

116TH CONGRESS
1ST SESSION

S. 1754

To provide Medicaid assistance to individuals and families affected by a disaster or emergency, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JUNE 10, 2019

Mr. CASEY (for himself, Mr. BROWN, Mr. BLUMENTHAL, Ms. HARRIS, and Mrs. GILLIBRAND) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To provide Medicaid assistance to individuals and families affected by a disaster or emergency, 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 “Disaster Relief Med-
5 icaid Act”.

6 **SEC. 2. MEDICAID RELIEF FOR DISASTER SURVIVORS.**

7 Title XIX of the Social Security Act (42 U.S.C. 1396
8 et seq.) is amended—

9 (1) in section 1902(a)—

1 (A) in paragraph (85), by striking “; and”
2 and inserting a semicolon;

3 (B) in paragraph (86), by striking the pe-
4 riod at the end and inserting “; and”; and

5 (C) by inserting after paragraph (86) the
6 following new paragraph:

7 “(87) beginning January 1, 2020, provide for
8 making medical assistance available to relief-eligible
9 survivors of disasters during relief coverage periods
10 in accordance with section 1947.”; and

11 (2) by adding at the end the following new sec-
12 tion:

13 **“SEC. 1947. DISASTER RELIEF MEDICAID FOR SURVIVORS**
14 **OF MAJOR DISASTERS.**

15 “(a) IN GENERAL.—Notwithstanding any other pro-
16 vision of this title, a State plan shall provide medical as-
17 sistance to a relief-eligible survivor of a disaster in accord-
18 ance with this section.

19 “(b) DEFINITIONS.—In this section:

20 “(1) DISASTER.—The term ‘disaster’ means a
21 major disaster—

22 “(A) that is declared on or after January
23 1, 2020, by the President in accordance with
24 section 401 of the Robert T. Stafford Disaster

1 Relief and Emergency Assistance Act (42
2 U.S.C. 5170); and

3 “(B) which the President has determined
4 warrants individual and public assistance from
5 the Federal Government under such Act.

6 “(2) DIRECT IMPACT AREA.—

7 “(A) IN GENERAL.—The term ‘direct im-
8 pact area’ means, with respect to a disaster, the
9 geographic area in which the disaster exists.

10 “(B) WEBSITE POSTING OF DIRECT IM-
11 PACT AREAS.—As soon as practicable after a
12 disaster is declared (as described in paragraph
13 (1)(A)), the Secretary shall post on the website
14 of the Centers for Medicare & Medicaid Serv-
15 ices a list of the areas identified as the direct
16 impact areas of the disaster.

17 “(3) HOME STATE.—The term ‘home State’
18 means, with respect to a survivor of a disaster, the
19 State in which the survivor was a resident during
20 the 7-day period preceding the date on which the
21 disaster is declared (as described in paragraph
22 (1)(A)).

23 “(4) RELIEF COVERAGE PERIOD.—The term
24 ‘relief coverage period’ means, with respect to a dis-
25 aster, the period that begins on the date the disaster

1 is declared (as described in paragraph (1)(A)) and
2 ends on the day that is 2 years after such date.

3 “(5) RELIEF-ELIGIBLE SURVIVOR.—

4 “(A) IN GENERAL.—The term ‘relief-eli-
5 ble survivor’ means an individual who is a sur-
6 vivor of a disaster whose family income does not
7 exceed the higher of—

8 “(i) 133 percent (or, in the case of a
9 survivor who is a pregnant woman, a child,
10 or a recipient of benefits under title II on
11 the basis of a disability, 200 percent) of
12 the poverty line; or

13 “(ii) the income eligibility standard
14 that would otherwise apply to the survivor
15 under the State plan or waiver of the sur-
16 vivor’s host State.

17 “(B) DISREGARD OF UNEMPLOYMENT IN-
18 COME.—For purposes of this section, and not-
19 withstanding section 1902(e)(14)(B), the in-
20 come of a survivor of a disaster shall not in-
21 clude any amount received during the relief cov-
22 erage period of the disaster under a law of the
23 United States or a State which is in the nature
24 of unemployment compensation.

25 “(6) SURVIVOR.—

1 “(A) IN GENERAL.—The term ‘survivor’
2 means, with respect to a disaster, an individual
3 who is described in subparagraph (B) or (C).

