

113TH CONGRESS
2D SESSION

H. R. 4158

To establish the Office of the Special Inspector General for Monitoring the Affordable Care Act, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 6, 2014

Mr. ROSKAM (for himself, Mr. JORDAN, Mr. HENSARLING, Mr. MULVANEY, Mr. MEADOWS, Mr. RICE of South Carolina, Mr. STUTZMAN, Mr. YOHO, Mrs. BACHMANN, Mr. FLEMING, Mr. GRAVES of Georgia, Mr. GOWDY, Mrs. LUMMIS, Mrs. BLACK, Mrs. BLACKBURN, Mr. CHAFFETZ, Mr. KELLY of Pennsylvania, Mr. LAMBORN, Mr. LANCE, Mr. MURPHY of Pennsylvania, Mr. MCHENRY, Mrs. NOEM, Mr. RIBBLE, Mr. ROE of Tennessee, Mr. ROONEY, Mr. TIBERI, Mr. WALBERG, Mr. WEBSTER of Florida, Mr. SOUTHERLAND, Ms. ROS-LEHTINEN, Mr. HARRIS, Ms. HERRERA BEUTLER, Mr. MESSER, Mr. DUNCAN of South Carolina, Mr. RODNEY DAVIS of Illinois, Mr. BYRNE, and Ms. JENKINS) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Natural Resources, Education and the Workforce, Ways and Means, Oversight and Government Reform, House Administration, the Judiciary, Rules, and Appropriations, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To establish the Office of the Special Inspector General for Monitoring the Affordable Care Act, 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,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Special Inspector Gen-
3 eral for Monitoring the ACA Act of 2014” or the “SIGMA
4 Act of 2014”.

5 **SEC. 2. SPECIAL INSPECTOR GENERAL FOR MONITORING**
6 **THE AFFORDABLE CARE ACT.**

7 (a) OFFICE OF SPECIAL INSPECTOR GENERAL.—

8 There is hereby established the Office of the Special In-
9 spector General for Monitoring the Affordable Care Act
10 (in this section, referred to as the “Office”) to carry out
11 the duties described under subsection (e).

12 (b) APPOINTMENT OF INSPECTOR GENERAL; RE-
13 MOVAL.—

14 (1) APPOINTMENT.—The head of the Office is
15 the Special Inspector General for Monitoring the Af-
16 fordable Care Act (in this section referred to as the
17 “Special Inspector General”), who shall be appointed
18 by the President, by and with the advice and consent
19 of the Senate.

20 (2) QUALIFICATIONS.—The appointment of the
21 Special Inspector General shall be made solely on
22 the basis of integrity and demonstrated ability in ac-
23 counting, auditing, financial analysis, law, manage-
24 ment analysis, healthcare expertise and financing,
25 public administration, or investigations.

1 (3) DEADLINE FOR APPOINTMENT.—The ap-
2 pointment of an individual as the Special Inspector
3 General shall be made not later than 30 days after
4 the date of the enactment of this Act.

5 (4) COMPENSATION.—The annual rate of basic
6 pay of the Special Inspector General shall be the an-
7 nual rate of basic pay provided for positions at level
8 IV of the Executive Schedule under section 5315 of
9 title 5, United States Code.

10 (5) PROHIBITION ON POLITICAL ACTIVITIES.—
11 For purposes of section 7324 of title 5, United
12 States Code, the Special Inspector General shall not
13 be considered an employee who determines policies
14 to be pursued by the United States in the nation-
15 wide administration of Federal law.

16 (6) REMOVAL.—The Special Inspector General
17 shall be removable from office in accordance with
18 the provisions of section 3(b) of the Inspector Gen-
19 eral Act of 1978 (5 U.S.C. App.).

20 (c) ASSISTANT INSPECTORS GENERAL.—The Special
21 Inspector General shall, in accordance with applicable laws
22 and regulations governing the civil service—

23 (1) appoint an Assistant Inspector General for
24 Auditing who shall have the responsibility for super-

1 vising the performance of auditing activities relating
2 to the duties described under subsection (e); and

3 (2) appoint an Assistant Inspector General for
4 Investigations who shall have the responsibility for
5 supervising the performance of investigative activi-
6 ties relating to such duties.

