

[DISCUSSION DRAFT]

117<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

**H. R.** \_\_\_\_\_

To amend title XXVII of the Public Health Service Act to establish requirements for the disclosure of certain information relating to health care sharing ministries, and for other purposes.

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IN THE HOUSE OF REPRESENTATIVES

Mr. HUFFMAN introduced the following bill; which was referred to the Committee on \_\_\_\_\_

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**A BILL**

To amend title XXVII of the Public Health Service Act to establish requirements for the disclosure of certain information relating to health care sharing ministries, 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,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “\_\_\_\_\_ Act  
5 of 2022”.

1 **SEC. 2. ESTABLISHING REQUIREMENTS FOR THE DISCLO-**  
2 **SURE OF CERTAIN INFORMATION RELATING**  
3 **TO HEALTH CARE SHARING MINISTRIES.**

4 (a) IN GENERAL.—Title XXVII of the Public Health  
5 Service Act (42 U.S.C. 300gg et seq.) is amended by add-  
6 ing at the end the following new part:

7 **“PART F—HEALTH CARE SHARING MINISTRIES**  
8 **“SEC. 2799C-1. DISCLOSURE OF INFORMATION.**

9 “(a) IN GENERAL.—A health care sharing ministry  
10 (as defined in section 5000A(d)(2)(B)(ii) of the Internal  
11 Revenue Code of 1986)—

12 “(1) shall, not less frequently than annually,  
13 submit to the Secretary, the Commissioner of Inter-  
14 nal Revenue, and the Director of the Bureau of Con-  
15 sumer Financial Protection the information de-  
16 scribed in subsection (b);

17 “(2) shall disclose to each individual seeking to  
18 enroll in the ministry, and each individual so en-  
19 rolled, the information described in paragraph (1) of  
20 subsection (c) in the manner specified in paragraph  
21 (2) of such subsection; and

22 “(3) may not enter into a contract with an enti-  
23 ty for purposes of enrolling an individual in such  
24 ministry, or otherwise provide remuneration to such  
25 an entity in exchange for enrolling an individual in

1 such ministry, unless such entity meets the require-  
2 ments described in subsection (d).

3 “(b) DISCLOSURE OF FINANCIAL AND APPEALS IN-  
4 FORMATION.—

5 “(1) IN GENERAL.—For purposes of subsection  
6 (a)(1), the information described in this subsection  
7 is, with respect to a health care sharing ministry,  
8 the following:

9 “(A) The amount of financial reserves held  
10 by such ministry.

11 “(B) The ratio of the amount of money  
12 collected from enrollees for purposes of reim-  
13 bursing enrollees for medical claims that is ex-  
14 pended by such ministry on costs described in  
15 paragraphs (1) and (2) of section 2718(a) to  
16 the total amount of money so collected for the  
17 preceding year.

18 “(C) The number of individuals enrolled in  
19 such ministry.

20 “(D) The total amount paid by individuals  
21 enrolled in such ministry for coverage under  
22 such ministry over the preceding year.

23 “(E) The total amount paid by such min-  
24 istry for items and services for which benefits

1           were available under such ministry over the pre-  
2           ceding year.

3           “(F) The average out-of-pocket expenses  
4           incurred by individuals enrolled under such  
5           ministry for items and services for which bene-  
6           fits are available under such ministry over the  
7           preceding year.

8           “(G) A list of each State and county in  
9           which individuals who reside in such State or  
10          county may enroll in such ministry.

11          “(H) The percentage of claims made under  
12          such ministry during the preceding year which  
13          were denied.

14          “(I) Contact information for the operator  
15          (or a representative of the operator) of such  
16          ministry.

17          “(J) A specification of each health care  
18          provider with which such ministry has in effect  
19          a contractual relationship for furnishing items  
20          and services under such ministry.

21          “(K) The average amount of time such  
22          ministry took to reimburse a claim once sub-  
23          mitted to such ministry during the preceding  
24          year.

1           “(2) PUBLICATION.—The Secretary shall pub-  
2           lish the information submitted under subsection  
3           (a)(1) on a public website.

4           “(c) DISCLOSURE OF INFORMATION TO PROSPECTIVE  
5           AND CURRENT ENROLLEES.—

6           “(1) IN GENERAL.—For purposes of subsection  
7           (a)(2), the information described in this paragraph  
8           is, with respect to a health care sharing ministry,  
9           the following:

10                   “(A) How an enrollee may file a complaint  
11                   or appeal a coverage determination, including a  
12                   disclaimer that appeals may not be available to  
13                   any entity other than such ministry;

14                   “(B) Whether an enrollee must use arbi-  
15                   tration in appealing a coverage determination  
16                   or has other legal recourse.

17                   “(C) An explanation that, unlike a group  
18                   health plan or health insurance coverage, there  
19                   is no guarantee that an enrollee will be reim-  
20                   bursed for any portion of claims submitted to  
21                   such ministry, as well as a specification of  
22                   whether any lifetime caps on health care shar-  
23                   ing per enrollee are imposed under such min-  
24                   istry.