4 “(B) RESIDENTS AND EVACUEES OF DI-
5 RECT IMPACT AREAS.—An individual described
6 in this subparagraph is an individual who, on
7 any day during the 7-day period preceding the
8 date on which a disaster is declared (as de-
9 scribed in paragraph (1)(A)), has a primary
10 residence in the disaster’s direct impact area.

11 “(C) INDIVIDUALS WHO LOST EMPLOY-
12 MENT.—An individual described in this sub-
13 paragraph is an individual—

14 “(i) whose worksite, on any day dur-
15 ing the 7-day period preceding the date on
16 which a disaster is declared (as so de-
17 scribed), was located in the disaster’s di-
18 rect impact area;

19 “(ii) who was employed by an em-
20 ployer that—

21 “(I) conducted an active trade or
22 business in such area on any day dur-
23 ing such 7-day period; and

24 “(II) was unable to operate such
25 trade or business as a result of the

1 disaster on any day during the disas-
2 ter's relief coverage period; and

3 “(iii) whose employment with such
4 employer was terminated.

5 “(D) TREATMENT OF HOMELESS PER-
6 SONS.—For purposes of subparagraph (B), in
7 the case of an individual who was homeless on
8 any day during the 7-day period preceding the
9 date on which a disaster is declared (as so de-
10 scribed), the individual's ‘residence’ during such
11 period shall be determined as it would otherwise
12 be determined for purposes of this title.

13 “(E) EFFECT OF CONCURRENT ELIGI-
14 BILITY FOR MEDICAID.—An individual's eligi-
15 bility for medical assistance under a State plan
16 (or waiver of such plan) on a basis other than
17 under this section shall not prevent the indi-
18 vidual from being treated as a survivor under
19 this section, and the rights afforded to an indi-
20 vidual who is eligible for or enrolled under a
21 State plan (or waiver) shall not be affected by
22 the individual's receipt of medical assistance as
23 a relief-eligible survivor of a disaster in accord-
24 ance with this section.

25 “(c) ELIGIBILITY.—

1 “(1) SIMPLIFIED APPLICATION.—

2 “(A) IN GENERAL.—For purposes of deter-
3 mining eligibility for medical assistance under
4 this section, each State shall use a simplified,
5 1-page application form (as developed by the
6 Secretary in consultation with the National As-
7 sociation of State Medicaid Directors), which
8 shall—

9 “(i) require an applicant for medical
10 assistance in accordance with this section
11 as a survivor of a disaster to—

12 “(I) provide the applicant’s ex-
13 pected address for the duration of the
14 relief coverage period of the disaster;
15 and

16 “(II) agree to update the infor-
17 mation described in subclause (I) if it
18 changes during such period;

19 “(ii) provide notice of the penalties for
20 making a fraudulent application described
21 in subsection (h);

22 “(iii) require the applicant to assign
23 to the State any rights of the applicant (or
24 any other individual who is a relief-eligible
25 survivor and on whose behalf the applicant

1 has the legal authority to execute an as-
2 signment of such rights) in accordance
3 with the requirements of section 1912;

4 “(iv) require the applicant to list any
5 health insurance coverage in which the ap-
6 plicant was enrolled immediately prior to
7 submitting the application for medical as-
8 sistance under this section; and

9 “(v) require the applicant to self-at-
10 test that the applicant—

11 “(I) is a relief-eligible survivor of
12 the disaster; and

13 “(II) if applicable, requires home
14 and community-based services.

15 “(B) NO DOCUMENTATION REQUIRE-
16 MENT.—A State shall not require an applicant
17 for medical assistance as a survivor of a dis-
18 aster under this section to provide any docu-
19 mentation or other evidence—

20 “(i) of the applicant’s status as a re-
21 lief-eligible survivor; and

22 “(ii) if applicable, that the applicant
23 requires home and community-based serv-
24 ices.

1 “(C) PRESUMPTIVE ELIGIBILITY.—If an
2 applicant submits a completed application to a
3 provider or facility described in section
4 1902(a)(55) (or any other provider or facility
5 participating in the State plan or under a waiv-
6 er of such plan that is qualified to make pre-
7 sumptive eligibility determinations under such
8 plan or waiver) and it appears to the provider
9 or facility that the applicant is a relief-eligible
10 survivor of a disaster who is eligible for medical
11 assistance under the plan based on the informa-
12 tion in the application, the applicant will be
13 deemed to be a relief-eligible survivor for med-
14 ical assistance under such plan in accordance
15 with this section.

