8

AMENDMENT TO H.R. 3962

OFFERED BY MR. DINGELL OF MICHIGAN

Page 17, add at the end of line 10 the following: "For a State without a high-risk pool program, the Secretary may work with the State to coordinate with other forms of coverage expansions, such as State public-private partnerships.".

Page 17, line 12, insert after "means an individual" the following: "who meets the requirements of subsection (i)(1)".

Page 18, line 8, strike "or".

Page 18, line 13, strike the period and insert "; or".

Page 18, after line 13, insert the following:

1 (4) who on or after October 29, 2009, had em-
2 ployment-based retiree health coverage (as defined in
3 subsection (i)) and the annual increase in premiums
4 for such individual under such coverage (for any cov-
5 erage period beginning on or after such date) ex-
6 ceeds such excessive percentage as the Secretary
7 shall specify.

Page 19, line 23, insert ", consistent with subsection (i)(2)," after "attest".

Page 26, after line 21, insert the following new subsections:

1 (i) APPLICATION AND VERIFICATION OF REQUIRE-
2 MENT OF CITIZENSHIP OR LAWFUL PRESENCE IN THE
3 UNITED STATES.—
4 (1) REQUIREMENT.—No individual shall be an
5 eligible individual under this section unless the indi-
6 vidual is a citizen or national of the United States
7 or is lawfully present in a State in the United States
8 (other than as a nonimmigrant described in a sub-
9 paragraph (excluding subparagraphs (K), (T), (U),
10 and (V)) of section 101(a)(15) of the Immigration
11 and Nationality Act).
12 (2) APPLICATION OF VERIFICATION PROCESS
13 FOR AFFORDABILITY CREDITS.—The provisions of
14 paragraphs (4) (other than subparagraphs (F) and
15 (H)(i)) and (5)(A) of section 341(b), and of sub-
16 sections (v) (other than paragraph (3)) and (x) of
17 section 205 of the Social Security Act, shall apply to
18 the verification of eligibility of an eligible individual
19 by the Secretary (or by a State agency approved by
20 the Secretary) for benefits under this section in the
21 same manner as such provisions apply to the

1 verification of eligibility of an affordable credit eligi-
2 ble individual for affordability credits by the Com-
3 missioner under section 341(b). The agreement re-
4 ferred to in section 205(v)(2)(A) of the Social Secu-
5 rity Act (as applied under this paragraph) shall also
6 provide for funding, to be payable from the amount
7 made available under subsection (h)(1), to the Com-
8 missioner of Social Security in such amount as is
9 agreed to by such Commissioner and the Secretary.
10 (j) EMPLOYMENT-BASED RETIREE HEALTH COV-
11 ERAGE.—In this section, the term "employment-based re-
12 tiree health coverage" means health insurance or other
13 coverage of health care costs (whether provided by vol-
14 untary insurance coverage or pursuant to statutory or con-
15 tractual obligation) for individuals (or for such individuals
16 and their spouses and dependents) under a group health
17 plan based on their status as retired participants in such
18 plan.

Page 31, strike lines 17 through 24 and insert the following:

19 **SEC. 104. SUNSHINE ON PRICE GOUGING BY HEALTH IN-**
20 **SURANCE ISSUERS.**
21 (a) INITIAL PREMIUM REVIEW PROCESS.—
22 (1) IN GENERAL.—The Secretary of Health and
23 Human Services, in conjunction with States, shall

1 establish a process for the annual review, beginning
2 with 2010 and subject to subsection (c)(3)(A), of in-
3 creases in premiums for health insurance coverage.
4 (2) JUSTIFICATION AND DISCLOSURE.— Such
5 process shall require health insurance issuers to sub-
6 mit a justification for any premium increase prior to
7 implementation of the increase. Such issuers shall
8 prominently post such information on their websites.
9 The Secretary shall ensure the public disclosure of
10 information on such increases and justifications for
11 all health insurance issuers.
12 (b) CONTINUING PREMIUM REVIEW PROCESS.—
13 (1) INFORMING COMMISSIONER OF PREMIUM
14 INCREASE PATTERNS.—As a condition of receiving a
15 grant under subsection (c)(1), a State, through its
16 Commissioner of Insurance, shall—
17 (A) provide the Health Choices Commis-
18 sioner with information about trends in pre-
19 mium increases in health insurance coverage in
20 premium rating areas in the State; and
21 (B) make recommendations, as appro-
22 priate, to such Commissioner about whether
23 particular health insurance issuers should be
24 excluded from participation in the Health In-

1 surance Exchange based on a pattern of exces-
2 sive or unjustified premium increases.
3 (2) COMMISSIONER AUTHORITY REGARDING EX-
4 CHANGE PARTICIPATION.—In making determinations
5 concerning entering into contracts with QHBP offer-
6 ing entities for the offering of Exchange-partici-
7 pating health plans under section 304, the Commis-
8 sioner shall take into account the information and
9 recommendations provided under paragraph (1).
10 (3) MONITORING BY COMMISSIONER OF PRE-
11 MIUM INCREASES.—
12 (A) IN GENERAL.—Beginning in 2014, the
13 Commissioner, in conjunction with the States
14 and in place of the monitoring by the Secretary
15 under subsection (a)(1) and consistent with the
16 provisions of subsection (a)(2), shall monitor
17 premium increases of health insurance coverage
18 offered inside the Health Insurance Exchange
19 under section 304 and outside of the Exchange.
20 (B) CONSIDERATION IN OPENING EX-
21 CHANGE.—In determining under section
22 302(e)(4) whether to make additional larger
23 employers eligible to participate in the Health
24 Insurance Exchange, the Commissioner shall
25 take into account any excess of premium

