

117TH CONGRESS  
1ST SESSION

# H. R. 5040

To amend titles XVIII and XIX of the Social Security Act to reduce cost-sharing, align income and resource eligibility tests, simplify enrollment, and provide for other program improvements for low-income Medicare beneficiaries.

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## IN THE HOUSE OF REPRESENTATIVES

AUGUST 17, 2021

Ms. BLUNT ROCHESTER (for herself, Mr. KIM of New Jersey, and Mr. EVANS) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, 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

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## A BILL

To amend titles XVIII and XIX of the Social Security Act to reduce cost-sharing, align income and resource eligibility tests, simplify enrollment, and provide for other program improvements for low-income Medicare beneficiaries.

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 “Helping Seniors Afford  
5 Health Care Act”.

1 **SEC. 2. REDUCING COST-SHARING, ALIGNING INCOME AND**  
2 **RESOURCE ELIGIBILITY TESTS, SIMPLIFYING**  
3 **ENROLLMENT, AND OTHER PROGRAM IM-**  
4 **PROVEMENTS FOR LOW-INCOME BENE-**  
5 **FICIARIES.**

6 (a) INCREASE IN INCOME ELIGIBILITY TO 135 PER-  
7 CENT OF FPL FOR QUALIFIED MEDICARE BENE-  
8 FICIARIES.—

9 (1) IN GENERAL.—Section 1905(p)(2)(A) of the  
10 Social Security Act (42 U.S.C. 1396d(p)(2)(A)) is  
11 amended by striking “shall be at least the percent  
12 provided under subparagraph (B) (but not more  
13 than 100 percent) of the official poverty line” and  
14 all that follows through the period at the end and  
15 inserting the following: “shall be—

16 “(i) before January 1, 2022, at least  
17 the percent provided under subparagraph  
18 (B) (but not more than 100 percent) of  
19 the official poverty line (as defined by the  
20 Office of Management and Budget, and re-  
21 vised annually in accordance with section  
22 673(2) of the Omnibus Budget Reconcili-  
23 ation Act of 1981) applicable to a family  
24 of the size involved; and

25 “(ii) on or after January 1, 2022,  
26 equal to 135 percent of the official poverty

1 line (as so defined and revised) applicable  
2 to a family of the size involved.”.

3 (2) NOT COUNTING IN-KIND SUPPORT AND  
4 MAINTENANCE AS INCOME.—Section 1905(p)(2)(D)  
5 of the Social Security Act (42 U.S.C.  
6 1396d(p)(2)(D)) is amended by adding at the end  
7 the following new clause:

8 “(iii) In determining income under this sub-  
9 section, support and maintenance furnished in kind  
10 shall not be counted as income.”.

11 (b) INCREASE IN INCOME ELIGIBILITY TO 200 PER-  
12 CENT OF FPL FOR SPECIFIED LOW-INCOME MEDICARE  
13 BENEFICIARIES.—

14 (1) ELIGIBILITY OF INDIVIDUALS WITH IN-  
15 COMES BELOW 150 PERCENT OF FPL.—Section  
16 1902(a)(10)(E) of the Social Security Act (42  
17 U.S.C. 1396a(a)(10)(E)) is amended—

18 (A) by adding “and” at the end of clause

19 (ii);

20 (B) in clause (iii)—

21 (i) by striking “and 120 percent in  
22 1995 and years thereafter” and inserting  
23 “120 percent in 1995 and years thereafter  
24 before 2022, and 200 percent in 2022 and  
25 years thereafter”; and

1 (ii) by striking “and” at the end; and  
2 (C) by striking clause (iv).

3 (2) REFERENCES.—Section 1905(p)(1) of the  
4 Social Security Act (42 U.S.C. 1396d(p)(1)) is  
5 amended by adding at and below subparagraph (C)  
6 the following flush sentence:

7 “The term ‘specified low-income medicare beneficiary’  
8 means an individual described in section  
9 1902(a)(10)(E)(iii).”.

10 (3) CONFORMING AMENDMENTS.—

11 (A) The first sentence of section 1905(b)  
12 of such Act (42 U.S.C. 1396d(b)) is amended  
13 by striking “and section 1933(d)”.