7 (d) SUPERVISION.—

8 (1) IN GENERAL.—Except as provided under
9 paragraph (2), the Special Inspector General shall
10 report directly to, and be under the general super-
11 vision of, the Secretary of Health and Human Serv-
12 ices.

13 (2) INDEPENDENCE TO CONDUCT INVESTIGA-
14 TIONS AND AUDITS.—No employee or officer of any
15 of the following entities shall prevent or prohibit the
16 Special Inspector General from initiating, carrying
17 out, or completing any audit or investigation related
18 to the duties described under subsection (e) or from
19 issuing any subpoena during the course of any such
20 audit or investigation:

21 (A) The Executive Office of the President
22 and the Office of Personnel Management.

23 (B) The Department of Health and
24 Human Services.

25 (C) The Department of the Treasury.

1 (D) The Social Security Administration,
2 the Department of Homeland Security, the De-
3 partment of Veterans Affairs, the Department
4 of Defense, the Department of Labor, and the
5 Peace Corps.

6 (E) Any other Federal agency involved in
7 implementing or administering the Affordable
8 Care Act.

9 (e) DUTIES.—

10 (1) OVERSIGHT OF THE IMPLEMENTATION AND
11 ADMINISTRATION OF THE AFFORDABLE CARE ACT.—

12 It shall be the duty of the Special Inspector General
13 to conduct, supervise, and coordinate audits and in-
14 vestigations of the implementation and administra-
15 tion of programs and activities established under,
16 and payment system changes made by, the Afford-
17 able Care Act, including by collecting and summa-
18 rizing the following:

19 (A) A description of the individual man-
20 date requirement for applicable individuals to
21 maintain minimum essential coverage or pay a
22 penalty under section 5000A of the Internal
23 Revenue Code of 1986, including a description
24 of the number of individuals maintaining such

1 coverage and the number of individuals paying
2 such penalties.

3 (B) A description of any increases or de-
4 creases in—

5 (i) premiums for qualified health
6 plans (as defined in section 1301 of the
7 Patient Protection and Affordable Care
8 Act (42 U.S.C. 18021));

9 (ii) deductibles under qualified health
10 plans; and

11 (iii) cost-sharing under qualified
12 health plans, including by co-payments and
13 co-insurance,

14 affecting individuals enrolling in coverage under
15 such plans through an Exchange established
16 under title I of the Patient Protection and Af-
17 fordable Care Act (including a State-run Ex-
18 change, a federally administered Exchange, and
19 a Small Business Health Options Program).

20 (C) A description of any increases or de-
21 creases in the maximum out-of-pocket costs af-
22 fecting individuals enrolling in qualified health
23 plans through such a State-run Exchange, a
24 federally administered Exchange, and a Small
25 Business Health Options Program.

1 (D) A description of any increases or de-
2 creases in the size of physician and other health
3 care provider networks affecting individuals en-
4 rolling in qualified health plans through such a
5 State-run Exchange, a federally administered
6 Exchange, and a Small Business Health Op-
7 tions Program.

8 (E) A description of any type of health in-
9 surance coverage lost because of the treatment
10 under title I of the Patient Protection and Af-
11 fordable Care Act of grandfathered health plans
12 (as defined in section 1251(e) of such Act (42
13 U.S.C. 18011(e))).

14 (F) A description of any credits under sec-
15 tion 36B of the Internal Revenue Code of 1986
16 (and the amount (if any) of the advance pay-
17 ment of the credit under section 1412 of the
18 Patient Protection and Affordable Care Act (42
19 U.S.C. 18082)) and any cost-sharing reduction
20 under section 1402 of the Patient Protection
21 and Affordable Care Act (42 U.S.C. 18071)
22 (and the amount (if any) of the advance pay-
23 ment of the reduction under section 1412 of
24 such Act (42 U.S.C. 18082)) provided to indi-
25 viduals enrolling under qualified health plans

1 through an Exchange established under title I
2 of the Patient Protection and Affordable Care
3 Act.

