

## S 761

Health Care Options Act of 2017

**Congress:** 115 (2017–2019, Ended)

**Chamber:** Senate

**Policy Area:** Taxation

**Introduced:** Mar 29, 2017

**Current Status:** Read twice and referred to the Committee on Finance. (Sponsor introductory remarks on measure: CR S2)

**Latest Action:** Read twice and referred to the Committee on Finance. (Sponsor introductory remarks on measure: CR S2100-2101) (Mar 29, 2017)

**Official Text:** <https://www.congress.gov/bill/115th-congress/senate-bill/761>

### Sponsor

**Name:** Sen. Alexander, Lamar [R-TN]

**Party:** Republican • **State:** TN • **Chamber:** Senate

### Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Corker, Bob [R-TN]	R · TN		Mar 29, 2017

### Committee Activity

Committee	Chamber	Activity	Date
Finance Committee	Senate	Referred To	Mar 29, 2017

### Subjects & Policy Tags

**Policy Area:**

Taxation

### Related Bills

Bill	Relationship	Last Action
115 HR 2516	Related bill	<b>May 18, 2017:</b> Referred to the House Committee on Ways and Means.
115 HR 2086	Related bill	<b>Apr 12, 2017:</b> Referred to the House Committee on Ways and Means.
115 HR 1933	Identical bill	<b>Apr 7, 2017:</b> Referred to the Subcommittee on Health.

## Health Care Options Act of 2017

This bill amends the Internal Revenue Code to temporarily permit certain individuals to use the premium assistance tax credit to purchase health insurance outside of an exchange established under the Patient Protection and Affordable Care (PPACA).

The bill applies to individuals who reside in a rating area or county that the Department of Health and Human Services has certified has no qualified health plans offered through an exchange established under PPACA.

Individuals residing in the areas or counties may use the premium assistance tax credit through 2019 to enroll in a plan outside of an exchange if the plan is: (1) authorized by the state in which the taxpayer resides to be offered in the individual market, or (2) is a not-for-profit membership organization that is organized and authorized under state law to accept member contributions to fund health care benefits for members and their families.

The bill prohibits advance payments of the credit from being made with respect to the off-exchange plans and specifies reporting requirements for the plans.

Through 2019, the bill also exempts the individuals residing in the counties or areas from the requirement to maintain minimum essential health coverage (commonly referred to as the individual mandate).

## Actions Timeline

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- **Mar 29, 2017:** Introduced in Senate
- **Mar 29, 2017:** Read twice and referred to the Committee on Finance. (Sponsor introductory remarks on measure: CR S2100-2101)