16 “(D) CONTINUOUS ELIGIBILITY.—An ap-
17 plicant who is determined to be a relief-eligible
18 survivor of a disaster shall be eligible for med-
19 ical assistance under this section, without the
20 need for any redetermination of eligibility, for
21 the duration of the relief coverage period of the
22 disaster.

23 “(E) TIMELY PROCESSING OF APPLICA-
24 TIONS.—Each State shall establish such proc-
25 esses as are necessary to ensure that applica-

1 tions for medical assistance under this section
2 are processed in a timely manner.

3 “(2) ISSUANCE OF DISASTER RELIEF MEDICAID
4 ELIGIBILITY CARD.—A State shall issue a disaster
5 relief Medicaid eligibility card to each applicant who
6 is determined to be a relief-eligible survivor of a dis-
7 aster and eligible for medical assistance under this
8 section, which shall be valid for the duration of the
9 relief coverage period of the disaster.

10 “(3) VERIFICATION OF STATUS AS A RELIEF-
11 ELIGIBLE SURVIVOR.—

12 “(A) IN GENERAL.—The State shall make
13 a good faith effort to verify the status of an in-
14 dividual who is enrolled in the State plan as a
15 relief-eligible survivor of a disaster in accord-
16 ance with this section. Such effort shall not
17 delay the determination of the eligibility of the
18 individual for medical assistance under this sec-
19 tion.

20 “(B) EVIDENCE OF VERIFICATION.—A
21 State may satisfy the verification requirement
22 under subparagraph (A) with respect to an in-
23 dividual by showing that the State obtained in-
24 formation from the Social Security Administra-
25 tion, the Internal Revenue Service, or, if appli-

1 cable, the State Medicaid agency of the home
2 State of the individual.

3 “(4) DETERMINATION BY EXPRESS LANE AGEN-
4 CY.—Any determination or redetermination of eligi-
5 bility or verification of status made under this sec-
6 tion shall be made by an Express Lane agency (as
7 defined in section 1902(e)(13)(F)).

8 “(d) TERMINATION OF ELIGIBILITY.—

9 “(1) IN GENERAL.—Except as provided in para-
10 graph (4), no medical assistance shall be provided
11 under this section to a relief-eligible survivor of a
12 disaster after the end of the relief coverage period
13 of the disaster.

14 “(2) NOTICE OF TERMINATION OF ELIGIBILITY;
15 ASSISTANCE IN APPLYING FOR REGULAR MED-
16 ICAID.—

17 “(A) IN GENERAL.—No later than 2
18 months before the end of a relief coverage pe-
19 riod of a disaster, a State shall provide each re-
20 lief-eligible survivor of the disaster who is re-
21 ceiving medical assistance under the State plan
22 in accordance with this section with written no-
23 tice that includes—

24 “(i) the date after which, subject to
25 the exception described in paragraph (4),

1 the survivor will no longer be eligible for
2 such assistance;

3 “(ii) information regarding eligibility
4 (other than under this section) for medical
5 assistance under the State plan (or waiver
6 of such plan); and

7 “(iii) an application for such assist-
8 ance and information regarding how to
9 submit a completed application and how to
10 obtain assistance with completing such ap-
11 plication.

12 “(B) ASSISTANCE IN APPLYING FOR MED-
13 ICAID.—Before the end of the relief coverage
14 period of a disaster, the State shall—

15 “(i) provide any relief-eligible survivor
16 of the disaster who is receiving medical as-
17 sistance under the State plan assistance
18 with applying for medical assistance under
19 the State plan (or waiver) for periods be-
20 ginning after the end of such relief cov-
21 erage period; and

22 “(ii) ensure that such assistance is
23 easily accessible to such survivors.

