^{114TH CONGRESS} **H. R. 5447**

[Report No. 114-]

To provide an exception from certain group health plan requirements for qualified small employer health reimbursement arrangements.

IN THE HOUSE OF REPRESENTATIVES

JUNE 10, 2016

Mr. BOUSTANY (for himself and Mr. THOMPSON of California) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committees on Education and the Workforce and Energy and Commerce, 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

JUNE --, 2016

Reported from the Committee on Ways and Means with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on June 10, 2016]

A BILL

To provide an exception from certain group health plan requirements for qualified small employer health reimbursement arrangements.

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 "Small Business Health
5	Care Relief Act of 2016".
6	SEC. 2. EXCEPTION FROM GROUP HEALTH PLAN REQUIRE-
7	MENTS FOR QUALIFIED SMALL EMPLOYER
8	HEALTH REIMBURSEMENT ARRANGEMENTS.
9	(a) Amendments to the Internal Revenue Code
10	OF 1986 AND THE PATIENT PROTECTION AND AFFORDABLE
11	CARE ACT.—
12	(1) IN GENERAL.—Section 9831 of the Internal
13	Revenue Code of 1986 is amended by adding at the
14	end the following new subsection:
15	"(d) Exception for Qualified Small Employer
16	Health Reimbursement Arrangements.—
17	"(1) IN GENERAL.—For purposes of this title (ex-
18	cept as provided in section $4980I(f)(4)$ and notwith-
19	standing any other provision of this title), the term
20	'group health plan' shall not include any qualified
21	small employer health reimbursement arrangement.
22	"(2) QUALIFIED SMALL EMPLOYER HEALTH RE-
23	IMBURSEMENT ARRANGEMENT.—For purposes of this
24	subsection—

1	"(A) IN GENERAL.—The term 'qualified
2	small employer health reimbursement arrange-
3	ment' means an arrangement which—
4	"(i) is described in subparagraph (B),
5	and
6	"(ii) is provided on the same terms to
7	all eligible employees of the eligible em-
8	ployer.
9	"(B) ARRANGEMENT DESCRIBED.—An ar-
10	rangement is described in this subparagraph if—
11	"(i) such arrangement is funded solely
12	by an eligible employer and no salary re-
13	duction contributions may be made under
14	such arrangement,
15	"(ii) such arrangement provides, after
16	the employee provides proof of coverage, for
17	the payment of, or reimbursement of, an eli-
18	gible employee for expenses for medical care
19	(as defined in section 213(d)) incurred by
20	the eligible employee or the eligible employ-
21	ee's family members (as determined under
22	the terms of the arrangement), and
23	"(iii) the amount of payments and re-
24	imbursements described in clause (ii) for
25	any year do not exceed \$5,130 (\$10,260 in

1	the case of an arrangement that also pro-
2	vides for payments or reimbursements for
3	family members of the employee).
4	"(C) Certain variation permitted.—For
5	purposes of subparagraph (A)(ii), an arrange-
6	ment shall not fail to be treated as provided on
7	the same terms to each eligible employee merely
8	because the employee's permitted benefits under
9	such arrangement vary in accordance with the
10	variation in the price of an insurance policy in
11	the relevant individual health insurance market
12	based on—
13	((i) the age of the eligible employee
14	(and, in the case of an arrangement which
15	covers medical expenses of the eligible em-
16	ployee's family members, the age of such
17	family members), or
18	"(ii) the number of family members of
19	the eligible employee the medical expenses of
20	which are covered under such arrangement.
21	The variation permitted under the preceding sen-
22	tence shall be determined by reference to the
23	same insurance policy with respect to all eligible
24	employees.

1	"(D) RULES RELATING TO MAXIMUM DOL-
2	LAR LIMITATION.—
3	"(i) Amount prorated in certain
4	CASES.—In the case of an individual who is
5	not covered by an arrangement for the en-
6	tire year, the limitation under subpara-
7	graph (A)(iii) for such year shall be an
8	amount which bears the same ratio to the
9	amount which would (but for this clause) be
10	in effect for such individual for such year
11	under subparagraph $(A)(iii)$ as the number
12	of months for which such individual is cov-
13	ered by the arrangement for such year bears
14	to 12.
15	"(ii) INFLATION ADJUSTMENT.—In the
16	case of any year beginning after 2016, each
17	of the dollar amounts in subparagraph
18	(A)(iii) shall be increased by an amount
19	equal to—
20	"(I) such dollar amount, multi-
21	plied by
22	"(II) the cost-of-living adjustment
23	determined under section $1(f)(3)$ for
24	the calendar year in which the taxable
25	year begins, determined by substituting