1 growth outside the Exchange as compared to
2 the rate of such growth inside the Exchange,
3 including information reported by the States.
4 (c) GRANTS IN SUPPORT OF PROCESS.—
5 (1) PREMIUM REVIEW GRANTS DURING 2010
6 THROUGH 2014.—The Secretary shall carry out a
7 program of grants to States during the 5-year period
8 beginning with 2010 to assist them in carrying out
9 subsection (a), including—
10 (A) in reviewing and, if appropriate under
11 State law, approving premium increases for
12 health insurance coverage; and
13 (B) in providing information and rec-
14 ommendations to the Commissioner under sub-
15 section (b)(1).
16 (2) FUNDING.—
17 (A) IN GENERAL.—Out of any funds in the
18 Treasury not otherwise appropriated, there are
19 appropriated to the Secretary $1,000,000,000,
20 to be available for expenditure for grants under
21 paragraph (1) and subparagraph (B).
22 (B) FURTHER AVAILABILITY FOR INSUR-
23 ANCE REFORM AND CONSUMER PROTECTION
24 GRANTS.—If the amounts appropriated under
25 subparagraph (A) are not fully obligated under

1 grants under paragraph (1) by the end of 2014,
2 any remaining funds shall remain available to
3 the Secretary for grants to States for planning
4 and implementing the insurance reforms and
5 consumer protections under title II.
6 (C) ALLOCATION.—The Secretary shall es-
7 tablish a formula for determining the amount of
8 any grant to a State under this subsection.
9 Under such formula—
10 (i) the Secretary shall consider the
11 number of plans of health insurance cov-
12 erage offered in each State and the popu-
13 lation of the State; and
14 (ii) no State qualifying for a grant
15 under paragraph (1) shall receive less than
16 $1,000,000, or more than $5,000,000 for a
17 grant year.

Page 39, line 4, insert "Affordable Health Care for America Act" after "section 211 of the".

Page 52, line 20, strike "**ANNUAL OR**".

Page 74, line 3, strike "Business" and insert "Not-for-profit business".

Page 90, after line 22, insert the following:

1 (d) TREATMENT OF QUALIFIED DIRECT PRIMARY
2 CARE MEDICAL HOME PLANS.—The Commissioner may
3 permit a qualified health benefits plan to provide coverage
4 through a qualified direct primary care medical home plan
5 so long as the qualified health benefits plan meets all re-
6 quirements that are otherwise applicable and the services
7 covered by the medical home plan are coordinated with
8 the QHBP offering entity.

Page 97, line 19, strike "222(d)(4)(A)" and insert "222(e)(4)(A)".

Page 114, line 22 and page 118, line 21, strike "subsection (d)" and insert "subsection (e)".

Page 149, lines 8 and 12, strike "the business of" each place it appears.

Page 149, line 9, strike "such authority" and insert "the Commission's authority".

Page 149, beginning on line 12, strike "without regard to whether the entity or entities that is the subject of such studies, reports, or information is a for-profit or not-for-profit entity" and insert "without regard to whether the subject of such studies, reports, or information is for-profit or not-for-profit".

Page 150, after line 17, insert the following:

1 (c) SAVINGS CLAUSE FOR STATE MEDICAL MAL-
2 PRACTICE LAWS.—Nothing in this Act or the amendments
3 made by this Act shall be construed to modify or impair
4 State law governing legal standards or procedures used
5 in medical malpractice cases, including the authority of
6 a State to make or implement such law.

Page 150, strike line 20 and all that follows through page 152, line 13, and insert the following:

7 (a) AMENDMENT TO MCCARRAN-FERGUSON ACT.—
8 Section 3 of the Act of March 9, 1945 (15 U.S.C. 1013),
9 commonly known as the McCarran-Ferguson Act, is
10 amended by adding at the end the following:
11 "(c)(1) Except as provided in paragraph (2), nothing
12 contained in this Act shall modify, impair, or supersede
13 the operation of any of the antitrust laws with respect to
14 the business of health insurance or the business of medical
15 malpractice insurance.
16 "(2) Paragraph (1) shall not apply to—
17 "(A) collecting, compiling, classifying, or dis-
18 seminating historical loss data;
19 "(B) determining a loss development factor ap-
20 plicable to historical loss data; or
21 "(C) performing actuarial services if doing so
22 does not involve a restraint of trade.
23 "(3) For purposes of this subsection—

1 "(A) the term 'antitrust laws' has the meaning
2 given it in subsection (a) of the first section of the
3 Clayton Act, except that such term includes section
4 5 of the Federal Trade Commission Act to the ex-
5 tent that such section 5 applies to unfair methods of
6 competition;
7 "(B) the term 'historical loss data' means infor-
8 mation respecting claims paid, or reserves held for
9 claims reported, by any person engaged in the busi-
10 ness of insurance; and
11 "(C) the term 'loss development factor' means
12 an adjustment to be made to the aggregate of losses
13 incurred during a prior period of time that have
14 been paid, or for which claims have been received
15 and reserves are being held, in order to estimate the
16 aggregate of the losses incurred during such period
17 that will ultimately be paid.".

Page 154, after line 18, insert the following (and conform the table of contents of division A accordingly):

18 **SEC. 264. PERFORMANCE ASSESSMENT AND ACCOUNT-**
19 **ABILITY: APPLICATION OF GPRA.**
20 (a) APPLICATION OF GPRA.—Section 306 of title 5,
21 United States Code, and sections 1115, 1116, 1117, and
22 9703 of title 31 of such Code (originally enacted by the
23 Government Performance and Results Act of 1993, Public

1 Law 103–62) apply to the executive agencies established
2 by this Act, including the Health Choices Administration.
3 Under such section 306, each such executive agency is re-
4 quired to provide for a strategic plan every 3 years.
5 (b) IMPROVING CONSUMER SERVICE AND STREAM-
6 LINING PROCEDURES.—Every 3 years each such executive
7 agency shall—
8 (1)(A) assess the quality of customer service
9 provided, (B) develop a strategy for improving such
10 service, and (C) establish standards for high-quality
11 customer service; and
12 (2)(A) identify redundant rules, regulations,
13 and procedures, and(B) develop and implement a
14 plan for eliminating or streamlining such
15 redundancies.