24 “(3) PRESUMPTIVE ELIGIBILITY PERIOD FOR
25 PENDING APPLICATIONS.—In the case of a relief-eli-

1 gible survivor of a disaster who, on the date that the
2 relief coverage period of the disaster ends, has an
3 application pending for medical assistance under the
4 State plan (or waiver of such plan) for periods be-
5 ginning after such relief coverage period, such sur-
6 vivor shall be deemed to be eligible for medical as-
7 sistance under such plan or waiver for 60 days after
8 such date. Medical assistance provided to such an
9 individual during such 60-day period shall not be
10 treated as medical assistance provided under this
11 section and the Federal medical assistance percent-
12 age described in subsection (f) shall not apply to
13 amounts expended on such assistance.

14 “(4) PREGNANT WOMEN.—In the case of a re-
15 lief-eligible survivor of a disaster who, while preg-
16 nant, receives medical assistance under the State
17 plan in accordance with this section, such survivor
18 shall continue to be eligible for such assistance
19 through the end of the month in which the 60-day
20 period (beginning on the last day of her pregnancy)
21 ends, without regard to whether the pregnancy ends
22 before or after the end of the relief coverage period
23 of the disaster and without requiring the survivor to
24 reapply for such assistance.

25 “(e) SCOPE OF COVERAGE.—

1 “(1) IN GENERAL.—A State providing medical
2 assistance to a relief-eligible survivor of a disaster in
3 accordance with this section shall provide medical
4 assistance that is equal in amount and scope to the
5 medical assistance that would otherwise be made
6 available to such survivor if the survivor were en-
7 rolled in the State plan (or waiver of such plan) as
8 an individual described in clause (i) of section
9 1902(a)(10)(A), except that, in the case of such a
10 survivor whose home State is not the State providing
11 medical assistance to the individual, the State shall
12 also provide medical assistance for any item or serv-
13 ice for which medical assistance is available to indi-
14 viduals described in clause (i) of section
15 1902(a)(10)(A) under the State plan (or waiver) of
16 the survivor’s home State.

17 “(2) PROVIDER PAYMENT RATES FOR HOME
18 STATE SERVICES.—In the case of medical assistance
19 provided by a State to a relief-eligible survivor of a
20 disaster in accordance with this section for an item
21 or service which is not available under the State
22 plan (or waiver of such plan) but which is available
23 under the State plan (or waiver) of the survivor’s
24 home State, the State shall pay the provider of such
25 item or service at the same rate that the home State

1 would pay for the item or service if it were provided
2 under the plan or waiver of the home State (or, if
3 no such payment rate applies under the plan or
4 waiver of the home State, the usual and customary
5 prevailing rate for the item or service for the com-
6 munity in which it is provided).

7 “(3) RETROACTIVE COVERAGE.—

8 “(A) IN GENERAL.—Notwithstanding sec-
9 tion 1905(a), a State shall provide medical as-
10 sistance for items and services furnished in the
11 State beginning with the first day of the relief
12 coverage period of a disaster to any relief-eli-
13 gible survivor of the disaster who submits an ap-
14 plication for such assistance before the deadline
15 described in subparagraph (B).

16 “(B) APPLICATION DEADLINE.—The dead-
17 line for a relief-eligible survivor of a disaster to
18 submit an application for medical assistance in
19 accordance with this section is the date that is
20 90 days after the end of the disaster’s relief
21 coverage period.

22 “(4) CHILDREN BORN TO PREGNANT WOMEN.—

23 In the case of a child born to a relief-eligible sur-
24 vivor of a disaster who is provided medical assist-
25 ance in accordance with this section during the relief

1 coverage period of the disaster, the child shall be
2 treated as having been born to a pregnant woman el-
3 igible for medical assistance under the State plan (or
4 waiver of such plan) and shall be eligible for medical
5 assistance under such plan (or waiver) in accordance
6 with section 1902(e)(4). Notwithstanding subsection
7 (g), the Federal medical assistance percentage deter-
8 mined for a State and fiscal year under section
9 1905(b) shall apply to medical assistance provided
10 during the year to a child under the State plan (or
11 waiver) in accordance with the preceding sentence.

12 “(5) OPTION TO PROVIDE EXTENDED MENTAL
13 HEALTH AND CARE COORDINATION BENEFITS.—A
14 State may provide, without regard to any restric-
15 tions on amount, duration, scope, or comparability,
16 or other restrictions under this title or the State
17 plan or waiver of such plan (other than restrictions
18 applicable to services provided in an institution for
19 mental diseases), medical assistance to relief-eligible
20 survivors of a disaster under this section for ex-
21 tended mental health and care coordination services,
22 which may include the following:

23 “(A) Screening, assessment, and diagnostic
24 services (including specialized assessments for
25 individuals with cognitive impairments).