4 (G) A description of any projections, esti-
5 mates, analysis, goals, or targets made by any
6 employee of the Federal Government or any
7 contractor of the Federal Government in car-
8 rying out duties associated with the Patient
9 Protection and Affordable Care Act with re-
10 spect to the enrollment of individuals in a quali-
11 fied health plan through an Exchange estab-
12 lished under title I of the Patient Protection
13 and Affordable Care Act.

14 (H) A description of the employer mandate
15 requirement that applicable large employers
16 provide eligible employees with minimum essen-
17 tial coverage or pay a fine under section 4980H
18 of the Internal Revenue Code of 1986, includ-
19 ing a description of the type and number of em-
20 ployers providing such coverage and the type
21 and number of employers paying such fines.

22 (I) A description of any projections, esti-
23 mates, analysis, goals, or targets made by any
24 employee of the Federal Government or any
25 contractor of the Federal Government in car-

1 rying out duties associated with the Patient
2 Protection and Affordable Care Act with re-
3 spect to employers providing minimum essential
4 coverage to applicable employees.

5 (J) A description of any reports, meetings,
6 discussions, or materials of any employee of the
7 Federal Government or any contractor of the
8 Federal Government in carrying out duties as-
9 sociated with the Patient Protection and Af-
10 fordable Care Act relating to any employers
11 converting full-time employees to part-time em-
12 ployees or hiring new part-time employees in-
13 stead of full-time employees for the purposes of
14 avoiding the fines provided for under the em-
15 ployer mandate requirement described in sub-
16 paragraph (H).

17 (K) A description of any reports, meetings,
18 discussions, or materials of any employee of the
19 Federal Government or any contractor of the
20 Federal Government in carrying out duties as-
21 sociated with the Patient Protection and Af-
22 fordable Care Act relating to any employers hir-
23 ing no more than 50 employees for the purposes
24 of avoiding the requirement to provide min-
25 imum essential coverage or pay a fine under the

1 employer mandate requirement described in
2 subparagraph (H).

3 (L) A description of any reports, meetings,
4 discussions, or materials of any employee of the
5 Federal Government or any contractor of the
6 Federal Government in carrying out duties as-
7 sociated with the Patient Protection and Af-
8 fordable Care Act relating to any employers
9 dropping the health insurance coverage offered
10 to their employees, or employees' spouses or de-
11 pendents, for the purposes of avoiding the re-
12 quirement to provide minimum essential cov-
13 erage or pay a fine under the employer mandate
14 requirement described in subparagraph (H).

15 (M) A description of the transitional rein-
16 surance program established under section
17 1341 of the Patient Protection and Affordable
18 Care Act (42 U.S.C. 18061), including a de-
19 scription of reinsurance contributions collected
20 or required to be collected under such program,
21 a description of any reinsurance payments
22 made or required to be made to health insur-
23 ance issuers under such program, a description
24 of the health insurance coverage and related
25 costs for high-cost individuals for plans related

1 to such program, an explanation of the impact
2 of such reinsurance program on adverse selec-
3 tion in the marketplace, and an explanation of
4 any premium-stabilizing effects of such pro-
5 gram.

6 (N) A description of the temporary risk
7 corridors for qualified health plans established
8 under section 1342 of the Patient Protection
9 and Affordable Care Act (42 U.S.C. 18062), in-
10 cluding a description of participating plans and
11 the allowable costs and target amounts of such
12 plans, a description of risk corridor ratios of
13 such plans, and a description of payment ad-
14 justments made under such program.

15 (O) A description of the permanent risk
16 adjustment program established under section
17 1343 of the Patient Protection and Affordable
18 Care Act (42 U.S.C. 18063), including a de-
19 scription of any plans participating in such pro-
20 gram, a description of any risk adjustment pay-
21 ments made or required to be made under such
22 program, a description of the health insurance
23 coverage and related costs for high-cost individ-
24 uals for plans related to such program, an ex-
25 planation of the impact of such program on ad-

1 verse selection in the marketplace, and an ex-
2 planation of any premium-stabilizing effects of
3 such program.