14 (B) Section 1933 of such Act (42 U.S.C.  
15 1396u-3) is repealed.

16 (c) 100 PERCENT FMAP.—Section 1905 of the So-  
17 cial Security Act (42 U.S.C. 1396d) is amended by adding  
18 at the end the following new subsection:

19 “(jj) INCREASED FMAP FOR EXPANDED MEDICARE  
20 COST-SHARING POPULATIONS.—

21 “(1) IN GENERAL.—Notwithstanding subsection  
22 (b), with respect to expenditures described in para-  
23 graph (2) the Federal medical assistance percentage  
24 shall be equal to 100 percent.

1           “(2) EXPENDITURES DESCRIBED.—The expend-  
2           itures described in this paragraph are expenditures  
3           made on or after January 1, 2022, for medical as-  
4           sistance for medicare cost-sharing provided to any  
5           individual under clause (i), (ii), or (iii) of section  
6           1902(a)(10)(E) who would not have been eligible for  
7           medicare cost-sharing under any such clause under  
8           the income or resource eligibility standards in effect  
9           on October 1, 2018.”.

10          (d) CONSOLIDATION OF LOW-INCOME SUBSIDY RE-  
11 SOURCE ELIGIBILITY TESTS.—

12           (1) IN GENERAL.—Section 1860D–14(a)(3) of  
13           the Social Security Act (42 U.S.C. 1395w–  
14           114(a)(3)) is amended—

15                   (A) by striking subparagraph (D);

16                   (B) by redesignating subparagraphs (E)  
17                   through (G) as subparagraphs (D) through (F),  
18                   respectively; and

19                   (C) in the heading of subparagraph (D), as  
20                   so redesignated, by striking “ALTERNATIVE”.

21           (2) CLARIFICATION OF CERTAIN RULES RELAT-  
22           ING TO INCOME AND RESOURCE DETERMINA-  
23           TIONS.—Section 1860D–14(a)(3) of the Social Secu-  
24           rity Act (42 U.S.C. 1395w–114(a)(3)), as amended  
25           by paragraph (1), is amended by striking subpara-

1 graph (F) and inserting the following new subpara-  
2 graphs:

3 “(F) RESOURCE EXCLUSIONS.—In deter-  
4 mining the resources of an individual (and the  
5 eligible spouse of the individual, if any) under  
6 section 1613 for purposes of subparagraph  
7 (D)—

8 “(i) no part of the value of any life in-  
9 surance policy shall be taken into account;

10 “(ii) no part of the value of any vehi-  
11 cle shall be taken into account;

12 “(iii) there shall be excluded an  
13 amount equal to \$1,500 each with respect  
14 to any individual or eligible spouse of an  
15 individual who attests that some of the re-  
16 sources of such individual or spouse will be  
17 used to meet the burial and related ex-  
18 penses of such individual or spouse; and

19 “(iv) no balance in, or benefits re-  
20 ceived under, an employee pension benefit  
21 plan (as defined in section 3 of the Em-  
22 ployee Retirement Income Security Act of  
23 1974) shall be taken into account.

24 “(G) FAMILY SIZE.—In determining the  
25 size of the family of an individual for purposes

1 of determining the income eligibility of such in-  
2 dividual under this section, an individual's fam-  
3 ily shall consist of—

4 “(i) the individual;

5 “(ii) the individual's spouse who lives  
6 in the same household as the individual (if  
7 any); and

8 “(iii) any other individuals who—

9 “(I) are related to the individual  
10 whose income eligibility is in question  
11 or such individual's spouse who lives  
12 in the same household;

13 “(II) are living in the same  
14 household as such individual; and

15 “(III) are dependent on such in-  
16 dividual or such individual's spouse  
17 who is living in the same household  
18 for at least one-half of their financial  
19 support.”.