1	ʻcalendar year 2015' for ʻcalendar year
2	1992' in subparagraph (B) thereof.
3	If any dollar amount increased under the
4	preceding sentence is not a multiple of
5	\$100, such dollar amount shall be rounded
6	to the next lowest multiple of \$100.
7	"(3) Other definitions.—For purposes of this
8	subsection—
9	"(A) ELIGIBLE EMPLOYEE.—The term 'eli-
10	gible employee' means any employee of an eligi-
11	ble employer, except that the terms of the ar-
12	rangement may exclude from consideration em-
13	ployees described in any clause of section
14	105(h)(3)(B) (applied by substituting '90 days'
15	for '3 years' in clause (i) thereof).
16	"(B) ELIGIBLE EMPLOYER.—The term 'eli-
17	gible employer' means an employer that—
18	"(i) is not an applicable large em-
19	ployer as defined in section $4980H(c)(2)$,
20	and
21	"(ii) does not offer a group health plan
22	to any of its employees.
23	"(C) Permitted benefit.—The term 'per-
24	mitted benefit' means, with respect to any eligi-
25	ble employee, the maximum dollar amount of

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	payments and reimbursements which may be
2	made under the terms of the qualified small em-
3	ployer health reimbursement arrangement for the
4	year with respect to such employee.
5	"(4) Notice.—
6	"(A) IN GENERAL.—An employer funding a
7	qualified small employer health reimbursement
8	arrangement for any year shall, not later than
9	90 days before the beginning of such year (or, in
10	the case of an employee who is not eligible to
11	participate in the arrangement as of the begin-
12	ning of such year, the date on which such em-
13	ployee is first so eligible), provide a written no-
14	tice to each eligible employee which includes the
15	$information \ described \ in \ subparagraph \ (B).$
16	"(B) CONTENTS OF NOTICE.—The notice re-
17	quired under subparagraph (A) shall include
18	each of the following:
19	"(i) A statement of the amount which
20	would be such eligible employee's permitted
21	benefits under the arrangement for the year.
22	"(ii) A statement that the eligible em-
23	ployee should provide the information de-
24	scribed in clause (i) to any health insurance
25	exchange to which the employee applies for

1	advance payment of the premium assistance
2	tax credit.
3	"(iii) A statement that if the employee
4	is not covered under minimum essential
5	coverage for any month the employee may
6	be subject to tax under section $5000A$ for
7	such month and reimbursements under the
8	arrangement may be includible in gross in-
9	come.".
10	(2) Limitation on exclusion from gross in-
11	COME.—Section 106 of such Code is amended by add-
12	ing at the end the following:
13	"(g) Qualified Small Employer Health Reim-
14	BURSEMENT ARRANGEMENT.—For purposes of this section
15	and section 105, payments or reimbursements from a quali-
16	fied small employer health reimbursement arrangement (as
17	defined in section 9831(d)) of an individual for medical
18	care (as defined in section 213(d)) shall not be treated as
19	paid or reimbursed under employer-provided coverage for
20	medical expenses under an accident or health plan if for
21	the month in which such medical care is provided the indi-
22	vidual does not have minimum essential coverage (within
23	the meaning of section 5000A(f)).".
24	(3) Coordination with health insurance

25 PREMIUM CREDIT.—Section 36B(c) of such Code is

1	amended by adding at the end the following new
2	paragraph:
3	"(4) Special rules for qualified small em-
4	PLOYER HEALTH REIMBURSEMENT ARRANGEMENTS.—
5	"(A) IN GENERAL.—The term 'coverage
6	month' shall not include any month with respect
7	to an employee (or any spouse or dependent of
8	such employee) if for such month the employee is
9	provided a qualified small employer health reim-
10	bursement arrangement which constitutes afford-
11	able coverage.
12	"(B) DENIAL OF DOUBLE BENEFIT.—In the
13	case of any employee who is provided a qualified
14	small employer health reimbursement arrange-
15	ment for any coverage month (determined with-
16	out regard to subparagraph (A)), the credit oth-
17	erwise allowable under subsection (a) to the tax-
18	payer for such month shall be reduced (but not
19	below zero) by the amount described in subpara-
20	graph (C)(i)(II) for such month.
21	"(C) Affordable coverage.—For pur-
22	poses of subparagraph (A), a qualified small em-
23	ployer health reimbursement arrangement shall
24	be treated as constituting affordable coverage for
25	a month if—

