

PROVIDING FOR CONSIDERATION OF THE BILL (H.R. 1213) TO REPEAL MANDATORY FUNDING PROVIDED TO STATES IN THE PATIENT PROTECTION AND AFFORDABLE CARE ACT TO ESTABLISH AMERICAN HEALTH BENEFIT EXCHANGES, AND PROVIDING FOR CONSIDERATION OF THE BILL (H.R. 1214) TO REPEAL MANDATORY FUNDING FOR SCHOOL-BASED HEALTH CENTER CONSTRUCTION

MAY 2, 2011.—Referred to the House Calendar and ordered to be printed

Mr. REED, from the Committee on Rules,
submitted the following

R E P O R T

[To accompany H. Res. 236]

The Committee on Rules, having had under consideration House Resolution 236, by a nonrecord vote, report the same to the House with the recommendation that the resolution be adopted.

SUMMARY OF PROVISIONS OF THE RESOLUTION

The resolution provides for consideration of H.R. 1213, to repeal mandatory funding provided to States in the Patient Protection and Affordable Care Act to establish American Health Benefit Exchanges, under a structured rule. The resolution provides one hour of general debate equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce. The resolution waives all points of order against consideration of the bill. The resolution provides that the bill shall be considered as read. The resolution waives all points of order against provisions in the bill. The resolution makes in order only those amendments printed in this report. Each such amendment may be offered only in the order printed in this report, may be offered only by a Member designated in this report, shall be considered as read, shall be debatable for the time specified in this report equally divided and controlled by the proponent and an opponent, shall not be subject to amendment, and shall not be subject to a demand for division of the question in the House or in the Committee of the Whole. All points of order against the amendments are waived. The resolution provides one motion to recommit with or without instructions.

The resolution also provides for consideration of H.R. 1214, to repeal mandatory funding for school-based health center construc-

tion, under a modified open rule. The resolution provides for one hour of general debate equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce. The resolution waives all points of order against consideration of the bill. The resolution provides that the bill shall be considered as read. The resolution waives all points of order against provisions in the bill. The resolution makes in order only those amendments that are received for printing in the portion of the Congressional Record designated for that purpose in clause 8 of rule XVIII in a daily issue dated May 2, 2011, and pro forma amendments for the purpose of debate. Each amendment received for printing in the Congressional Record may be offered only by the Member who caused it to be printed or a designee, and each such amendment shall be considered as read if printed. The resolution provides one motion to recommit with or without instructions.

EXPLANATION OF WAIVERS

Although the resolution waives all points of order against consideration of H.R. 1213, the Committee is not aware of any points of order against its consideration. The waiver of all points of order is prophylactic.

Although the resolution waives all points of order against provisions in H.R. 1213, the Committee is not aware of any points of order against provisions in the bill. The waiver against provisions in the bill is prophylactic in nature.

Although the resolution waives all points of order against amendments printed in this report, the Committee is not aware of any points of order against the amendments and therefore the waiver is prophylactic in nature.

Although the resolution waives all points of order against consideration of the H.R. 1214, the Committee is not aware of any points of order against its consideration. The waiver of all points of order is prophylactic.

Although the resolution waives all points of order against provisions in H.R. 1214, the Committee is not aware of any points of order against provisions in the bill. The waiver against provisions in the bill is prophylactic in nature.

COMMITTEE VOTES

The results of each record vote on an amendment or motion to report, together with the names of those voting for and against, are printed below:

Rules Committee record vote No. 86

Motion by Mr. Hastings of Florida to make in order separately and provide the appropriate waivers for each of the following amendments to H.R. 1213: Rep. Woolsey (CA), #2, would preserve the competitive health insurance exchanges while also enacting a public health insurance option, which would compete with private plans within the exchanges; Rep. Ellison (MN), #3, would require the Secretary of Health and Human Services to submit to Congress a report of the impact of H.R. 1213 on the uninsured rate in the United States; Rep. Waters (CA), #5, would prevent the bill from taking effect if the Secretary of Health and Human Services certifies that a significant number of uninsured Americans would have