4 (P) A list of all contracts awarded under
5 the Affordable Care Act and an analysis of
6 whether Federal contracting procedures were
7 followed when awarding any contract associated
8 with such Act.

9 (Q) A description of the development of
10 the health insurance marketplace for the Inter-
11 net portal established under section 1103 of the
12 Patient Protection and Affordable Care Act (42
13 U.S.C. 18003), including a description of the
14 design, features, and security systems of such
15 web portal and a description of all costs associ-
16 ated with such development.

17 (R) A description of any threats, risks,
18 problems, or functionality issues identified by
19 any employee of the Federal Government or any
20 contractor of the Federal Government in car-
21 rying out duties associated with the Patient
22 Protection and Affordable Care Act prior to the
23 launch of such web portal on October 1, 2013.

24 (S) A description of any decisionmaking or
25 activities by any employee of the Federal Gov-

1 ernment or any contractor of the Federal Gov-
2 ernment in carrying out duties associated with
3 the Patient Protection and Affordable Care Act
4 in response to such threats, risks, problems, or
5 functionality issues.

6 (T) A description of the systems (on the
7 Federal and State levels) in place or in develop-
8 ment to allow health insurance issuers and
9 plans and government entities to verify infor-
10 mation is accurate for purposes of enrollments
11 in qualified health plans through Exchanges es-
12 tablished under title I of the Patient Protection
13 and Affordable Care Act, including that data
14 verification and validation can occur with re-
15 spect to information provided or stored by indi-
16 viduals, the Department of Health and Human
17 Services, the qualified health plans, States, and
18 other applicable Federal agencies, including for
19 purposes of credits under section 36B of the In-
20 ternal Revenue Code of 1986 (and the amount
21 (if any) of the advance payment of the credit
22 under section 1412 of the Patient Protection
23 and Affordable Care Act (42 U.S.C. 18082))
24 and any cost-sharing reduction under section
25 1402 of the Patient Protection and Affordable

1 Care Act (42 U.S.C. 18071) (and the amount
2 (if any) of the advance payment of the reduc-
3 tion under section 1412 of such Act (42 U.S.C.
4 18082)).

5 (U) A description of the development of
6 the Federal Data Services Hub, including its
7 design, features, and security systems, and a
8 description of the type of data accessed through
9 such data hub, and a description of the actual
10 storage location of such data accessed through
11 such data hub.

12 (V) A list of the duties and responsibilities
13 assigned to the Internal Revenue Service as a
14 result of the enactment of the Affordable Care
15 Act, a description of any plans of the Internal
16 Revenue Service for how to carry out such du-
17 ties, and an explanation of the resources and
18 personnel required to carry out such duties, in-
19 cluding a description of any new resources or
20 personnel required to carry out such duties not
21 already available to the Internal Revenue Serv-
22 ice.

23 (W) A description of any plans of the In-
24 ternal Revenue Service to verify the eligibility of
25 individuals enrolling in qualified health plans

1 for any credits under section 36B of the Inter-
2 nal Revenue Code of 1986 (and the amount (if
3 any) of the advance payment of the credit
4 under section 1412 of the Patient Protection
5 and Affordable Care Act (42 U.S.C. 18082))
6 and any cost-sharing reduction under section
7 1402 of the Patient Protection and Affordable
8 Care Act (42 U.S.C. 18071) (and the amount
9 (if any) of the advance payment of the reduc-
10 tion under section 1412 of such Act (42 U.S.C.
11 18082)), including a description of any such
12 verification completed and a description of any
13 such individuals determined to be ineligible.

14 (X) A description of any plans by the In-
15 ternal Revenue Service to calculate the amount
16 of overpayment of any such credit or reduction
17 for which an individual enrolled in a qualified
18 health plan was determined to be ineligible, in-
19 cluding a description of any such calculations
20 completed.

21 (Y) A description of any plans by the In-
22 ternal Revenue Service to notify individuals de-
23 termined to be ineligible for such credits or re-
24 ductions, including a description of such notifi-
25 cations completed.

1 (Z) A description of any plans by the In-
2 ternal Revenue Service to recapture such over-
3 payments of such credits and reductions for in-
4 dividuals determined to be ineligible, including
5 a description of such recapturing completed.