1 “(B) Coverage for a full range of mental
2 health medications at the dosages and fre-
3 quencies prescribed by health professionals for
4 depression, post-traumatic stress disorder, and
5 other mental disorders.

6 “(C) Treatment of alcohol and substance
7 abuse determined to result from circumstances
8 related to the disaster.

9 “(D) Psychotherapy, rehabilitation and
10 other treatments administered by psychiatrists,
11 psychologists, or social workers for conditions
12 exacerbated by, or resulting from, the disaster.

13 “(E) Peer support services related to the
14 disaster.

15 “(F) Mobile crisis services to assist with
16 crises related to the disaster.

17 “(G) In-patient mental health care in a
18 general hospital.

19 “(H) Family counseling for families where
20 a member of the immediate family is a survivor
21 of the disaster or first responder to the disaster
22 or includes an individual who has died as a re-
23 sult of the disaster.

24 “(I) In connection with the provision of
25 health and long-term care services, arranging

1 for, (and when necessary, enrollment in waiver
2 programs or other specialized programs), and
3 coordination related to, primary and specialty
4 medical care, which may include personal care
5 services, durable medical equipment and sup-
6 plies, assistive technology, and transportation.

7 “(6) OPTION TO PROVIDE HOME AND COMMU-
8 NITY-BASED SERVICES.—

9 “(A) IN GENERAL.—A State may provide
10 medical assistance under this section for home
11 and community-based services to a relief-eligible
12 survivor of a disaster, including any survivor
13 who is an individual described in subparagraph
14 (B), who self-attests that the survivor imme-
15 diately requires such services, without regard to
16 whether the survivor would require the level of
17 care provided in a hospital, nursing facility, or
18 intermediate care facility for the develop-
19 mentally disabled.

20 “(B) INDIVIDUALS DESCRIBED.—Individ-
21 uals described in this subparagraph are relief-
22 eligible survivors of a disaster who—

23 “(i) on any day during the week pre-
24 ceding the date on which the disaster is de-

1 clared (as described in subsection
2 (b)(1)(A))—

3 “(I) had been receiving home and
4 community-based services in a direct
5 impact area under a waiver under sec-
6 tion 1115 or section 1915;

7 “(II) had been receiving support
8 services from a primary family care-
9 giver who, as a result of the disaster,
10 is no longer available to provide serv-
11 ices; or

12 “(III) had been receiving per-
13 sonal care, home health, or rehabilita-
14 tive services under a State plan under
15 this title or under a waiver granted
16 under sections 1115 or 1915; or

17 “(ii) are disabled (as determined
18 under the State plan).

19 “(C) WAIVER OF RESTRICTIONS.—With re-
20 spect to the provision of home and community-
21 based services under this paragraph, the Sec-
22 retary—

23 “(i) shall waive any limitations on—

24 “(I) the number of individuals
25 who may receive home or community-

1 based services under a waiver de-
2 scribed in subparagraph (B)(i)(I);

3 “(II) budget neutrality require-
4 ments applicable to such waiver; and

5 “(III) populations eligible for
6 services under such waiver; and

7 “(ii) may waive any other restriction
8 applicable under such a waiver that would
9 prevent a State from providing home and
10 community-based services in accordance
11 with this paragraph.

12 “(f) STATE REPORTS.—Each State shall submit to
13 the Secretary an annual report that includes—

14 “(1) information on how the State is satisfying
15 the requirements of subsection (d)(2) (relating to
16 providing notice of termination of medical assistance
17 under this section and assistance in applying for
18 medical assistance other than under this section);

19 “(2) the number of survivors of a disaster who
20 were determined by the State to be relief-eligible
21 survivors of a disaster in the preceding year; and

22 “(3) the number of relief-eligible survivors of a
23 disaster who were determined to be eligible for, and
24 enrolled in, the State plan (or waiver of such plan)

1 or the State child health plan under title XXI (or
2 waiver of such plan) other than under this section.