20 (3) CONFORMING AMENDMENTS.—Section  
21 1860D–14(a) of the Social Security Act (42 U.S.C.  
22 1395w–114(a)) is amended—

23 (A) in paragraph (1), in the matter pre-  
24 ceding subparagraph (A), by inserting “(as de-

1           terminated under paragraph (3)(G))” after “fam-  
2           ily of the size involved”; and

3                   (B) in paragraph (3), as amended by para-  
4           graphs (1) and (2)—

5                           (i) in subparagraph (A), in the matter  
6           preceding clause (i), by striking “subpara-  
7           graph (F)” and inserting “subparagraph  
8           (E)”;

9                           (ii) in subparagraph (A)(ii), by insert-  
10          ing “(as determined under subparagraph  
11          (G))” after “family of the size involved”;

12                           (iii) in subparagraph (A)(iii), by strik-  
13          ing “or (E)”;

14                           (iv) in subparagraph (B)(v), in the  
15          matter preceding subclause (I), by striking  
16          “subparagraph (F)” and inserting “sub-  
17          paragraph (E)”;

18                           (v) in subparagraph (D)(i), in the  
19          matter preceding subclause (I), by striking  
20          “subject to the life insurance policy exclu-  
21          sion provided under subparagraph (G)”  
22          and inserting “subject to the resource ex-  
23          clusions provided under subparagraph  
24          (F)”.



1 (e) ALIGNMENT OF LOW-INCOME SUBSIDY AND  
2 MEDICARE SAVINGS PROGRAM INCOME AND RESOURCE  
3 ELIGIBILITY TESTS.—

4 (1) APPLICATION OF MEDICAID SPOUSAL IM-  
5 POVERISHMENT RESOURCE ALLOWANCE TO MSP AND  
6 LIS RESOURCE ELIGIBILITY.—Section 1905(p)(1)(C)  
7 of the Social Security Act (42 U.S.C.  
8 1396d(p)(1)(C)) is amended to read as follows:

9 “(C) whose resources (as determined under sec-  
10 tion 1613 for purposes of the supplemental security  
11 income program subject to the resource exclusions  
12 under subparagraph (G) of section 1860D–14(a)(3))  
13 do not exceed—

14 “(i) in the case of an individual with a  
15 spouse, an amount equal to the sum of the first  
16 amount specified in subsection (f)(2)(A)(i) of  
17 section 1924 (as adjusted under subsection (g)  
18 of such section) and the amount specified in  
19 subsection (f)(2)(A)(ii)(II) of such section (as  
20 so adjusted); or

21 “(ii) in the case of an individual who does  
22 not have a spouse, an amount equal to  $\frac{1}{2}$  of  
23 the amount described in clause (i).”.

1           (2) APPLICATION TO QDWIS.—Section  
2 1905(s)(3) of the Social Security Act (42 U.S.C.  
3 1396d(s)(3)) is amended to read as follows:

4           “(3) whose resources (as determined under sec-  
5 tion 1613 for purposes of the supplemental security  
6 income program subject to the resource exclusions  
7 under subparagraph (G) of section 1860D–14(a)(3))  
8 do not exceed—

9           “(A) in the case of an individual with a  
10 spouse, the amount in effect for the year under  
11 clause (i) of subsection (p)(1)(C); and

12           “(B) in the case of an individual who does  
13 not have a spouse, the amount in effect for the  
14 year under clause (ii) of subsection (p)(1)(C);  
15 and”.

16           (3) APPLICATION TO LIS.—Clause (i) of section  
17 1860D–14(a)(3)(D) of the Social Security Act (42  
18 U.S.C. 1395w–114(a)(3)(D)), as redesignated and  
19 amended by subsection (d)(1), is amended to read as  
20 follows:

21           “(i) IN GENERAL.—The resources re-  
22 quirement of this subparagraph is that an  
23 individual’s resources (as determined under  
24 section 1613 for purposes of the supple-  
25 mental security income program subject to

1           the resource exclusions provided under  
2           subparagraph (G)) do not exceed the  
3           amount in effect for the year under section  
4           1905(p)(1)(C)(ii).”.

5           (f) ENROLLMENT SIMPLIFICATIONS.—

6           (1) APPLICATION OF 3-MONTH RETROACTIVE  
7           ELIGIBILITY TO QMBS.—

8           (A) IN GENERAL.—Section 1902(e)(8) of  
9           the Social Security Act (42 U.S.C. 1396a(e)(8))  
10          is amended by striking “after the end of the  
11          month in which the determination first occurs”  
12          and inserting “in or after the third month be-  
13          fore the month in which the individual makes  
14          application for assistance”.