6 (AA) A description of the impact of the Af-
7 fordable Care Act on the right of conscience, in-
8 cluding on—

9 (i) religious employers and institutions
10 that were not exempted from the mandate
11 issued by the Department of Health and
12 Human Services requiring individual and
13 group health plans to cover sterilization
14 and Food and Drug Administration ap-
15 proved contraceptives;

16 (ii) individuals; and

17 (iii) medical professionals.

18 (BB) A description of abortion coverage
19 offered under qualified health plans purchased
20 through State-run Exchanges, federally admin-
21 istered Exchanges, and Small Business Health
22 Options Programs, including costs associated
23 with such coverage.

24 (CC) A description of any actions by de-
25 partments or agencies of the Federal Govern-

1 ment to delay the programs or activities author-
2 ized by the Affordable Care Act, including an
3 explanation from the head of such department
4 or agency of the specific authority used to im-
5 plement such a delay.

6 (DD) A description of the Independent
7 Payment Advisory Board under section 1899A
8 of the Social Security Act (42 U.S.C. 1395kkk)
9 and any actions taken to alter or reduce the use
10 of medical products, treatments or procedures,
11 including an explanation from the Independent
12 Payment Advisory Board of the reasons for tak-
13 ing such actions, whether such actions could be
14 expected to result in worsened medical out-
15 comes for individuals effected by such alter-
16 ations or reductions, and an explanation of the
17 medical information used to determine whether
18 such alterations or reductions could be expected
19 to result in such worsened outcomes.

20 (EE) A description of individuals enrolled
21 in the Medicaid program under title XIX of the
22 Social Security Act through an Exchange estab-
23 lished under title I of the Patient Protection
24 and Affordable Care Act, including a descrip-
25 tion of the cost of health care services utilized

1 by such individuals and a description of the cost
2 to States and the cost to the Federal Govern-
3 ment to provide health care services to such in-
4 dividuals.

5 (FF) Any additional topic related to the
6 implementation and administration of the Af-
7 fordable Care Act, the inclusion of which helps
8 to provide the public a full and objective ac-
9 counting of such law.

10 (2) DATA TO BE INCLUDED.—In carrying out
11 the duties described under paragraph (1), the Spe-
12 cial Inspector General shall collect and summarize
13 data described under such paragraph according to
14 each type of insurance marketplace and according to
15 the age and gender of individuals enrolling in cov-
16 erage under qualified health plans through an Ex-
17 change established under title I of the Patient Pro-
18 tection and Affordable Care Act.

19 (3) OTHER DUTIES RELATED TO OVERSIGHT.—
20 The Special Inspector General shall establish, main-
21 tain, and oversee such systems, procedures, and con-
22 trols as the Special Inspector General considers ap-
23 propriate to discharge the duties described under
24 paragraph (1).

1 (4) DUTIES AND RESPONSIBILITIES UNDER
2 THE INSPECTOR GENERAL ACT OF 1978.—In addition
3 to the duties described under paragraphs (1) and
4 (2), the Special Inspector General shall also have the
5 duties and responsibilities of inspectors general
6 under the Inspector General Act of 1978 (5 U.S.C.
7 App.).

8 (f) COORDINATION OF EFFORTS.—In carrying out
9 the duties, responsibilities, and authorities of the Special
10 Inspector General under this section, the Special Inspector
11 General shall coordinate with, and receive the cooperation
12 of each of the following:

13 (1) The Inspector General of the Department of
14 Health and Human Services.

15 (2) The Inspector General of the Department of
16 the Treasury.

17 (3) The Inspectors General of the Social Secu-
18 rity Administration, the Department of Homeland
19 Security, the Department of Veterans Affairs, the
20 Department of Defense, the Department of Labor,
21 and the Peace Corps.

22 (4) The inspector general of any other Federal
23 entity, as determined by the Special Inspector Gen-
24 eral.