3 “(g) 100 PERCENT FEDERAL MATCHING PAY-
4 MENTS.—

5 “(1) IN GENERAL.—Notwithstanding section
6 1905(b), the Federal medical assistance percentage
7 shall be equal to 100 percent with respect to
8 amounts expended by a State—

9 “(A) for medical assistance provided in ac-
10 cordance with this section to relief-eligible sur-
11 vivors of a disaster during the relief coverage
12 period of the disaster;

13 “(B) that are directly attributable to ad-
14 ministrative activities related to the provision of
15 medical assistance under this section, including
16 costs attributable to obtaining recoveries under
17 subsection (h);

18 “(C) that are directly attributable to pro-
19 viding application assistance in accordance with
20 subsection (d)(2)(B); and

21 “(D) for medical assistance provided to re-
22 lief-eligible survivors of a disaster after the end
23 of the relief coverage period of the disaster in
24 accordance with subsection (d)(4).

1 “(2) DISREGARD OF LIMITS ON PAYMENTS TO
2 TERRITORIES.—The limitations on payment under
3 subsections (f) and (g) of section 1108 shall not
4 apply to Federal payments under this title that are
5 based on the Federal medical assistance percentage
6 described in paragraph (1), and such payments shall
7 be disregarded in applying such subsections.

8 “(h) PENALTY FOR FRAUDULENT APPLICATIONS.—

9 “(1) INDIVIDUAL LIABLE FOR COSTS.—If a
10 State, as the result of verification activities con-
11 ducted by the State or otherwise, determines after a
12 fair hearing that an individual has knowingly made
13 a false attestation in an application for medical as-
14 sistance as a relief-eligible survivor of a disaster
15 under this section, the State shall, subject to para-
16 graph (2), seek recovery from the individual for the
17 full amount of the cost of medical assistance pro-
18 vided to the individual under this section.

19 “(2) EXCEPTION.—The Secretary shall exempt
20 a State from the requirement to seek recovery from
21 an individual under paragraph (1) if the Secretary
22 determines that it would not be cost-effective for the
23 State to do so.

24 “(3) REIMBURSEMENT TO THE FEDERAL GOV-
25 ERNMENT.—Amounts expended by a State for med-

1 ical assistance provided to an individual under this
 2 section that are subsequently recovered by the State
 3 under this subsection shall be treated as an overpay-
 4 ment under this title to the extent that payments
 5 were made to the State for such amounts.

6 “(i) EXEMPTION FROM ERROR RATE PENALTIES.—
 7 All payments attributable to providing medical assistance
 8 to relief-eligible survivors of disasters in accordance with
 9 this section shall be disregarded for purposes of section
 10 1903(u).”

11 **SEC. 3. PROMOTING EFFECTIVE AND INNOVATIVE STATE**
 12 **RESPONSES TO INCREASED DEMAND FOR**
 13 **MEDICAL ASSISTANCE FOLLOWING A DIS-**
 14 **ASTER.**

15 (a) GUIDANCE ON INCREASING ACCESS TO PRO-
 16 VIDERS.—Not later than October 1, 2020, the Secretary
 17 of Health and Human Services (in this section referred
 18 to as the “Secretary”) shall issue (and update as the Sec-
 19 retary determines necessary) guidance to State Medicaid
 20 directors on best practices for—

21 (1) expediting the approval of providers under
 22 a State Medicaid plan under title XIX of the Social
 23 Security Act (42 U.S.C. 1396 et seq.), or waiver of
 24 such plan, after a disaster to meet increased demand
 25 for medical assistance under the plan or waiver from

1 relief-eligible survivors (as defined in section
2 1947(b)(5) of such Act) of disasters; and

3 (2) using out-of-State providers to provide care
4 to relief-eligible survivors of a disaster under the
5 plan or waiver.

6 (b) TECHNICAL ASSISTANCE AND SUPPORT FOR IN-
7 NOVATIVE STATE STRATEGIES TO RESPOND TO IN-
8 CREASED DEMAND FOR MEDICAL ASSISTANCE FOL-
9 LOWING A DISASTERS.—

10 (1) IN GENERAL.—The Secretary shall provide
11 technical assistance and support to States to develop
12 or expand infrastructure, strategies, or innovations
13 (including through State Medicaid demonstration
14 projects) to provide medical assistance under a State
15 Medicaid plan under title XIX of the Social Security
16 Act (42 U.S.C. 1396 et seq.), or a waiver of such
17 a plan, to relief-eligible survivors (as defined in sec-
18 tion 1947(b)(5) of such Act) of disasters.

