

116TH CONGRESS
2D SESSION

H. R. 8573

To prohibit group health plans, health insurance issuers offering group or individual health insurance coverage, State plans under title XIX of the Social Security Act, State child health plans under title XXI of such Act, and the TRICARE program from applying a deductible to outpatient pediatric services.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 9, 2020

Ms. SCHRIER introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, Education and Labor, and Armed Services, 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 prohibit group health plans, health insurance issuers offering group or individual health insurance coverage, State plans under title XIX of the Social Security Act, State child health plans under title XXI of such Act, and the TRICARE program from applying a deductible to outpatient pediatric services.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Helping Families Ac-
3 cess Pediatric Care Act of 2020”.

4 **SEC. 2. PROHIBITING CERTAIN HEALTH PLANS FROM AP-
5 PLYING A DEDUCTIBLE TO OUTPATIENT PE-
6 DIATRIC SERVICES.**

7 (a) ERISA.—

8 (1) IN GENERAL.—Subpart B of part 7 of title
9 I of the Employee Retirement Income Security Act
10 of 1974 (29 U.S.C. 1185 et seq.) is amended by
11 adding at the end the following new section:

12 **“SEC. 716. PROHIBITION ON APPLICATION OF DEDUCTIBLE
13 TO OUTPATIENT PEDIATRIC SERVICES.**

14 “(a) IN GENERAL.—A group health plan and a health
15 insurance issuer offering group health insurance coverage
16 may not impose any deductible under such plan or cov-
17 erage (as applicable) with respect to outpatient pediatric
18 services (as defined in subsection (b)) for which benefits
19 are provided under such plan or coverage.

20 “(b) OUTPATIENT PEDIATRIC SERVICES DEFINED.—
21 For purposes of subsection (a), the term ‘outpatient pedi-
22 atric services’ means any item or service furnished to an
23 individual under the age of 18 as an outpatient by a health
24 care provider acting within the scope of such provider’s
25 license, regardless of whether such service is furnished in-
26 person or through use of a telecommunications system.”.

1 (2) CLERICAL AMENDMENT.—The table of con-
2 tents of the Employee Retirement Income Security
3 Act of 1974 is amended by inserting after the item
4 relating to section 714 the following:

“Sec. 715. Additional market reforms.

“Sec. 716. Prohibition on application of deductible to outpatient pediatric services.”.

5 (b) PHSA.—Subpart II of part A of title XXVII of
6 the Public Health Service Act (42 U.S.C. 300gg–11 et
7 seq.) is amended by adding at the end the following new
8 section:

9 **“SEC. 2730. PROHIBITION ON APPLICATION OF DEDUCT-**
10 **IBLE TO OUTPATIENT PEDIATRIC SERVICES.**

11 “(a) IN GENERAL.—A group health plan and a health
12 insurance issuer offering group or individual health insur-
13 ance coverage may not impose any deductible under such
14 plan or coverage (as applicable) with respect to outpatient
15 pediatric services (as defined in subsection (b)) for which
16 benefits are provided under such plan or coverage.

17 “(b) OUTPATIENT PEDIATRIC SERVICES DEFINED.—
18 For purposes of subsection (a), the term ‘outpatient pedi-
19 atric services’ means any item or service furnished to an
20 individual under the age of 18 as an outpatient by a health
21 care provider acting within the scope of such provider’s
22 license, regardless of whether such service is furnished in-
23 person or through use of a telecommunications system.”.

24 (c) IRC.—

1 (1) IN GENERAL.—Subchapter B of chapter
2 100 of the Internal Revenue Code of 1986 is amend-
3 ed by adding at the end the following new section:

4 **“SEC. 9816. PROHIBITION ON APPLICATION OF DEDUCT-**
5 **IBLE TO OUTPATIENT PEDIATRIC SERVICES.**

6 “(a) IN GENERAL.—A group health plan may not im-
7 pose any deductible under such plan with respect to out-
8 patient pediatric services (as defined in subsection (b)) for
9 which benefits are provided under such plan.

10 “(b) OUTPATIENT PEDIATRIC SERVICES DEFINED.—
11 For purposes of subsection (a), the term ‘outpatient pedi-
12 atric services’ means any item or service furnished to an
13 individual under the age of 18 as an outpatient by a health
14 care provider acting within the scope of such provider’s
15 license, regardless of whether such service is furnished in-
16 person or through use of a telecommunications system.”.

17 (2) CLERICAL AMENDMENT.—The table of sec-
18 tions for subchapter B of chapter 100 of the Inter-
19 nal Revenue Code of 1986 is amended by adding at
20 the end the following new items:

 “Sec. 9815. Additional market reforms.

 “Sec. 9816. Prohibition on application of deductible to outpatient pediatric
 services.”.