difficulty obtaining affordable health insurance coverage without being able to access a Health Benefit Exchange; Rep. Waters (CA), #6, would prevent the bill from taking effect until legislation is enacted that repeals the requirement for states to establish Health Benefit Exchanges; Rep. Waters (CA), #7, would prevent the bill from taking effect if the Governors of five or more states each certify that their states may be unable to afford to establish a Health Benefit Exchange without any federal assistance; Rep. Waters (CA), #9, would require, within 6 months after enactment, the Secretary of Health and Human Services to submit to Congress a report on the extent to which uninsured Americans will have difficulty obtaining affordable health insurance coverage without being able to access such coverage through Health Benefit Exchanges; Rep. Welch (VT), #10, would direct the Government Accountability Office to conduct a study to determine the extent to which the repeal of funding to states for Health Benefit Exchanges will result in a decrease of the number of individuals who have access to health insurance. Defeated: 3–9

| Majority Members | Vote | Minority Members | Vote |
|-----------------------------------|------|-------------------------------|------|
| Mr. Sessions | Nay | Mr. McGovern | Yea |
| Ms. Foxx | Nay | Mr. Hastings of Florida | Yea |
| Mr. Bishop of Utah | Nay | Mr. Polis | Yea |
| Mr. Woodall | Nay | | |
| Mr. Nugent | Nay | | |
| Mr. Scott of South Carolina | Nay | | |
| Mr. Webster | Nay | | |
| Mr. Reed | Nay | | |
| Mr. Dreier, Chairman | Nay | | |

Rules Committee record vote No. 87

Motion by Mr. Hastings of Florida to report an open rule for H.R. 1213. Defeated: 3–9

| Majority Members | Vote | Minority Members | Vote |
|-----------------------------------|------|-------------------------------|------|
| Mr. Sessions | Nay | Mr. McGovern | Yea |
| Ms. Foxx | Nay | Mr. Hastings of Florida | Yea |
| Mr. Bishop of Utah | Nay | Mr. Polis | Yea |
| Mr. Woodall | Nay | | |
| Mr. Nugent | Nay | | |
| Mr. Scott of South Carolina | Nay | | |
| Mr. Webster | Nay | | |
| Mr. Reed | Nay | | |
| Mr. Dreier, Chairman | Nay | | |

SUMMARY OF AMENDMENTS MADE IN ORDER

1. Jackson Lee (TX): Would require the Secretary of Health and Human Services to post notice of rescission of funds and the amount rescinded on the public website of the Department of Health and Human Services. (10 minutes)

2. Waters (CA): Would require, within 6 months after enactment, the Secretary of Health and Human Services to submit to Congress a report on the extent to which states are expected to have difficulties establishing Health Benefit Exchanges without the federal assistance repealed and rescinded under this bill. (10 minutes)

3. Ellison (MN): Would require the Secretary of Health and Human Services to submit to Congress a report on the impact of

H.R. 1213 on the possible delays and potential enrollment reductions to Health Benefit Exchanges. (10 minutes)

4. Pallone (NJ): Would require GAO to report on benefits of funding in setting up state run exchanges that reflect that state's marketplace, as opposed to state exchanges established and operated by the federal government. (10 minutes)

5. Welch (VT) AMENDMENT IN THE NATURE OF A SUBSTITUTE: Would preserve funding for establishment of Health Benefit Exchanges for states that apply for early innovator grants before 2012. The funds used shall be subject to availability of appropriations up to \$1.9 billion. (10 minutes)

TEXT OF AMENDMENTS MADE IN ORDER

1. AN AMENDMENT TO BE OFFERED BY REPRESENTATIVE JACKSON LEE OF TEXAS OR HER DESIGNEE, DEBATABLE FOR 10 MINUTES

In section 1, add at the end the following:

(c) NOTICE OF RESCISSION OF UNOBLIGATED FUNDS.—Not later than 10 days after the date of the enactment of this Act, the Secretary of Health and Human Services shall post on the public website of the Department of Health and Human Services a notice of—

(1) the rescission, pursuant to subsection (b), of the unobligated balance of funds made available by section 1311(a) of the Patient Protection and Affordable Care Act (42 U.S.C. 18031(a)); and

(2) the amount of such funds so rescinded.

