

HR 5284

World's Greatest Healthcare Plan Act of 2016

Congress: 114 (2015–2017, Ended)

Chamber: House

Policy Area: Health

Introduced: May 19, 2016

Current Status: Referred to the Subcommittee on Health, Employment, Labor, and Pensions.

Latest Action: Referred to the Subcommittee on Health, Employment, Labor, and Pensions. (Sep 19, 2016)

Official Text: <https://www.congress.gov/bill/114th-congress/house-bill/5284>

Sponsor

Name: Rep. Sessions, Pete [R-TX-32]

Party: Republican • State: TX • Chamber: House

Cosponsors (1 total)

| Cosponsor | Party / State | Role | Date Joined |
|-----------------------------|---------------|------|--------------|
| Rep. Mica, John L. [R-FL-7] | R · FL | | Jul 11, 2016 |

Committee Activity

| Committee | Chamber | Activity | Date |
|-----------------------------------|---------|-------------|--------------|
| Education and Workforce Committee | House | Referred to | Sep 19, 2016 |
| Energy and Commerce Committee | House | Referred To | May 19, 2016 |
| Ways and Means Committee | House | Referred to | Jun 2, 2016 |

Subjects & Policy Tags

Policy Area:

Health

Related Bills

| Bill | Relationship | Last Action |
|------------|--------------|--|
| 114 S 2985 | Related bill | May 25, 2016: Read twice and referred to the Committee on Finance. |

World's Greatest Healthcare Plan Act of 2016

This bill amends the Internal Revenue Code to repeal the requirements for individuals to maintain minimum essential coverage and for large employers to offer affordable coverage to full time employees.

Health insurance is no longer required to cover preventive care at no cost or include the essential health benefits.

Individuals enrolling in health insurance who have not maintained continuous coverage over the previous 12 months are charged an extra 20% on premiums for each consecutive year without coverage, unless the individual is subject to similar state incentives to maintain coverage.

States may enroll uninsured residents in high deductible health plans. Individuals must be permitted to opt-out of this coverage.

The Department of Health and Human Services (HHS) must develop a risk adjustment mechanism for health insurance in the individual market.

For residents of a state to qualify for premium subsidies or the health insurance tax credit in this bill, the state must permit health insurance with an annual limit on benefits to be sold on its exchange.

The bill establishes an advanceable, refundable health insurance tax credit for taxpayers enrolled in health coverage.

States may: (1) apply to HHS to use unclaimed health insurance tax credits for indigent health care; and (2) enroll Medicaid-eligible individuals in health insurance that qualifies for the tax credit instead of in Medicaid, at the individual's option.

The bill establishes Roth HSAs (health savings accounts) for paying certain medical expenses and health insurance premiums.

The tax deduction for medical expenses is eliminated.

This bill amends title XIX (Medicaid) and title XVIII (Medicare) of the Social Security Act, including to turn federal Medicaid payments into block grants.

Actions Timeline

- **Sep 19, 2016:** Referred to the Subcommittee on Health, Employment, Labor, and Pensions.
- **Jun 2, 2016:** Referred to the Subcommittee on Health.
- **May 19, 2016:** Introduced in House
- **May 19, 2016:** Referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, and Education and the Workforce, 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.