Page 156, line 16, insert "certain" before "other".

Page 159, line 22, strike "or (aa)" and insert "(aa), or (hh)".

Page 171, line 10, strike "plan" and insert "plans".

Page 171, line 15, strike "222(d)(4)" and insert "222(e)(4)".

Page 171, lines 19 and 21, strike "222(d)(4)(A)" and "222(d)(4)(B)" and insert "222(e)(4)(A)" and "222(e)(4)(B)", respectively.

Page 171, line 24, strike "222(d)(4)(A)" and insert "222(e)(4)(A)".

Page 203, line 3, strike "request" and insert "consult with".

Page 203, line 5, insert "not later than January 1, 2014," after "to develop".

Page 203, line 6, strike "NAIC" and insert "Secretary".

Page 203, line 7, strike "the Secretary,".

Page 203, line 13, strike "health insurance issuer" and insert "compacting States".

Page 203, line 18, strike "address" and insert "enforce law relating to".

Page 203, line 24, strike "and".

Page 203, after line 25, insert the following:

1 (H) rate review; and

2 (I) fraud.

Page 204, strike lines 10 through 16 and redesignate succeeding subsections accordingly.

Page 217, after line 12, insert the following:

1 (4) TREATMENT OF CERTAIN STATE WAIV-
2 ERS.—In the case of any State operating a cost-con-
3 tainment waiver for health care providers in accord-
4 ance with section 1814(b)(3) of the Social Security
5 Act, the Secretary shall provide for payment to such
6 providers under the public health insurance option
7 consistent with the provisions and requirements of
8 that waiver.

Page 242, line 15, insert "PROGRAM" after "SAVE".

Page 243, line 3, strike "though" and insert "through".

Page 246, line 14, strike "222(d)(4)(A)" and insert "222(e)(4)(A)".

Page 258, line 13, strike "302(d)(2)" and insert "302(d)(4)".

Page 281, line 8; page 286, line 25; and page 294, lines 3 and 18, insert "Affordable Health Care for America Act" after "of the".

Page 301, line 16; page 303, lines 6 and 10; page 310, lines 10 and 16; page 328, lines 3 and 9; page 329, line 14; page 330, lines 18 and 23, insert "Affordable Health Care for America Act" after "of the" each place it appears.

Page 327, line 13, strike "December 31, 2010" and insert "December 31, 2012".

Page 343, line 4, insert "and" after "device,".

Page 345, strike line 20 and all that follows through page 346, line 2, and insert the following (and conform the table of contents of division A accordingly):

1 **SEC. 554. REPEAL OF WORLDWIDE ALLOCATION OF INTER-**
2 **EST.**

3 (a) IN GENERAL.—Section 864 of the Internal Rev-
4 enue Code of 1986 is amended by striking subsection (f)
5 and by redesignating subsection (g) as subsection (f).

6 (b) EFFECTIVE DATE.—The amendments made by
7 this section shall apply to taxable years beginning after
8 December 31, 2010.

Page 346, after line 2, add the following (and conform the table of contents of division A accordingly):

9 **SEC. 555. SECOND GENERATION BIOFUEL PRODUCER**
10 **CREDIT.**

11 (a) CREDIT AMOUNT DETERMINED BASED ON BTU
12 CONTENT OF FUEL.—Subparagraph (B) of section
13 40(b)(6) of the Internal Revenue Code of 1986 is amended
14 to read as follows:

15 "(B) APPLICABLE AMOUNT.—For purposes
16 of this paragraph—

1 "(i) IN GENERAL.—The term 'applica-
2 ble amount' means, with respect to any
3 type of second generation biofuel, the dol-
4 lar amount which bears the same ratio to
5 $1.01 as the BTU content of such type of
6 fuel bears to the BTU content of ethanol.
7 For purposes of the preceding sentence,
8 the types of second generation biofuel and
9 the BTU content of such types shall be de-
10 termined in accordance with the table pre-
11 scribed under clause (ii).
12 "(ii) BTU CONTENT DETERMINED BY
13 SECRETARY.—The Secretary, after con-
14 sultation with the Secretary of Energy,
15 shall prescribe a table which lists the types
16 of second generation biofuel and the BTU
17 content of each such type.
18 "(iii) COORDINATION WITH ALCOHOL
19 CREDITS.—In the case of second genera-
20 tion biofuel which is alcohol, the applicable
21 amount determined under clause (i) shall
22 be reduced by the sum of—
23 "(I) the amount of the credit in
24 effect for such alcohol under sub-
25 section (b)(1) (without regard to sub-

1 section (b)(3)) at the time of the
2 qualified second generation biofuel
3 production, plus
4 "(II) in the case of ethanol, the
5 amount of the credit in effect under
6 subsection (b)(4) at the time of such
7 production.".
8 (b) EXPANSION OF QUALIFIED FUELS.—
9 (1) IN GENERAL.—Subclause (I) of section
10 40(b)(6)(E)(i) of such Code is amended to read as
11 follows:
12 "(I) is derived solely from quali-
13 fied feedstocks, and".
14 (2) QUALIFIED FEEDSTOCK.—Paragraph (6) of
15 section 40(b) of such Code is amended by redesig-
16 nating subparagraphs (F), (G) and (H) as subpara-
17 graphs (G), (H), and (I), respectively, and by insert-
18 ing after subparagraph (E) the following new sub-
19 paragraph:
20 "(F) QUALIFIED FEEDSTOCK.—For pur-
21 poses of this paragraph, the term 'qualified
22 feedstock' means—
23 "(i) any lignocellulosic or
24 hemicellulosic matter that is available on a
25 renewable or recurring basis, and

