

115TH CONGRESS 1ST SESSION

S. 2221

To repeal the multi-State plan program.

IN THE SENATE OF THE UNITED STATES

DECEMBER 12, 2017

Mr. Johnson introduced the following bill; which was read twice and referred to the Committee on Homeland Security and Governmental Affairs

A BILL

To repeal the multi-State plan program.

- 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 "Repeal Insurance
- 5 Plans of the Multi-State Program Act of 2017" or the
- 6 "RIP MSP Act".
- 7 SEC. 2. REPEAL OF MULTI-STATE PLAN PROGRAM.
- 8 (a) Definitions.—In this section, the terms "multi-
- 9 State plan issuer" and "MSP issuer" mean a health insur-
- 10 ance issuer or group of health insurance issuers that has
- 11 a contract with the Office of Personnel Management to
- 12 offer multi-State plan options pursuant to section 1334

- 1 of the Patient Protection and Affordable Care Act (Public
- 2 Law 111–148).
- 3 (b) Program Repeal.—Effective October 1, 2018,
- 4 section 1334 of the Patient Protection and Affordable
- 5 Care Act (Public Law 111–148) shall have no force or
- 6 effect.
- 7 (c) REQUIRED REPORTING.—Not later than 60 days
- 8 after the date of enactment of this Act, the Director of
- 9 the Office of Personnel Management shall provide the
- 10 Committee on Homeland Security and Governmental Af-
- 11 fairs of the Senate and the Committee on Oversight and
- 12 Government Reform of the House of Representatives a
- 13 briefing concerning the efforts of the Office of Personnel
- 14 Management (referred to in this section as "OPM") to
- 15 wind down the multi-State program under section 1334
- 16 of the Patient Protection and Affordable Care Act. Such
- 17 briefing shall contain such information as may be re-
- 18 quired, including information regarding—
- 19 (1) the methods of communication OPM and an
- MSP issuer will use to notify current enrollees that
- 21 the multi-State plan will not be offered during the
- 22 next open season, including a timeline of the planned
- 23 communications;
- 24 (2) a description of how the Director of OPM
- will work with the Secretary of Health and Human

| 1 | Services to ensure that no plans previously offered |
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| 2 | pursuant to such section 1334 are offered on State |
| 3 | or Federal Exchanges; and |
| 4 | (3) a timeline detailing how OPM will close |
| 5 | down the information technology portal that MSF |
| 6 | issuers utilize. |
| 7 | (d) RESCISSION OF UNUSED FUNDS.—Of the |
| 8 | amounts made available to OPM for the purposes of staff- |
| 9 | ing and administering the program under section 1334 of |
| 10 | the Patient Protection and Affordable Care Act, the unob- |
| 11 | ligated balance is rescinded, effective October 1, 2018. |
| 12 | (e) Sense of Congress.—It is the sense of Con- |
| 13 | gress that— |
| 14 | (1) the Director of the Office of Personne |
| 15 | Management should assign employees of the Office |
| 16 | whose duties on the date of enactment relate to car- |
| 17 | rying out section 1334 of the Patient Protection and |
| 18 | Affordable Care Act (Public Law 111–148) to duties |
| 19 | relating to processing appeals brought by individuals |
| 20 | or employers pursuant to such section 1334; and |
| 21 | (2) no additional amounts should be appro- |
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priated for salaries and expenses relating to proc-

essing such appeals.

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