15          (B) PROCESS FOR SUBMITTING CLAIMS  
16          DURING RETROACTIVE ELIGIBILITY PERIOD.—  
17          Section 1902(e)(8) of the Social Security Act  
18          (42 U.S.C. 1396a(e)(8)) is further amended by  
19          adding at the end the following: “The Secretary  
20          shall provide for a process under which claims  
21          for medical assistance under the State plan may  
22          be submitted for services furnished to such an  
23          individual during such 3-month period before  
24          the month in which the individual made appli-  
25          cation for assistance.”.

1           (C) CONFORMING AMENDMENT.—Section  
2           1905(a) of the Social Security Act (42 U.S.C.  
3           1396d(a)) is amended, in the matter preceding  
4           paragraph (1), by striking “or, in the case of  
5           medicare cost-sharing with respect to a quali-  
6           fied medicare beneficiary described in sub-  
7           section (p)(1), if provided after the month in  
8           which the individual becomes such a bene-  
9           ficiary”.

10          (2) STATE OPTION FOR 12-MONTH CONTINUOUS  
11          ELIGIBILITY FOR SLMBS AND QWDIS.—Section  
12          1902(e)(12) of the Social Security Act (42 U.S.C.  
13          1396a(e)(12)) is amended—

14               (A) by redesignating subparagraphs (A)  
15               and (B) as clauses (i) and (ii), respectively;

16               (B) by inserting “(A)” after “(12)”; and

17               (C) by adding at the end the following:

18           “(B) At the option of the State, the plan may provide  
19           that an individual who is determined to be eligible for ben-  
20           efits under a State plan approved under this title under  
21           any of the following eligibility categories, or who is rede-  
22           termined to be eligible for such benefits under any of such  
23           categories, shall be considered to meet the eligibility re-  
24           quirements met on the date of application and shall re-  
25           main eligible for those benefits until the end of the 12-

1 month period following the date of the determination or  
2 redetermination of eligibility, except that a State may pro-  
3 vide for such determinations more frequently, but not  
4 more frequently than once every 6 months for an indi-  
5 vidual:

6 “(i) A specified low-income medicare beneficiary  
7 described in subsection (a)(10)(E)(iii) of this section  
8 who is determined eligible for medicare cost sharing  
9 described in section 1905(p)(3)(A)(ii).

10 “(ii) A qualified disabled and working indi-  
11 vidual described in section 1905(s) who is deter-  
12 mined eligible for medicare cost-sharing described in  
13 section 1905(p)(3)(A)(i).”.

14 (3) STATE OPTION TO USE EXPRESS LANE ELI-  
15 GIBILITY FOR THE MEDICARE SAVINGS PROGRAM.—  
16 Section 1902(e)(13)(A) of the Social Security Act  
17 (42 U.S.C. 1396a(e)(13)(A)) is amended by adding  
18 at the end the following new clause:

19 “(iii) STATE OPTION TO EXTEND EXPRESS  
20 LANE ELIGIBILITY TO OTHER POPULATIONS.—

21 “(I) IN GENERAL.—At the option of  
22 the State, the State may apply the provi-  
23 sions of this paragraph with respect to de-  
24 termining eligibility under this title for an  
25 eligible individual (as defined in subclause

1 (II)). In applying this paragraph in the  
2 case of a State making such an option, any  
3 reference in this paragraph to a child with  
4 respect to this title (other than a reference  
5 to child health assistance) shall be deemed  
6 to be a reference to an eligible individual.

7 “(II) ELIGIBLE INDIVIDUAL DE-  
8 FINED.—In this clause, the term ‘eligible  
9 individual’ means any of the following:

10 “(aa) A qualified medicare bene-  
11 ficiary described in section 1905(p)(1)  
12 for purposes of determining eligibility  
13 for medicare cost-sharing (as defined  
14 in section 1905(p)(3)).

15 “(bb) A specified low-income  
16 medicare beneficiary described in sub-  
17 section (a)(10)(E)(iii) of this section  
18 for purposes of determining eligibility  
19 for medicare cost-sharing described in  
20 section 1905(p)(3)(A)(ii).