19 (2) REPORT.—Not later than 180 days after
20 the date of enactment of this Act, the Secretary
21 shall issue a report to Congress detailing a plan of
22 action to carry out the requirements of paragraph
23 (1).

24 (c) HCBS EMERGENCY RESPONSE CORPS GRANT
25 PROGRAM.—

1 (1) IN GENERAL.—The Secretary shall award
2 grants under this subsection to States for the pur-
3 pose of establishing or operating HCBS emergency
4 response corps that meet the requirements of para-
5 graph (2) to provide medical assistance for home
6 and community-based services under a State Med-
7 icaid plan under title XIX of the Social Security Act
8 (42 U.S.C. 1396 et seq.) to relief-eligible survivors
9 (as defined in section 1947(b)(5) of such Act) of dis-
10 asters.

11 (2) HOME AND COMMUNITY-BASED SERVICES
12 EMERGENCY RESPONSE CORPS.—An HCBS emer-
13 gency response corps meets the requirements of this
14 paragraph if it satisfies the following requirements:

15 (A) The corps serves a State with a history
16 of hosting individuals who are forced to relocate
17 to the State from another State due to a dis-
18 aster (as determined by the Secretary).

19 (B) The corps is composed of representa-
20 tives from each of the following:

21 (i) Voluntary organizations delivering
22 assistance.

23 (ii) Area agencies on aging (as defined
24 in section 102 of the Older Americans Act
25 of 1965 (42 U.S.C. 3002)).

1 (iii) The Medicare program under title
2 XVIII of the Social Security Act (42
3 U.S.C. 1395 et seq.).

4 (iv) The State agency responsible for
5 administering the State Medicaid program
6 under title XIX of the Social Security Act
7 (42 U.S.C. 1396 et seq.).

8 (v) State agencies serving older adults
9 and people with disabilities.

10 (vi) Nonprofit service providers.

11 (vii) Other organizations that address
12 the needs of older adults and people with
13 disabilities.

14 (C) The corps is led by a representative of
15 a State or nonprofit agency serving older adults
16 or people with disabilities.

17 (D) The corps operates under a plan to
18 meet the acute and long-term services and sup-
19 port needs of relief-eligible survivors (as defined
20 in section 1947(b)(5) of the Social Security
21 Act) of disasters, and is provided with the re-
22 sources necessary to execute such plan.

23 (3) GRANTS.—

1 (A) LIMITATION.—The Secretary may
 2 award a grant under this subsection to up to 5
 3 States.

4 (B) TERM OF GRANTS.—Grants under this
 5 subsection shall be made for a term of 2 years.

6 (4) AUTHORIZATION.—There are authorized to
 7 be appropriated to carry out this subsection,
 8 \$10,000,000 for each of fiscal years 2020 through
 9 2025, to remain available until expended.

10 **SEC. 4. TARGETED MEDICAID RELIEF FOR DIRECT IMPACT**
 11 **AREAS.**

12 (a) 100 PERCENT FEDERAL MATCHING PAYMENTS
 13 FOR MEDICAL ASSISTANCE PROVIDED IN A DIRECT IM-
 14 PACT AREA.—

15 (1) IN GENERAL.—Section 1905 of the Social
 16 Security Act (42 U.S.C. 1396d) is amended—

17 (A) in subsection (b), by striking “and
 18 (aa)” and inserting “(aa), and (ff)”; and

19 (B) by adding at the end the following new
 20 subsection:

21 “(ff) 100 PERCENT FMAP FOR ALL MEDICAL AS-
 22 SISTANCE PROVIDED IN DISASTER DIRECT IMPACT
 23 AREAS.—Notwithstanding subsection (b), the Federal
 24 medical assistance percentage for a State and fiscal year
 25 shall be equal to 100 percent with respect to amounts ex-

1 pended by the State during the year for medical assistance
2 for an individual who, at the time the assistance is pro-
3 vided to the individual, is a resident of a direct impact
4 area of a disaster during the disaster’s relief coverage pe-
5 riod (as such terms are defined in section 1947).”.