1 "(ii) any cultivated algae,
2 cyanobacteria, or lemna.".
3 (3) CONFORMING AMENDMENTS.—
4 (A) Section 40 of such Code is amended—
5 (i) by striking "cellulosic biofuel" each
6 place it appears in the text thereof and in-
7 serting "second generation biofuel",
8 (ii) by striking "CELLULOSIC" in the
9 headings of subsections (b)(6), (b)(6)(E),
10 and (d)(3)(D) and inserting "SECOND
11 GENERATION", and
12 (iii) by striking "CELLULOSIC" in the
13 headings of subsections (b)(6)(C),
14 (b)(6)(D), (b)(6)(F), (d)(6), and (e)(3)
15 and inserting "SECOND GENERATION".
16 (B) Clause (iii) of section 40(b)(6)(E) of
17 such Code, as redesignated by paragraph (2), is
18 amended by striking "Such term shall not" and
19 inserting "The term 'second generation biofuel'
20 shall not".
21 (C) Paragraph (1) of section 4101(a) of
22 such Code is amended by striking "cellulosic
23 biofuel" and inserting "second generation
24 biofuel".

1 (c) EXCLUSION OF FUELS PRODUCED FROM CO-
2 PROCESSING WITH NONQUALIFIED FEEDSTOCKS.—Sub-
3 paragraph (E) of section 40(b)(6) of such Code is amend-
4 ed by adding at the end the following new clause:

5 "(iii) EXCLUSION OF FUELS PRO-
6 DUCED FROM COPROCESSING WITH NON-
7 QUALIFIED FEEDSTOCKS.—The term 'sec-
8 ond generation biofuel' shall not include
9 any fuel derived from coprocessing a quali-
10 fied feedstock with any feedstock which is
11 not a qualified feedstock.".

12 (d) EXCLUSION OF UNPROCESSED FUELS.—Sub-
13 paragraph (E) of section 40(b)(6) of such Code, as amend-
14 ed by subsection (c), is amended by adding at the end the
15 following new clause:

16 "(iv) EXCLUSION OF UNPROCESSED
17 FUELS.—The term 'second generation
18 biofuel' shall not include any fuel if—

19 "(I) more than 4 percent of such
20 fuel (determined by weight) is any
21 combination of water and sediment, or

22 "(II) the ash content of such fuel
23 is more than 1 percent (determined by
24 weight).".

25 (e) LIQUID FUEL DEFINED.—

1 (1) IN GENERAL.—Paragraph (6) of section
2 40(b) of such Code, as amended by subsection (b),
3 is amended by redesignating subparagraphs (G),
4 (H), and (I) as subparagraphs (H), (I), and (J), re-
5 spectively, and by inserting after subparagraph (F)
6 the following new subparagraph:
7 "(G) LIQUID FUEL.—The term 'liquid fuel'
8 shall not include any fuel unless such fuel
9 would be a liquid at room temperature after ex-
10 traction of all water from the fuel.".
11 (2) APPLICATION TO ALCOHOL MIXTURE CRED-
12 IT.—Paragraph (2) of section 40(d) of such Code is
13 amended by inserting ", within the meaning of sub-
14 section (b)(6)(G)," after "liquid fuel (other than
15 gasoline)".
16 (3) APPLICATION TO RENEWABLE DIESEL.—
17 Paragraph (3) of section 40A(f) of such Code is
18 amended by inserting "(within the meaning of sec-
19 tion 40(b)(6)(G))" after "liquid fuel".
20 (f) REGISTRATION OF FUELS.—Subparagraph (I) of
21 section 40(b)(6) of such Code, as redesignated by sub-
22 sections (b) and (e), is amended to read as follows:
23 "(I) REGISTRATION REQUIREMENTS.—No
24 credit shall be determined under this paragraph

1 with respect to any second generation biofuel
2 produced by the taxpayer unless—
3 "(i) such taxpayer is registered with
4 the Secretary as a producer of second gen-
5 eration biofuel under section 4101, and
6 "(ii) such taxpayer provides the Sec-
7 retary such information with respect to
8 such second generation biofuel as the Sec-
9 retary may (after consultation with the
10 Secretary of Energy and the Administrator
11 of the Environmental Protection Agency)
12 require, including—
13 "(I) the type of such second gen-
14 eration biofuel,
15 "(II) the feedstocks from which
16 such second generation biofuel is de-
17 rived, and
18 "(III) the BTU content of such
19 second generation biofuel.".
20 (g) APPLICATION OF BIOFUEL REFORMS TO BONUS
21 DEPRECIATION FOR BIOFUEL PLANT PROPERTY.—
22 (1) IN GENERAL.—Subparagraph (A) of section
23 168(l)(2) of such Code is amended by striking "sole-
24 ly to produce cellulosic biofuel" and inserting "solely

1 to produce second generation biofuel (as defined in
2 section 40(b)(6)(E)".
3 (2) CONFORMING AMENDMENTS.—Subsection
4 (l) of section 168 of such Code is amended—
5 (A) by striking "cellulosic biofuel" each
6 place it appears in the text thereof and insert-
7 ing "second generation biofuel",
8 (B) by striking paragraph (3) and redesig-
9 nating paragraphs (4) through (8) as para-
10 graphs (3) through (7), respectively,
11 (C) by striking "CELLULOSIC" in the
12 heading of such subsection and inserting "SEC-
13 OND GENERATION", and
14 (D) by striking "CELLULOSIC" in the head-
15 ing of paragraph (2) and inserting "SECOND
16 GENERATION".
17 (h) EFFECTIVE DATE.—
18 (1) IN GENERAL.—Except as provided in para-
19 graph (2), the amendments made by this section
20 shall apply to fuels sold or used after the date of the
21 enactment of this Act.
22 (2) APPLICATION TO BONUS DEPRECIATION.—
23 The amendments made by subsection (g) shall apply
24 to property placed in service after the date of the en-
25 actment of this Act.