1	"(i) the excess of—
2	((I) the amount that would be
3	paid by the employee as the premium
4	for such month for self-only coverage
5	under the second lowest cost silver plan
6	offered in the relevant individual
7	health insurance market, over
8	"(II) $^{1}/_{12}$ of the employee's per-
9	mitted benefit (as defined in section
10	9831(d)(3)(C)) under such arrange-
11	ment, does not exceed—
12	"(ii) $\frac{1}{12}$ of 9.5 percent of the employ-
13	ee's household income.
14	"(D) Qualified small employer health
15	REIMBURSEMENT ARRANGEMENT.—For purposes
16	of this paragraph, the term 'qualified small em-
17	ployer health reimbursement arrangement' has
18	the meaning given such term by section
19	9831(d)(2).
20	"(E) Coverage for less than entire
21	YEAR.—In the case of an employee who is pro-
22	vided a qualified small employer health reim-
23	bursement arrangement for less than an entire
24	year, subparagraph $(C)(i)(II)$ shall be applied by
25	substituting 'the number of months during the

1	year for which such arrangement was provided'
2	for '12'.
3	"(F) INDEXING.—In the case of plan years
4	beginning in any calendar year after 2014, the
5	Secretary shall adjust the 9.5 percent amount
6	under subparagraph $(C)(ii)$ in the same manner
7	as the percentages are adjusted under subsection
8	(b)(3)(A)(ii).".
9	(4) Application of excise tax on high cost
10	EMPLOYER-SPONSORED HEALTH COVERAGE.—
11	(A) IN GENERAL.—Section $4980I(f)(4)$ of
12	such Code is amended by adding at the end the
13	following: "Section $9831(d)(1)$ shall not apply
14	for purposes of this section.".
15	(B) DETERMINATION OF COST OF COV-
16	ERAGE.—Section $4980I(d)(2)$ of such Code is
17	amended by redesignating subparagraph (D) as
18	subparagraph (E) and by inserting after sub-
19	paragraph (C) the following new subparagraph:
20	"(D) Qualified small employer health
21	REIMBURSEMENT ARRANGEMENTS.—In the case
22	of applicable employer-sponsored coverage con-
23	sisting of coverage under any qualified small em-
24	ployer health reimbursement arrangement (as de-
25	fined in section $9831(d)(2)$), the cost of coverage

shall be equal to the amount described in section
 6051(a)(15).".

3 (5) ENFORCEMENT OF NOTICE REQUIREMENT.—
4 Section 6652 of such Code is amended by adding at
5 the end the following new subsection:

6 "(o) Failure To Provide Notices With Respect 7 TO QUALIFIED SMALL EMPLOYER HEALTH REIMBURSE-8 MENT ARRANGEMENTS.—In the case of each failure to pro-9 vide a written notice as required by section 9831(d)(4), un-10 less it is shown that such failure is due to reasonable cause and not willful neglect, there shall be paid, on notice and 11 demand of the Secretary and in the same manner as tax, 12 13 by the person failing to provide such written notice, an amount equal to \$50 per employee per incident of failure 14 15 to provide such notice, but the total amount imposed on such person for all such failures during any calendar year 16 17 shall not exceed \$2,500.".

18 (6) REPORTING.—

19 (A) W-2 REPORTING.—Section 6051(a) of
20 such Code is amended by striking "and" at the
21 end of paragraph (13), by striking the period at
22 the end of paragraph (14) and inserting ", and",
23 and by inserting after paragraph (14) the fol24 lowing new paragraph:

1	"(15) the total amount of permitted benefit (as
2	defined in section $9831(d)(3)(C)$) for the year under
3	a qualified small employer health reimbursement ar-
4	rangement (as defined in section $9831(d)(2)$) with re-
5	spect to the employee.".
6	(B) INFORMATION REQUIRED TO BE PRO-
7	VIDED BY EXCHANGE SUBSIDY APPLICANTS.—
8	Section 1411(b)(3) of the Patient Protection and
9	Affordable Care Act is amended by redesignating
10	subparagraph (B) as $subparagraph$ (C) and by
11	inserting after subparagraph (A) the following
12	new subparagraph:
13	"(B) Certain individual health insur-
14	ANCE POLICIES OBTAINED THROUGH SMALL EM-
15	PLOYERS.—The amount of the enrollee's per-
16	mitted benefit (as defined in section
17	9831(d)(3)(C) of the Internal Revenue Code of
18	1986) under a qualified small employer health
19	reimbursement arrangement (as defined in sec-
20	tion 9831(d)(2) of such Code).".
21	(7) Effective dates.—
22	(A) IN GENERAL.—Except as otherwise pro-
23	vided in this paragraph, the amendments made
24	by this subsection shall apply to years beginning
25	after the earlier of—

1	(i) the date that is 90 days after the
2	date of the enactment of this Act, or
3	(<i>ii</i>) December 31, 2016.
4	(B) TRANSITION RELIEF.—The relief under
5	Treasury Notice 2015–17 shall be treated as ap-
6	plying to any plan year beginning on or before
7	the date described in subparagraph (A).
8	(C) Coordination with health insur-
9	ANCE PREMIUM CREDIT.—The amendments made
10	by paragraph (3) shall apply to taxable years be-
11	ginning after the date described in subparagraph
12	(A).
13	(D) Employee notice.—The amendments
14	made by paragraph (5) shall apply to notices
15	with respect to years beginning after the date de-
16	scribed in subparagraph (A).
17	(E) W-2 REPORTING.—The amendments
18	made by paragraph (6)(A) shall apply to cal-
19	endar years beginning after December 31, 2016.
20	(F) INFORMATION PROVIDED BY EXCHANGE
21	SUBSIDY APPLICANTS.—
22	(i) IN GENERAL.—The amendments
23	made by paragraph (6)(B) shall apply to
24	applications for enrollment made after the
25	date described in subparagraph (A).

1	(ii) VERIFICATION.—Verification under
2	section 1411 of the Patient Protection and
3	Affordable Care Act of information provided
4	under section $1411(b)(3)(B)$ of such Act
5	shall apply with respect to months begin-
6	ning after October 2016.
7	(8) SUBSTANTIATION REQUIREMENTS.—The Sec-
8	retary of the Treasury (or his designee) may issue
9	substantiation requirements as necessary to carry out
10	this subsection.
11	(b) Amendments to the Employee Retirement
12	Income Security Act of 1974.—
13	(1) IN GENERAL.—Section 733(a)(1) of the Em-
14	ployee Retirement Income Security Act of 1974 (29
15	U.S.C. 1191b(a)(1)) is amended by adding at the end
16	the following: "Such term shall not include any quali-
17	fied small employer health reimbursement arrange-
18	ment (as defined in section $9831(d)(2)$ of the Internal
19	Revenue Code of 1986).".
20	(2) Exception from continuation coverage
21	REQUIREMENTS, ETC.—Section 607(1) of such Act (29
22	U.S.C. 1167(1)) is amended by adding at the end the
23	following: "Such term shall not include any qualified
24	

1	(as defined in section 9831(d)(2) of the Internal Rev-
2	enue Code of 1986).".
3	(3) EFFECTIVE DATE.—The amendments made
4	by this subsection shall apply to plan years beginning
5	after the date described in subsection $(a)(7)(A)$.
6	(c) Amendments to the Public Health Service
7	Аст.—
8	(1) IN GENERAL.—Section $2791(a)(1)$ of the
9	Public Health Service Act (42 U.S.C. 300gg-91(a)(1))
10	is amended by adding at the end the following: "Ex-
11	cept for purposes of part C of title XI of the Social
12	Security Act (42 U.S.C. 1320d et seq.), such term
13	shall not include any qualified small employer health
14	reimbursement arrangement (as defined in section
15	9831(d)(2) of the Internal Revenue Code of 1986).".
16	(2) EXCEPTION FROM CONTINUATION COVERAGE
17	REQUIREMENTS.—Section 2208(1) of the Public
18	Health Service Act (42 U.S.C. 300bb–8(1)) is amend-
19	ed by adding at the end the following: "Such term
20	shall not include any qualified small employer health
21	reimbursement arrangement (as defined in section
22	9831(d)(2) of the Internal Revenue Code of 1986).".
23	(3) EFFECTIVE DATE.—The amendments made
24	by this subsection shall apply to plan years beginning
25	after the date described in subsection $(a)(7)(A)$.