21 “(cc) A qualified disabled and  
22 working individual described in sec-  
23 tion 1905(s) for purposes of deter-  
24 mining eligibility for medicare cost-

1 sharing described in section  
2 1905(p)(3)(A)(i).”.

3 (g) MEDICAID TREATMENT OF CERTAIN MEDICARE  
4 PROVIDERS.—Section 1902(n) of the Social Security Act  
5 (42 U.S.C. 1396a(n)) is amended by adding at the end  
6 the following new paragraph:

7 “(4) A State plan shall not deny a claim from a pro-  
8 vider or supplier with respect to medicare cost-sharing de-  
9 scribed in subparagraph (B), (C), or (D) of section  
10 1905(p)(3) for an item or service which is eligible for pay-  
11 ment under title XVIII on the basis that the provider or  
12 supplier does not have a provider agreement in effect  
13 under this title or does not otherwise serve all individuals  
14 entitled to medical assistance under this title. The State  
15 shall create a mechanism through which provider or sup-  
16 pliers that do not otherwise have provider agreements with  
17 the State can bill the State for medicare cost-sharing for  
18 qualified medicare beneficiaries.”.

19 (h) ELIGIBILITY FOR OTHER PROGRAMS.—Section  
20 1905(p) of the Social Security Act (42 U.S.C. 1396d(p))  
21 is amended by adding at the end the following new para-  
22 graph:

23 “(7) Notwithstanding any other provision of law, any  
24 medical assistance for some or all medicare cost-sharing  
25 under this title shall not be considered income or resources

1 in determining eligibility for, or the amount of assistance  
2 or benefits provided under, any other public benefit pro-  
3 vided under Federal law or the law of any State or polit-  
4 ical subdivision thereof.”.

5 (i) TREATMENT OF QUALIFIED MEDICARE BENE-  
6 FICIARIES, SPECIFIED LOW-INCOME MEDICARE BENE-  
7 FICIARIES, AND OTHER DUAL ELIGIBLES AS MEDICARE  
8 BENEFICIARIES.—Section 1862 of the Social Security Act  
9 (42 U.S.C. 1395y) is amended by adding at the end the  
10 following new subsection:

11 “(p) TREATMENT OF QUALIFIED MEDICARE BENE-  
12 FICIARIES (QMBS), SPECIFIED LOW-INCOME MEDICARE  
13 BENEFICIARIES (SLMBS), AND OTHER DUAL ELIGI-  
14 BLES.—Nothing in this title shall be construed as author-  
15 izing a provider of services or supplier to discriminate  
16 (through a private contractual arrangement or otherwise)  
17 against an individual who is otherwise entitled to services  
18 under this title on the basis that the individual is a quali-  
19 fied medicare beneficiary (as defined in section  
20 1905(p)(1)), a specified low-income medicare beneficiary,  
21 or is otherwise eligible for medical assistance for medicare  
22 cost-sharing or other benefits under title XIX.”.

23 (j) ADDITIONAL FUNDING FOR STATE HEALTH IN-  
24 SURANCE ASSISTANCE PROGRAMS.—

25 (1) GRANTS.—



1           (A) IN GENERAL.—The Secretary of  
2 Health and Human Services (in this subsection  
3 referred to as the “Secretary”) shall use  
4 amounts made available under subparagraph  
5 (B) to make grants to States for State health  
6 insurance assistance programs receiving assist-  
7 ance under section 4360 of the Omnibus Budg-  
8 et Reconciliation Act of 1990.

9           (B) FUNDING.—For purposes of making  
10 grants under this subsection, the Secretary  
11 shall provide for the transfer, from the Federal  
12 Hospital Insurance Trust Fund under section  
13 1817 of the Social Security Act (42 U.S.C.  
14 1395i) and the Federal Supplementary Medical  
15 Insurance Trust Fund under section 1841 of  
16 such Act (42 U.S.C. 1395t), in the same pro-  
17 portion as the Secretary determines under sec-  
18 tion 1853(f) of such Act (42 U.S.C. 1395w-  
19 23(f)), of \$50,000,000 to the Centers for Medi-  
20 care & Medicaid Services Program Management  
21 Account for each of the fiscal years 2022  
22 through 2026, to remain available until ex-  
23 pended.