1 (3) TEMPORARY RULE FOR DETERMINING
2 CREDIT AMOUNT BASED ON BTU CONTENT OF
3 FUEL.—With respect to any fuel sold or used after
4 the date of the enactment of this Act and before the
5 date on which the Secretary prescribes the table de-
6 scribed in clause (ii) of section 40(b)(6)(B) of the
7 Internal Revenue Code of 1986 (as amended by this
8 Act), clause (i) of such section shall be applied by
9 treating all second generation biofuel as though it
10 were ethanol.

Page 381, beginning on line 17, strike "proposed rule" and all that follows through "(74 Federal Register 22214 et seq.)" and insert "final rule for Medicare skilled nursing facilities issued by such Secretary on August 11, 2009 (74 Federal Register 40287 et seq.)".

Page 382, line 11, strike "January 1, 2010" and insert "April 1, 2010".

Page 493, line 1, insert "a hospital described in subparagraph (F) or" after "only to".

Page 494, after line 8, insert the following subparagraph (and redesignate subparagraphs (F) through (H) as subparagraphs (G) through (I), respectively):

1 "(F) SPECIAL RULE FOR A HIGH MED-
2 ICAID FACILITY.—A hospital described in this
3 subparagraph is a hospital that—
4 "(i) with respect to each of the 3 most
5 recent cost reporting periods for which
6 data are available, has an annual percent
7 of total inpatient admissions that represent
8 inpatient admissions under the program
9 under title XIX that is determined by the
10 Secretary to be greater than such percent
11 with respect to such admissions for any
12 other hospital located in the county in
13 which the hospital is located; and
14 "(ii) meets the conditions described in
15 clauses (iii) and (vi) of subparagraph (E).

Page 828, after and below line 3, insert the following: "Under such an agreement a State may agree to cover and reimburse each long-term care facility or provider for all costs attributable to conducting background checks and screening described in this subsection that were not otherwise required to be conducted by such long-term care facility or provider before the enactment of this subsection, except that Federal funding with respect to such reimbursement shall be limited to the

amount made available to the State from funds under subsection (b)(1).".

Page 828, after and below line 15, insert the following: "Under such an agreement a State may agree to cover and reimburse each long-term care facility or provider for all costs attributable to conducting background checks and screening described in this subsection that were not otherwise required to be conducted by such long-term care facility or provider before the enactment of this subsection, except that Federal funding with respect to such reimbursement shall be limited to the amount made available to the State from funds under subsection (b)(1).".

Page 888, line 14, insert a period after the closing quotation marks.

Page 888, after line 14, insert the following (and conform the table of contents of division B accordingly):

1 **SEC. 1446. QUALITY INDICATORS FOR CARE OF PEOPLE**
2 **WITH ALZHEIMER'S DISEASE.**

3 (a) QUALITY INDICATORS.—The Secretary of Health
4 and Human Services shall develop quality indicators for
5 the provision of medical services to people with Alz-
6 heimer's disease and other dementias and a plan for im-
7 plementing the indicators to measure the quality of care

1 provided for people with these conditions by physicians,
2 hospitals, and other appropriate providers of services and
3 suppliers.

4 (b) REPORT.—The Secretary shall submit a report to
5 the Committees on Energy and Commerce and Ways and
6 Means of the United States House of Representatives and
7 to the Committees on Finance and Health, Education,
8 Labor, and Pensions of the United States Senate not later
9 than 24 months after the date of the enactment of this
10 Act setting forth the status of their efforts to implement
11 the requirements of subsection (a).

Page 970, after line 6, insert the following paragraph (and redesignate paragraph (5) as paragraph (6)):

12 "(5) 90-DAY PERIOD OF ENHANCED OVERSIGHT
13 FOR INITIAL CLAIMS OF DME SUPPLIERS.—For peri-
14 ods beginning after January 1, 2011, if the Sec-
15 retary determines under paragraph (1) that there is
16 a significant risk of fraudulent activity among sup-
17 pliers of durable medical equipment, in the case of
18 a supplier of durable medical equipment who is with-
19 in a category or geographic area under title XVIII
20 identified pursuant to such determination and who is
21 initially enrolling under such title, the Secretary
22 shall, notwithstanding section 1842(c)(2), withhold
23 payment under such title with respect to durable

1 medical equipment furnished by such supplier during
2 the 90-day period beginning on the date of the first
3 submission of a claim under such title for durable
4 medical equipment furnished by such supplier.".

Page 1010, after line 14, add the following new section:

5 **SEC. 1654. DISCLOSURE OF MEDICARE FRAUD AND ABUSE**
6 **HOTLINE NUMBER ON EXPLANATION OF BEN-**
7 **EFITS.**

8 (a) IN GENERAL.—Section 1804 of the Social Secu-
9 rity Act (42 U.S.C. 1395b–2) is amended by adding at
10 the end the following new subsection:

11 "(d) Any statement or notice containing an expla-
12 nation of the benefits available under this title, including
13 the notice required by subsection (a), distributed for peri-
14 ods after July 1, 2011, shall prominently display in a man-
15 ner prescribed by the Secretary a separate toll-free tele-
16 phone number maintained by the Secretary for the receipt
17 of complaints and information about waste, fraud, and
18 abuse in the provision or billing of services under this
19 title.".