6 (2) APPLICATION TO CHIP.—Section 2105(a) of
7 the Social Security Act (42 U.S.C. 1397ee(a)) is
8 amended by adding at the end the following new
9 paragraph:

10 “(5) 100 PERCENT MATCH FOR ALL CHILD
11 HEALTH ASSISTANCE PROVIDED IN DISASTER DI-
12 RECT IMPACT AREAS.—Notwithstanding paragraph
13 (1), the Secretary shall pay to each State with a
14 plan approved under this title, from its allotment
15 under section 2104, an amount for each quarter
16 equal to 100 percent of expenditures in the quarter
17 for child health assistance under the plan for tar-
18 geted low-income children or pregnancy-related as-
19 sistance for targeted low-income women that is pro-
20 vided to such a child or woman who, at the time the
21 assistance is provided, is a resident of a direct im-
22 pact area of a disaster during the disaster’s relief
23 coverage period (as such terms are defined in section
24 1947).”.

1 (b) MORATORIUM ON REDETERMINATIONS.—During
 2 the relief coverage period (as defined in paragraph (4) of
 3 section 1947(b) of the Social Security Act, as added by
 4 section 2)) of a disaster, a State that contains a direct
 5 impact area (as defined in paragraph (2) of such section)
 6 of the disaster shall not be required to conduct eligibility
 7 redeterminations under the State’s plans or waivers of
 8 such plans under title XIX or XXI of such Act (42 U.S.C.
 9 1396 et seq., 1397aa) with respect to individuals who re-
 10 side in such area.

11 **SEC. 5. AUTHORITY TO WAIVE REQUIREMENTS DURING NA-**
 12 **TIONAL EMERGENCIES WITH RESPECT TO**
 13 **EVACUEES FROM AN EMERGENCY AREA.**

14 Section 1135(g)(1) of the Social Security Act (42
 15 U.S.C. 1320b–5(g)(1)) is amended—

16 (1) by redesignating subparagraphs (A) and
 17 (B) as clauses (i) and (ii), respectively;

18 (2) by striking “An ‘emergency area’” and in-
 19 serting the following:

20 “(A) IN GENERAL.—An emergency area”;

21 and

22 (3) by adding at the end the following new sub-
 23 paragraph:

24 “(B) ADDITIONAL AREAS.—Any geographical
 25 area in which the Secretary determines there are a

1 significant number of evacuees from an area de-
 2 scribed in subparagraph (A) shall also be considered
 3 to be an ‘emergency area’ for purposes of this sec-
 4 tion.”.

5 **SEC. 6. EXCLUSION OF DISASTER RELIEF COVERAGE PE-**
 6 **RIOD IN COMPUTING MEDICARE PART B**
 7 **LATE ENROLLMENT PERIOD.**

8 Section 1839(b) of such Act (42 U.S.C. 1395r(b)) is
 9 amended, in the second sentence, by inserting before the
 10 period at the end the following: “or, in the case of an indi-
 11 vidual who is a survivor of a disaster (as defined in para-
 12 graph (6) of section 1947(b)), any month any part of
 13 which is within the relief coverage period (as defined in
 14 paragraph (4) of such section) of such disaster”.

15 **SEC. 7. EFFECTIVE DATE.**

16 (a) IN GENERAL.—Subject to subsection (b), this Act
 17 and the amendments made by this Act shall take effect
 18 on the date of enactment of this Act.

19 (b) DELAY PERMITTED IF STATE LEGISLATION RE-
 20 QUIRED.—In the case of a State plan approved under title
 21 XIX of the Social Security Act which the Secretary of
 22 Health and Human Services determines requires State
 23 legislation (other than legislation appropriating funds) in
 24 order for the plan to meet the additional requirement im-
 25 posed by this section, the State plan shall not be regarded

1 as failing to comply with the requirements of such title
2 solely on the basis of the failure of the plan to meet such
3 additional requirement before the 1st day of the 1st cal-
4 endar quarter beginning after the close of the 1st regular
5 session of the State legislature that ends after the 1-year
6 period beginning with the date of the enactment of this
7 section. For purposes of the preceding sentence, in the
8 case of a State that has a 2-year legislative session, each
9 year of the session is deemed to be a separate regular ses-
10 sion of the State legislature.

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