21 (d) MEDICAID.—Section 1916A of the Social Security
22 Act (42 U.S.C. 1396o–1) is amended—

23 (1) in subsection (a)—

1 (A) in paragraph (1), by striking “para-
2 graph (2)” and inserting “paragraphs (2) and
3 (4)”; and

4 (B) by adding at the end the following new
5 paragraph:

6 “(4) PROHIBITION ON APPLICATION OF DEDUC-
7 TION TO OUTPATIENT PEDIATRIC SERVICES.—A
8 State may not impose a deduction under the plan
9 with respect to outpatient pediatric services (as de-
10 fined in subsection (f)).”; and

11 (2) by adding at the end the following new sub-
12 section:

13 “(f) OUTPATIENT PEDIATRIC SERVICES DEFINED.—
14 For purposes of this section, the term ‘outpatient pediatric
15 services’ means any item or service furnished to an indi-
16 vidual under the age of 18 as an outpatient by a health
17 care provider acting within the scope of such provider’s
18 license, regardless of whether such service is furnished in-
19 person or through use of a telecommunications system.”.

20 (e) CHIP.—Section 2103(e) of the Social Security
21 Act (42 U.S.C. 1397cc) is amended by adding at the end
22 the following new paragraph:

23 “(5) PROHIBITION ON APPLICATION OF DEDUC-
24 TION TO OUTPATIENT PEDIATRIC SERVICES.—

1 “(A) IN GENERAL.—The State child health
2 plan may not impose a deductible with respect
3 to outpatient pediatric services (as defined in
4 subparagraph (B)).

5 “(B) OUTPATIENT PEDIATRIC SERVICES
6 DEFINED.—For purposes of this paragraph, the
7 term ‘outpatient pediatric services’ means any
8 item or service furnished to an individual under
9 the age of 18 as an outpatient by a health care
10 provider acting within the scope of such pro-
11 vider’s license, regardless of whether such serv-
12 ice is furnished in-person or through use of a
13 telecommunications system.”.

14 (f) FIRST-DOLLAR COVERAGE ALLOWANCE FOR
15 OUTPATIENT PEDIATRIC SERVICES FOR HIGH DEDUCT-
16 IBLE PLANS.—Section 226(c)(2) of the Internal Revenue
17 Code of 1986 is amended by adding at the end the fol-
18 lowing new subparagraph:

19 “(F) SAFE HARBOR FOR ABSENCE OF DE-
20 DUCTIBLE FOR OUTPATIENT PEDIATRIC SERV-
21 ICES.—A plan shall not fail to be treated as a
22 high deductible health plan by reason of failing
23 to have a deductible for outpatient pediatric
24 services (as defined in section 9816(b)).”.

25 (g) TRICARE PROGRAM.—

1 (1) IN GENERAL.—Section 1095d of title 10,
2 United States Code, is amended—

3 (A) in the section heading, by inserting
4 “**prohibition on and**” before “**waiver**”;

5 (B) by redesignating subsections (a) and
6 (b) as subsections (b) and (c), respectively;

7 (C) by inserting before subsection (b), as
8 so redesignated, the following new subsection
9 (a):

10 “(a) PROHIBITION ON APPLICATION OF DEDUCTIBLE
11 TO OUTPATIENT PEDIATRIC SERVICES.—The Secretary of
12 Defense may not impose any deductible under the
13 TRICARE program for medical care provided to a covered
14 beneficiary who is under the age of 18 as an outpatient,
15 regardless of whether such care is furnished in-person or
16 through use of a telecommunications system.”; and

17 (D) in subsection (b), as so redesignated,
18 by striking “The Secretary” and inserting “In
19 addition to the requirement under subsection
20 (a), the Secretary”.

21 (2) CLERICAL AMENDMENT.—The table of sec-
22 tions at the beginning of chapter 55 of title 10,
23 United States Code, is amended by striking the item
24 relating to section 1095d and inserting the following
25 new item:

“1095d. TRICARE program: prohibition on and waiver of certain deductibles.”.

1 (3) CONFORMING AMENDMENT.—Section
2 1075(d) of such title is amended by adding at the
3 end the following new paragraph:

4 “(5) The Secretary may not impose any deductible
5 amounts for outpatient pediatric services pursuant to sec-
6 tion 1095d of this title.”.

7 (h) GAO STUDY.—Not later than 4 years after the
8 date of the enactment of this Act, the Comptroller General
9 of the United States shall conduct a study and submit to
10 Congress a report on the effects of the amendments made
11 by this Act on premiums, deductibles, and copayment and
12 coinsurance requirements with respect to group health
13 plans and group and individual health insurance coverage
14 (as such terms are defined in section 2791 of the Public
15 Health Service Act (42 U.S.C. 300gg–91)).

16 (i) EFFECTIVE DATE.—The amendment (or amend-
17 ments) made by—

18 (1) subsections (a) through (c) and subsections
19 (f) and (g) shall apply with respect to plan years be-
20 ginning on or after the date that is 2 years after the
21 date of the enactment of this Act;

22 (2) subsection (d) shall apply with respect to
23 medical assistance furnished in calendar quarters be-
24 ginning on or after the date that is 2 years after the
25 date of the enactment of this Act; and

1 (3) subsection (c) shall apply with respect to
2 child health assistance furnished calendar quarters
3 described in paragraph (2).

○