20 (b) CONFORMING AMENDMENTS.—Section 1804(c)
21 of the Social Security Act (42 U.S.C. 1395b–2(c)) is
22 amended—

1 (1) in paragraph (2), by adding "and" at the
2 end;
3 (2) in paragraph (3), by striking "; and" and
4 inserting a period; and
5 (3) by striking paragraph (4).

Page 1010, strike line 16 and all that follows through page 1012 before line 1 (and conform the table of contents of division B accordingly).

Page 1017, line 6, strike "subclause" and insert "subclauses".

Page 1017, line 24, strike "over 5, and".

Page 1018, line 2, insert ", (IV) (insofar as it relates to subsection (l)(1)(B)), (VI)," after "(I)".

Page 1048, line 14, strike "section" before "subsection".

Page 1082, line 25, insert after "Palau" the following: "and shall not apply, at the option of the Governor of Puerto Rico, the Virgin Islands, Guam, the Northern Mariana Islands, or American Samoa as communicated to the Secretary of Health and Human Services in writing, to any individual who lawfully resides in the respective territory in accordance with such Compacts".

Page 1092, after line 4, insert the following (and conform the table of contents of division B accordingly):

1 **SEC. 1739A. SENSE OF CONGRESS REGARDING COMMUNITY**
2 **FIRST CHOICE OPTION TO PROVIDE MED-**
3 **ICAID COVERAGE OF COMMUNITY-BASED AT-**
4 **TENDANT SERVICES AND SUPPORTS.**

5 It is the sense of Congress that States should be al-
6 lowed to elect under their Medicaid State plans under title
7 XIX of the Social Security Act to implement a Community
8 First Choice Option under which—

9 (1) coverage of community-based attendant
10 services and supports furnished in homes and com-
11 munities is available, at an individual's option, to in-
12 dividuals who would otherwise qualify for Medicaid
13 institutional coverage under the respective State
14 plan;

15 (2) such supports and services include assist-
16 ance to individuals with disabilities in accomplishing
17 activities of daily living, instrumental activities of
18 daily living, and health-related tasks;

19 (3) the Federal matching assistance percentage
20 (FMAP) under such title for medical assistance for
21 such supports and services is enhanced;

1 (4) States, consistent with minimum federal
2 standards, ensure quality of such supports and serv-
3 ices; and
4 (5) States collect and provide data to the Sec-
5 retary of Health and Human Services on the cost
6 and effectiveness and quality of supports and serv-
7 ices provided through such option.

Page 1107, line 12, strike "may payments" and insert "make payments".

Page 1215, line 18, through page 1216, line 18, amend subparagraph (A) to read as follows:

8 (A) IN GENERAL.—Amounts in the Fund
9 are authorized to be appropriated (as described
10 in paragraph (1)) for a fiscal year only if (ex-
11 cluding any amounts in or appropriated from
12 the Fund) the amounts specified in subpara-
13 graph (B) for the fiscal year involved are equal
14 to or greater than the amounts specified in sub-
15 paragraph (B) for fiscal year 2008.

Page 1216, line 21, strike "the amounts appropriated" and insert "the amounts appropriated (excluding any amounts in or appropriated from the Fund)".

Page 1218, lines 4 and 5, strike "appropriated" and insert "made available".

Page 1286, line 19, through page 1287, line 8, strike subsection (a) and insert the following:

1 "(a) DEPOSITS INTO TRUST.—There is established
2 a Prevention and Wellness Trust. There are authorized
3 to be appropriated to the Trust, out of any monies in the
4 Public Health Investment Fund—
5 "(1) for fiscal year 2011, $2,400,000,000;
6 "(2) for fiscal year 2012, $2,845,000,000;
7 "(3) for fiscal year 2013, $3,100,000,000;
8 "(4) for fiscal year 2014, $3,455,000,000; and
9 "(5) for fiscal year 2015, $3,600,000,000.

Page 1287, line 14, strike "subsection (a)(2)" and insert "subsection (a)".

Page 1432, after line 15, insert the following:

10 (5) NO LIMITATION ON OTHER STATE LAWS.—
11 Nothing in this section shall be construed to—
12 (A) preempt or modify the application of
13 any existing State law that limits attorneys'
14 fees or imposes caps on damages;
15 (B) impair the authority of a State to es-
16 tablish or implement a law limiting attorneys'
17 fees or imposing caps on damages; or
18 (C) restrict the eligibility of a State for an
19 incentive payment under this section on the

1 basis of a law described in subparagraph (A) or
2 (B) so long as any such law is not established
3 or implemented as part of the law described in
4 paragraph (4), as determined by the Secretary.

Page 1467, after line 6, insert the following (and conform the table of contents for division C accordingly):

5 **SEC. 2538. SCREENING, BRIEF INTERVENTION, REFERRAL,**
6 **AND TREATMENT FOR MENTAL HEALTH AND**
7 **SUBSTANCE ABUSE DISORDERS.**

8 Part D of title V (42 U.S.C. 290dd et seq.) is amend-
9 ed by adding at the end the following:

10 **"SEC. 544. SCREENING, BRIEF INTERVENTION, REFERRAL,**
11 **AND TREATMENT FOR MENTAL HEALTH AND**
12 **SUBSTANCE ABUSE DISORDERS.**

13 "(a) PROGRAM.—The Secretary, acting through the
14 Administrator, shall establish a program (consisting of
15 awarding grants, contracts, and cooperative agreements
16 under subsection (b)) on mental health and substance
17 abuse screening, brief intervention, referral, and recovery
18 services for individuals in primary health care settings.