1           “(D) The information described in sub-  
2 section (b)(1)(F).

3           “(E) The average amount paid per enrollee  
4 to such ministry for membership under such  
5 ministry over the preceding year.

6           “(F) With respect to claims made during  
7 the preceding year for items and services for  
8 which benefits were available under such min-  
9 istry, the total amount paid by such ministry  
10 for such claims compared and the total amount  
11 for which individuals enrolled under such min-  
12 istry were responsible in cost sharing.

13           “(G) A list of all items and services for  
14 which reimbursement is not available under  
15 such ministry, as well as, with respect to each  
16 item or service for which such reimbursement is  
17 so available, a specification of any conditions  
18 that would render such item or service nonreim-  
19 bursable.

20           “(H) A list of any other requirements im-  
21 posed on claims submitted for health care shar-  
22 ing under such ministry.

23           “(2) MANNER OF DISCLOSURE.—For purposes  
24 of subsection (a)(2), information described in para-  
25 graph (1) shall be—

1 “(A) disclosed in a prominent manner;

2 “(B) made available in multiple languages;

3 “(C) provided immediately before enroll-  
4 ment of any individual in a health care sharing  
5 ministry; and

6 “(D) be written in at least 14 point font  
7 (or, if such enrollment is being made over the  
8 phone, be read out loud).

9 “(d) ENTITY REQUIREMENTS.—For purposes of sub-  
10 section (a)(3), the requirements described in this sub-  
11 section are, with respect to an entity with a contract in  
12 effect with a health care sharing ministry for purposes of  
13 enrolling an individual in such ministry (or otherwise re-  
14 ceiving remuneration from such ministry in exchange for  
15 enrolling an individual in such ministry), that such entity  
16 provides to such individual—

17 “(1) an explanation of any tax credit that may  
18 be available to such individual under section 36B of  
19 the Internal Revenue Code of 1986 to purchase a  
20 qualified health plan (as defined in section 1301(a)  
21 of the Patient Protection and Affordable Care Act)  
22 through an Exchange established pursuant to such  
23 Act;

24 “(2) if such individual qualifies to enroll under  
25 a State plan (or waiver of such plan) under title

1 XIX of the Social Security Act, or if such individual  
2 is entitled to benefits under part A or eligible to en-  
3 roll under part B of title XVIII of such Act, an ex-  
4 planation of such qualification, entitlement, or eligi-  
5 bility;

6 “(3) an explanation of the types of benefits re-  
7 quired to be provided under such plans and other  
8 protections applicable under such plans (such as lim-  
9 itations on cost sharing) compared to the benefits  
10 provided, and cost-sharing requirements imposed,  
11 under such ministry; and

12 “(4) an explanation that such ministry is not a  
13 group health plan or health insurance coverage and  
14 that benefits provided under such ministry are not  
15 guaranteed.

16 “(e) ENFORCEMENT.—In the case that the Secretary  
17 determines that a health care sharing ministry has failed  
18 to meet a requirement of this section, the Secretary may  
19 impose a civil monetary penalty on such ministry in an  
20 amount not to exceed \$100 for each day for each indi-  
21 vidual with respect to which such a failure occurs. The  
22 provisions of subparagraphs (C) through (G) of paragraph  
23 (2) of section 2723 shall apply to a civil monetary penalty  
24 imposed under this subsection in the same manner as such



1 provisions apply to a civil monetary penalty imposed under  
2 such section.

3 “(f) DEFINITIONS.—For purposes of this section, the  
4 Secretary may specify the meaning of any term used in  
5 relation to a health care sharing ministry and clarify the  
6 applicability of such term to such a ministry.”.

7 (b) DISCLOSURES BY FEDERAL TRADE COMMISSION  
8 REGARDING CONSUMER COMPLAINTS.—

9 (1) IN GENERAL.—Not later than January 1  
10 and July 1 of each year, the Federal Trade Commis-  
11 sion shall publicly disclose on the internet website of  
12 the Commission, and transmit to the Secretary of  
13 Health and Human Services and the Commissioner  
14 of Internal Revenue—

15 (A) the number of consumer complaints re-  
16 garding health care sharing ministries (as de-  
17 fined in section 5000A(d)(2)(B)(ii) of the Inter-  
18 nal Revenue Code of 1986) received by the  
19 Commission during the period covered by the  
20 disclosure;

21 (B) the general categories (as determined  
22 by the Commission) of the complaints described  
23 in subparagraph (A); and

24 (C) with respect to each complaint de-  
25 scribed in subparagraph (A)—

1 (i) the name of the health care shar-  
2 ing ministry against which the complaint  
3 was made; and

4 (ii) such details as the Commission  
5 considers appropriate regarding the owner-  
6 ship, operation, and executive leadership of  
7 such ministry.

8 (2) TIMING OF INITIAL DISCLOSURE.—Para-  
9 graph (1) shall apply beginning on the January 1 or  
10 July 1 that first occurs after the date that is 90  
11 days after the date of the enactment of this Act.