

HR 3168

SNP Reauthorization Act of 2017

Congress: 115 (2017–2019, Ended)

Chamber: House

Policy Area: Health

Introduced: Jul 6, 2017

Current Status: Placed on the Union Calendar, Calendar No. 353.

Latest Action: Placed on the Union Calendar, Calendar No. 353. (Dec 21, 2017)

Official Text: <https://www.congress.gov/bill/115th-congress/house-bill/3168>

Sponsor

Name: Rep. Tiberi, Patrick J. [R-OH-12]

Party: Republican • **State:** OH • **Chamber:** House

Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Levin, Sander M. [D-MI-9]	D · MI		Jul 6, 2017

Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Discharged From	Dec 21, 2017
Ways and Means Committee	House	Referred to	Jul 7, 2017

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
115 HR 1892	Related bill	Feb 9, 2018: Became Public Law No: 115-123.
115 HR 4820	Related bill	Jan 23, 2018: Referred to the Subcommittee on Health.
115 HR 4579	Related bill	Dec 8, 2017: Referred to the Subcommittee on Health.
115 S 870	Related bill	Sep 29, 2017: Referred to the Subcommittee on Health.
115 HR 3044	Related bill	Jul 5, 2017: Referred to the Subcommittee on Health.

Special Needs Plans Reauthorization Act of 2017 or the SNP Reauthorization Act of 2017

(Sec. 2) This bill allows a Medicare Advantage (MA) plan, until 2024, to restrict plan enrollment to certain special-needs individuals, provided that the plan meets specified applicable requirements. Current law allows an MA plan to do so until 2019.

The Federal Coordinated Health Care Office within the Centers for Medicare & Medicaid Services (CMS) shall serve as a dedicated point of contact for states with regard to special-needs MA plans for individuals who are dually eligible for Medicaid and Medicare. The CMS shall establish a unified process for grievances and appeals for individuals enrolled in such plans.

The CMS must, with respect to special-needs MA plans for individuals with chronic conditions, convene a panel of clinical advisors to establish and update the list of chronic conditions that make an individual eligible for participation in such a plan.

The Government Accountability Office (GAO) must study and report to Congress on health outcomes of individuals enrolled in specialized MA plans.

The CMS shall, with respect to special-needs MA plans, consider applying certain quality measures at the plan level rather than at the contract level.

The GAO must report to Congress on state-level integration between the Medicaid program and special-needs MA plans for individuals who are dually eligible for Medicaid and Medicare.

(Sec. 3) Beginning in plan year 2020, an MA plan may provide certain supplemental benefits to chronically ill enrollees.

The GAO must report to Congress on the provision of such supplemental benefits to MA enrollees.

Actions Timeline

- **Dec 21, 2017:** Reported (Amended) by the Committee on Ways and Means. H. Rept. 115-478, Part I.
- **Dec 21, 2017:** Committee on Energy and Commerce discharged.
- **Dec 21, 2017:** Placed on the Union Calendar, Calendar No. 353.
- **Jul 13, 2017:** Committee Consideration and Mark-up Session Held.
- **Jul 13, 2017:** Ordered to be Reported (Amended) by Voice Vote.
- **Jul 7, 2017:** Referred to the Subcommittee on Health.
- **Jul 6, 2017:** Introduced in House
- **Jul 6, 2017:** Referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, 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.