19 "(b) USE OF FUNDS.—The Secretary may award
20 grants to, or enter into contracts or cooperative agree-
21 ments with, entities—

1 "(1) to provide mental health and substance
2 abuse screening, brief interventions, referral, and re-
3 covery services;
4 "(2) to coordinate these services with primary
5 health care services in the same program and set-
6 ting;
7 "(3) to develop a network of facilities to which
8 patients may be referred if needed;
9 "(4) to purchase needed screening and other
10 tools that are—
11 "(A) necessary for providing these services;
12 and
13 "(B) supported by evidence-based research;
14 and
15 "(5) to maintain communication with appro-
16 priate State mental health and substance abuse
17 agencies.
18 "(c) ELIGIBILITY.—To be eligible for a grant, con-
19 tract, or cooperative agreement under this section, an enti-
20 ty shall be a public or private nonprofit entity that—
21 "(1) provides primary health services;
22 "(2) seeks to integrate mental health and sub-
23 stance abuse services into its service system;

1 "(3) has developed a working relationship with
2 providers of mental health and substance abuse serv-
3 ices;
4 "(4) demonstrates a need for the inclusion of
5 mental health and substance abuse services in its
6 service system; and
7 "(5) agrees—
8 "(A) to prepare and submit to the Sec-
9 retary at the end of the grant, contract, or co-
10 operative agreement period an evaluation of all
11 activities funded through the grant, contract, or
12 cooperative agreement; and
13 "(B) to use such performance measures as
14 may be stipulated by the Secretary for purposes
15 of such evaluation.
16 "(d) PREFERENCE.—In awarding grants, contracts,
17 and cooperative agreements under this section, the Sec-
18 retary shall give preference to entities that—
19 "(1) provide services in rural or frontier areas
20 of the Nation;
21 "(2) provide services to special needs popu-
22 lations, including American Indian or Alaska Native
23 populations; or
24 "(3) provide services in school-based health
25 clinics or on university and college campuses.

1 "(e) DURATION.—The period of a grant, contract, or
2 cooperative agreement under this section may not exceed
3 5 years.
4 "(f) REPORT.—Not later than 4 years after the first
5 appropriation of funds to carry out this section, the Sec-
6 retary shall submit a report to the Congress on the pro-
7 gram under this section—
8 "(1) including an evaluation of the benefits of
9 integrating mental health and substance abuse care
10 within primary health care; and
11 "(2) focusing on the performance measures
12 stipulated by the Secretary under subsection (c)(5).
13 "(g) AUTHORIZATION OF APPROPRIATIONS.—
14 "(1) IN GENERAL.—To carry out this section,
15 there are authorized to be appropriated $30,000,000
16 for fiscal year 2011 and such sums as may be nec-
17 essary for each of fiscal years 2012 through 2015.
18 "(2) PROGRAM MANAGEMENT.—Of the funds
19 appropriated to carry out this section for a fiscal
20 year, the Secretary may use not more than 5 percent
21 to manage the program under this section.".

Page 1612, line 22, strike the close quotation marks and second period at the end of subsection (d) and insert the following:

1 "(e) REFERENCES.—Except as otherwise specified,
2 any reference in Federal law to an Office on Women's
3 Health (in the Department of Health and Human Serv-
4 ices) is deemed to be a reference to the Office on Women's
5 Health in the Office of the Secretary.".

Page 1623, after line 10, insert the following (and conform the table of contents for division C accordingly):

6 **SEC. 2588A. OFFICES OF MINORITY HEALTH.**

7 (a) EXISTING OFFICE.—Section 1707(a) (42 U.S.C.
8 300u–6(a)) is amended by striking "within the Office of
9 Public Health and Science" and inserting "within the Of-
10 fice of the Secretary".

11 (b) ADDITIONAL OFFICES.—Title XVII (42 U.S.C.
12 300u et seq.) is amended by inserting after section 1707
13 the following:

14 **"SEC. 1707A. ADDITIONAL OFFICES OF MINORITY HEALTH.**

15 "(a) ESTABLISHMENT.—In addition to the Office of
16 Minority Health established within the Office of the Sec-
17 retary under section 1707, the Secretary shall establish
18 an Office of Minority Health in each of the following agen-
19 cies:

20 "(1) The Centers for Disease Control and Pre-
21 vention.

22 "(2) The Substance Abuse and Mental Health
23 Services Administration.

1 "(3) The Agency for Healthcare Research and
2 Quality.
3 "(4) The Health Resources and Services Ad-
4 ministration.
5 "(5) The Food and Drug Administration.
6 "(b) DIRECTOR; APPOINTMENT.—Each Office of Mi-
7 nority Health established in an agency listed in subsection
8 (a) shall be headed by a director, who shall be appointed
9 by and report directly to the head of such agency.
10 "(c) REFERENCES.—Except as otherwise specified,
11 any reference in Federal law to an Office of Minority
12 Health (in the Department of Health and Human Serv-
13 ices) is deemed to be a reference to the Office of Minority
14 Health in the Office of the Secretary.".
15 (c) NO NEW REGULATORY AUTHORITY.—Nothing in
16 this section and the amendments made by this section may
17 be construed as establishing regulatory authority or modi-
18 fying any existing regulatory authority.
19 (d) LIMITATION ON TERMINATION.—Notwith-
20 standing any other provision of law, a Federal office of
21 minority health or Federal appointive position with pri-
22 mary responsibility over minority health issues that is in
23 existence in an office or agency of the Department of
24 Health and Human Services on the date of enactment of
25 this section shall not be terminated, reorganized, or have

1 any of its powers or duties transferred unless such termi-
2 nation, reorganization, or transfer is approved by an Act
3 of Congress.