2. AN AMENDMENT TO BE OFFERED BY REPRESENTATIVE WATERS OF CALIFORNIA OR HER DESIGNEE, DEBATABLE FOR 10 MINUTES

At the end of section 1, add the following new subsection:

(c) REPORT.—Not later than 6 months after the date of the enactment of this Act, the Secretary of Health and Human Services shall submit to Congress a report on the extent to which States are expected to have difficulties establishing Health Benefit Exchanges without Federal assistance repealed and rescinded under subsections (a) and (b).

3. AN AMENDMENT TO BE OFFERED BY REPRESENTATIVE ELLISON OF MINNESOTA OR HIS DESIGNEE, DEBATABLE FOR 10 MINUTES

Add at the end of section 1 the following new subsection:

(c) REPORT.—Not later than 6 months after the date of the enactment of this Act, the Secretary of Health and Human Services shall submit to Congress a report that contains the results of a study on the possible delays and potential enrollment reductions into Health Benefit Exchanges as a result of the repeal and rescission of funds under subsections (a) and (b).

4. AN AMENDMENT TO BE OFFERED BY REPRESENTATIVE PALLONE OF NEW JERSEY OR HIS DESIGNEE, DEBATABLE FOR 10 MINUTES

In section 1, add at the end the following:

(c) GAO REPORT ON IMPACTS THAT FUNDING WOULD HAVE ON STATES ESTABLISHING EXCHANGES, IF NOT REPEALED AND RESCINDED.—

(1) STUDY.—The Comptroller General of the United States shall conduct a study to determine the impacts that expenditures by States, using the funding made available under subsection (a) of section 1311 of the Patient Protection and Affordable Care Act (42 U.S.C. 18031), would have in establishing State-run American Health Benefit Exchanges (as described in subsection (b) of such section) that reflect the marketplace of the specific State (as opposed to State exchanges established and operated by the Federal Government), if such funding were not repealed and rescinded under subsections (a) and (b) of this section. In determining such impacts, the Comptroller General shall at a minimum address—

(A) whether employers with over 50 employees are permitted in such Exchanges to purchase insurance over time;

(B) what type financing mechanisms will be used to operate such Exchanges;

(C) whether such Exchanges will be active negotiators in selecting health plans to obtain the best price and quality for citizens;

(D) whether States will operate such Exchanges together with one or more other States; and

(E) whether there will be more than one such Exchange (subsidiary exchanges), each serving a geographically distinct area, in some States.

(2) REPORT.—Not later than 1 year after the date of the enactment of this Act, the Comptroller General shall submit to the Congress a report setting forth the results and conclusions of the study under paragraph (1).

5. AN AMENDMENT IN THE NATURE OF A SUBSTITUTE TO BE OFFERED BY REPRESENTATIVE WELCH OF VERMONT OR HIS DESIGNEE, DEBATABLE FOR 10 MINUTES

Strike all after the enacting clause and insert the following:

SECTION 1. PRESERVING EXCHANGE GRANTS FOR STATES THAT APPLY FOR EARLY INNOVATOR GRANTS BEFORE 2012, SUBJECT TO AVAILABILITY OF APPROPRIATIONS.

(a) IN GENERAL.—Section 1311(a) of the Patient Protection and Affordable Care Act (42 U.S.C. 18031(a)) is amended—

(1) in paragraph (1)—

(A) by striking “shall be appropriated to the Secretary, out of any moneys in the Treasury not otherwise appropriated” and inserting “is authorized to be appropriated”;

(B) by inserting “(not to exceed \$1,900,000,000)” after “an amount”; and

(C) by inserting “that apply for an early innovator grant (as described in the January 20, 2011, Department of Health and Human Services funding opportunity announcement) before December 31, 2011,” after “States”;

(2) in paragraph (2), by striking “available to each State” inserting “available, subject to the amounts made available by an

appropriations Act pursuant to paragraph (1), to each State described in paragraph (1)”;

(3) in paragraph (4)(A), by inserting “, subject to the amounts made available by an appropriations Act pursuant to such paragraph,” after “under paragraph (1)”; and

(4) in paragraph (5), by striking “provide technical assistance to States” and inserting “, subject to the amounts made available by an appropriations Act pursuant to paragraph (1), provide technical assistance to States described in paragraph (1)”.

(b) RESCISSION OF UNOBLIGATED FUNDS.—Of the funds appropriated under such section 1311(a) before the date of the enactment of this Act, the unobligated balance is rescinded.