24           (2) AMOUNT OF GRANTS.—The amount of a  
25 grant to a State under this subsection from the total

1 amount made available under paragraph (1) shall be  
2 equal to the sum of the amount allocated to the  
3 State under paragraph (3)(A) and the amount allo-  
4 cated to the State under subparagraph (3)(B).

5 (3) ALLOCATION TO STATES.—

6 (A) ALLOCATION BASED ON PERCENTAGE  
7 OF LOW-INCOME BENEFICIARIES.—The amount  
8 allocated to a State under this subparagraph  
9 from  $\frac{2}{3}$  of the total amount made available  
10 under paragraph (1) shall be based on the num-  
11 ber of individuals who meet the requirement  
12 under subsection (a)(3)(A)(ii) of section  
13 1860D–14 of the Social Security Act (42  
14 U.S.C. 1395w–114) but who have not enrolled  
15 to receive a subsidy under such section 1860D–  
16 14 relative to the total number of individuals  
17 who meet the requirement under such sub-  
18 section (a)(3)(A)(ii) in each State, as estimated  
19 by the Secretary.

20 (B) ALLOCATION BASED ON PERCENTAGE  
21 OF RURAL BENEFICIARIES.—The amount allo-  
22 cated to a State under this subparagraph from  
23  $\frac{1}{3}$  of the total amount made available under  
24 paragraph (1) shall be based on the number of  
25 part D eligible individuals (as defined in section

1           1860D–1(a)(3)(A) of such Act (42 U.S.C.  
2           1395w–101(a)(3)(A)) residing in a rural area  
3           relative to the total number of such individuals  
4           in each State, as estimated by the Secretary.

5           (4) PORTION OF GRANT BASED ON PERCENT-  
6           AGE OF LOW-INCOME BENEFICIARIES TO BE USED  
7           TO PROVIDE OUTREACH TO INDIVIDUALS WHO MAY  
8           BE SUBSIDY ELIGIBLE INDIVIDUALS OR ELIGIBLE  
9           FOR THE MEDICARE SAVINGS PROGRAM.—Each  
10          grant awarded under this subsection with respect to  
11          amounts allocated under paragraph (3)(A) shall be  
12          used to provide outreach to individuals who may be  
13          subsidy eligible individuals (as defined in section  
14          1860D–14(a)(3)(A) of the Social Security Act (42  
15          U.S.C. 1395w–114(a)(3)(A))) or eligible for the pro-  
16          gram of medical assistance for payment of the cost  
17          of medicare cost-sharing under the Medicaid pro-  
18          gram pursuant to sections 1902(a)(10)(E) and 1933  
19          of such Act (42 U.S.C. 1396a(a)(10)(E), 1396u–3).  
20          (k) EFFECTIVE DATE.—

21          (1) IN GENERAL.—Except as provided in para-  
22          graph (2), the amendments and repeal made by this  
23          section take effect on January 1, 2022, and, with re-  
24          spect to title XIX of the Social Security Act, apply

1 to calendar quarters beginning on or after January  
2 1, 2022.

3 (2) EXCEPTION FOR STATE LEGISLATION.—In  
4 the case of a State plan for medical assistance under  
5 title XIX of the Social Security Act which the Sec-  
6 retary of Health and Human Services determines re-  
7 quires State legislation (other than legislation appro-  
8 priating funds) in order for the plan to meet the ad-  
9 ditional requirements imposed by the amendments  
10 and repeal made by this section, the State plan shall  
11 not be regarded as failing to comply with the re-  
12 quirements of such title solely on the basis of its  
13 failure to meet these additional requirements before  
14 the first day of the first calendar quarter beginning  
15 after the close of the first regular session of the  
16 State legislature that begins after the date of the en-  
17 actment of this Act. For purposes of the previous  
18 sentence, in the case of a State that has a 2-year  
19 legislative session, each year of such session shall be  
20 deemed to be a separate regular session of the State  
21 legislature.

○