25 (g) POWERS AND AUTHORITIES.—

1 (1) AUTHORITY TO ACCESS MATERIALS, RE-
2 QUEST INFORMATION, COMPEL RESPONSE, AND
3 OTHER AUTHORITIES UNDER THE INSPECTOR GEN-
4 ERAL ACT OF 1978.—In carrying out the duties de-
5 scribed under subsection (e), the Special Inspector
6 General shall have all of the authorities provided
7 under section 6 of the Inspector General Act of
8 1978 (5 U.S.C. App.).

9 (2) EXEMPTION FROM REQUIREMENT FOR INI-
10 TIAL DETERMINATION BY ATTORNEY GENERAL.—
11 For purposes of section 6(e) of the Inspector Gen-
12 eral Act of 1978 (5 U.S.C. App.), the Special In-
13 spector General shall be considered exempt from the
14 requirement of an initial determination of eligibility
15 by the Attorney General under paragraph (2) of
16 such section.

17 (3) AUDIT STANDARDS.—The Special Inspector
18 General shall carry out the duties specified under
19 subsection (e)(1) in accordance with section 4(b)(1)
20 of the Inspector General Act of 1978 (5 U.S.C.
21 App.).

22 (h) PERSONNEL, FACILITIES, AND OTHER RE-
23 SOURCES.—

24 (1) PERSONNEL.—The Special Inspector Gen-
25 eral may select, appoint, and employ such officers

1 and employees as may be necessary for carrying out
2 the duties of the Special Inspector General, subject
3 to the provisions of title 5, United States Code, gov-
4 erning appointments in the competitive service, and
5 the provisions of chapter 51 and subchapter III of
6 chapter 53 of such title, relating to classification and
7 General Schedule pay rates.

8 (2) EMPLOYMENT OF EXPERTS AND CONSULT-
9 ANTS.—The Special Inspector General may obtain
10 services as authorized by section 3109 of title 5,
11 United States Code, at daily rates not to exceed the
12 equivalent rate prescribed for grade GS–15 of the
13 General Schedule by section 5332 of such title.

14 (3) CONTRACTING AUTHORITY.—To the extent
15 and in such amounts as may be provided in advance
16 by appropriations Acts, the Special Inspector Gen-
17 eral may enter into contracts and other arrange-
18 ments for audits, studies, analyses, and other serv-
19 ices with public agencies and with private persons,
20 and make such payments as may be necessary to
21 carry out the duties of the Special Inspector Gen-
22 eral.

23 (4) RESOURCES.—The Secretary of Health and
24 Human Services shall provide the Special Inspector
25 General with appropriate and adequate office space

1 at appropriate locations of the Department of
2 Health and Human Services together with such
3 equipment, office supplies, and communications fa-
4 cilities and services as may be necessary for the op-
5 eration of such offices, and shall provide necessary
6 maintenance services for such offices and the equip-
7 ment and facilities located therein.

8 (5) ASSISTANCE FROM FEDERAL AGENCIES.—

9 (A) IN GENERAL.—Upon request of the
10 Special Inspector General for information or as-
11 sistance from any department, agency, or other
12 entity of the Federal Government (including
13 any entity listed under subsection (d)(2)), the
14 head of such entity shall, insofar as is prac-
15 ticable and not in contravention of any existing
16 law, furnish such information or assistance to
17 the Special Inspector General, or an authorized
18 designee.

19 (B) REPORTING OF REFUSED ASSIST-
20 ANCE.—

21 (i) REPORTING TO HEALTH AND
22 HUMAN SERVICES AND CONGRESS.—In ac-
23 cordance with clause (ii), as the case may
24 be, whenever information or assistance re-
25 quested by the Special Inspector General

1 is, in the judgment of the Special Inspector
2 General, unreasonably refused or not pro-
3 vided, the Special Inspector General shall
4 report the circumstances to the Secretary
5 of Health and Human Services and to the
6 appropriate congressional committees with-
7 out delay.

8 (ii) REPORTING TO THE PUBLIC ON
9 REFUSAL OR NONCOOPERATION IN TRANS-
10 PARENCY.—Whenever any information de-
11 scribed in clause (i) is requested by the
12 Special Inspector General and unreason-
13 ably refused or not provided, the report to
14 the Secretary of Health and Human Serv-
15 ices and the appropriate congressional
16 committees shall be titled “Notice of Re-
17 fusals or Noncooperation in Transparency”
18 and shall be published on a publicly avail-
19 able website in an accessible format with-
20 out delay.