Page 1635, after line 19, insert the following (and conform the table of contents for division C accordingly):

4 **SEC. 2593. DUPLICATIVE GRANT PROGRAMS.**

5 (a) STUDY.—The Secretary of Health and Human
6 Services (in this section referred to as the "Secretary")
7 shall conduct a study to determine if any new division C
8 grant program is duplicative of one or more other grant
9 programs of the Department of Health and Human Serv-
10 ices that—

11 (1) are specifically authorized in the Public
12 Health Service Act (42 U.S.C. 201 et seq.); or

13 (2) are receiving appropriations.

14 (b) DUPLICATIVE PROGRAMS.—If the Secretary de-
15 termines under subsection (a) that a new division C grant
16 program is duplicative of one or more other grant pro-
17 grams described in such subsection, the Secretary shall—

18 (1) attempt to integrate the new division C
19 grant program with the duplicative programs; and

20 (2) if the Secretary determines that such inte-
21 gration is not appropriate or has not been success-
22 ful, promulgate a rule eliminating the duplication,

1 including, if appropriate, by terminating one or more
2 programs.
3 (c) CONTINUED AVAILABILITY OF FUNDS.—Any
4 funds appropriated to carry out a program that is termi-
5 nated under subsection (b)(2) shall remain available for
6 obligation for the one or more programs that—
7 (1) were determined under subsection (a) to be
8 duplicative of such program; and
9 (2) remain in effect.
10 (d) REPORT.—Not later than 1 year after the date
11 of the enactment of this Act, the Secretary shall submit
12 to the Congress and make available to the public a report
13 that contains the results of the study required under sub-
14 section (a).
15 (e) CONGRESSIONAL REVIEW.—Any rule under sub-
16 section (b)(2) terminating a program is deemed to be a
17 major rule for purposes of chapter 8 of title 5, United
18 States Code.
19 (f) DEFINITION.—In this section, the term "new divi-
20 sion C grant program"—
21 (1) means a grant program first established by
22 this division; and
23 (2) excludes any program whose statutory au-
24 thorization was in existence before the enactment of
25 this division.

1 **SEC. 2594. DIABETES SCREENING COLLABORATION AND**
2 **OUTREACH PROGRAM.**

3 (a) ESTABLISHMENT.—With respect to diabetes
4 screening tests and for the purposes of reducing the num-
5 ber of undiagnosed seniors with diabetes or prediabetes,
6 the Secretary of Health and Human Services (referred to
7 in this section as the "Secretary"), in collaboration with
8 the Director of the Centers for Disease Control and Pre-
9 vention (referred to in this section as the "Director"),
10 shall—

11 (1) review uptake and utilization of diabetes
12 screening benefits, consistent with recommendations
13 of the Task Force on Clinical Preventive Services
14 (established under section 3131 of the Public Health
15 Service Act, as added by section 2301 of this Act),
16 to identify and address any existing problems with
17 regard to uptake and utilization and related data
18 collection mechanisms; and

19 (2) establish an outreach program to identify
20 existing efforts by agencies of the Department of
21 Health and Human Services and by the private and
22 nonprofit sectors to increase awareness among sen-
23 iors and providers of diabetes screening benefits.

24 (b) CONSULTATION.—The Secretary shall carry out
25 this section in consultation with—

1 (1) the heads of appropriate health agencies
2 and offices in the Department of Health and Human
3 Services, including the Office of Minority Health;
4 and
5 (2) entities with an interest in diabetes, includ-
6 ing industry, voluntary health organizations, trade
7 associations, and professional societies.
8 (c) REPORT.—The Secretary shall submit an annual
9 report to the Congress on the activities carried out under
10 this section.

11 **SEC. 2595. IMPROVEMENT OF VITAL STATISTICS COLLEC-**
12 **TION.**

13 (a) IN GENERAL.—The Secretary of Health and
14 Human Services (in this section referred to as the "Sec-
15 retary"), acting through the Director of the Centers for
16 Disease Control and Prevention and in collaboration with
17 appropriate agencies and States, shall—
18 (1) promote the education and training of phy-
19 sicians on the importance of birth and death certifi-
20 cate data and how to properly complete these docu-
21 ments in accordance with State law, including the
22 collection of such data for diabetes and other chronic
23 diseases as appropriate;

1 (2) encourage State adoption of the latest
2 standard revisions of birth and death certificates;
3 and
4 (3) work with States to re-engineer their vital
5 statistics systems in order to provide cost-effective,
6 timely, and accurate vital systems data.
7 (b) DEATH CERTIFICATE ADDITIONAL LANGUAGE.—
8 In carrying out this section, the Secretary may promote
9 improvements to the collection of diabetes mortality data,
10 including, as appropriate, the addition by States of a ques-
11 tion for the individual certifying the cause of death regard-
12 ing whether the deceased had diabetes.

Page 1636, strike the heading for division D following line 2.

Page 1636, line 5, insert "**ACT**" after "**IMPROVEMENT**" (and conform the table of contents of division D accordingly).

Page 1760, lines 14 through 16, strike "the California Rural Indian Health Board (hereafter in this section referred to as the 'CRIHB')" and insert "an intertribal consortium".

Page 1760, line 20 and 21, strike "the CRIHB" each place it appears and insert "the intertribal consortium".

Page 1761, lines 4, 6, 16, 18, and 21, strike "the CRIHB" each place it appears and insert "the intertribal consortium".

Page 1950, strike line 16 and all that follows though page 1951, line 3 (and redesignate succeeding sections, and any cross-references thereto, accordingly).

Page 1965, strike lines 16 through 24 (and conform the table of contents of division D accordingly).

Page 1966, line 1, strike "3103" and insert "3102" (and conform the table of contents of division D accordingly).

Page 1977, line 1, strike "3104" and insert "3103" (and conform the table of contents of division D accordingly).

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