT ON ALIGNING GRACE PERIODS FOR MED-
25 ICAID, MEDICARE, AND EXCHANGE PLANS.—Not later than

1 *two years after the date of full implementation of subsection*
2 *(a), the Comptroller General of the United States shall sub-*
3 *mit to Congress a report on—*

4 (1) *the effects on consumers of aligning grace pe-*
5 *riods applied under the Medicaid program under title*
6 *XIX of the Social Security Act, under the Medicare*
7 *program under parts C and D of title XVIII of such*
8 *Act, and under qualified health plans offered on an*
9 *Exchange established under title I of the Patient Pro-*
10 *tection and Affordable Care Act, including the extent*
11 *to which such an alignment of grace periods may help*
12 *to avoid enrollment status confusion for individuals*
13 *under such Medicaid program, Medicare program,*
14 *and qualified health plans; and*

15 (2) *the extent to which such an alignment of*
16 *grace periods may reduce fraud, waste, and abuse*
17 *under the Medicaid program.*

18 **SEC. 202. PREVENTION AND PUBLIC HEALTH FUND.**

19 *Section 4002(b) of the Patient Protection and Afford-*
20 *able Care Act (42 U.S.C. 300u–11(b)) is amended by strik-*
21 *ing paragraphs (3) through (8) and inserting the following*
22 *new paragraphs:*

23 “(3) *for fiscal year 2018, \$900,000,000;*

24 “(4) *for fiscal year 2019, \$500,000,000;*

25 “(5) *for fiscal year 2020, \$500,000,000;*

1 “(6) for fiscal year 2021, \$500,000,000;
2 “(7) for fiscal year 2022, \$500,000,000;
3 “(8) for fiscal year 2023, \$500,000,000;
4 “(9) for fiscal year 2024, \$500,000,000;
5 “(10) for fiscal year 2025, \$750,000,000;
6 “(11) for fiscal year 2026, \$1,000,000,000; and
7 “(12) for fiscal year 2027 and each fiscal year
8 thereafter, \$2,000,000,000.”

Union Calendar No. 262

115TH CONGRESS
1ST Session

H. R. 3922

[Report No. 115-359, Part I]

A BILL

To extend funding for certain public health programs, and for other purposes.

OCTOBER 19, 2017

Reported from the Committee on Energy and Commerce
with an amendment

OCTOBER 19, 2017

The Committee on Ways and Means discharged; committed to the Committee of the Whole House on the State of the Union and ordered to be printed