21 (6) USE OF PERSONNEL, FACILITIES, AND
22 OTHER RESOURCES OF THE OFFICE.—Upon the re-
23 quest of the Special Inspector General, an Inspector
24 General—

1 (A) may detail, on a reimbursable basis,
2 any of the personnel of the Office for the pur-
3 pose of carrying out this section; and

4 (B) may provide, on a reimbursable basis,
5 any of the facilities or other resources of the
6 Office for the purpose of carrying out this sec-
7 tion.

8 (i) REPORTS.—

9 (1) INITIAL REPORT.—Not later than 120 days
10 after the date of the enactment of this Act, the Spe-
11 cial Inspector General shall submit to the appro-
12 priate congressional committees and the Secretary of
13 Health and Human Services a report summarizing,
14 for the period beginning on the date of the enact-
15 ment of the Health Care and Education Reconcili-
16 ation Act of 2010 and ending on the completion of
17 a fiscal year quarter after the date of enactment of
18 this Act, the activities during such period of the
19 Special Inspector General required under subsection
20 (e).

21 (2) QUARTERLY REPORTS.—Beginning with the
22 first full fiscal year quarter after the date of the en-
23 actment of this Act, not later than 30 days after the
24 end of each fiscal year quarter, during which the Af-
25 fordable Care Act is in effect, the Special Inspector

1 General shall submit to the appropriate congress-
2 sional committees and the Secretary of Health and
3 Human Services a report summarizing, for the pe-
4 riod of that quarter and, to the extent possible, the
5 period from the end of such quarter to the time of
6 the submission of the report, the activities during
7 such period of the Special Inspector General re-
8 quired under subsection (e).

9 (3) COMMENTS ON REPORT.—Not later than 30
10 days after receipt of a report under this subsection,
11 the Secretary of Health and Human Services shall
12 submit to the appropriate congressional committees
13 any comments on the matters covered by the report.

14 (4) PUBLIC AVAILABILITY.—The Special In-
15 spector General shall publish on a publicly available
16 website each report described under this subsection
17 and any comments on the matters covered by the re-
18 port submitted pursuant to paragraph (3).

19 (5) PROTECTED INFORMATION.—To the extent
20 possible, information submitted in any report re-
21 quired under this subsection shall be in a form that
22 is not prohibited from disclosure under section 552a
23 of title 5, United States Code (commonly known as
24 the Privacy Act of 1974).

1 (6) AGGREGATED INFORMATION.—The Special
2 Inspector General shall, to the maximum extent pos-
3 sible, aggregate any personally identifiable informa-
4 tion submitted in a report required under this sub-
5 section.

6 (j) TERMINATION.—The Office of the Special Inspec-
7 tor General shall terminate on the date on which the final
8 report required by subsection (h) is submitted for the last
9 year the Affordable Care Act is in effect.

10 (k) DEFINITIONS.—In this section:

11 (1) AFFORDABLE CARE ACT.—The term “Af-
12 fordable Care Act” means the Patient Protection
13 and Affordable Care Act and title I and subtitle B
14 of title II of the Health Care and Education Rec-
15 onciliation Act of 2010.

16 (2) APPROPRIATE CONGRESSIONAL COMMIT-
17 TEES.—The term “appropriate congressional com-
18 mittees” means—

19 (A) the Committees on Appropriations,
20 Budget, Education and the Workforce, Energy
21 and Commerce, Homeland Security, Judiciary,
22 Oversight and Government Reform, Small Busi-
23 ness, and Ways and Means of the House of
24 Representatives; and

1 (B) the Committees on Appropriations,
2 Budget, Commerce, Science, and Transpor-
3 tation, Finance, Health, Education, Labor, and
4 Pensions, Homeland Security and Govern-
5 mental Affairs, Judiciary, and Small Business
6 and Entrepreneurship of the Senate.

○