

113TH CONGRESS
2^D SESSION

H. R. 3849

To provide for the repeal of the Patient Protection and Affordable Care Act if it is determined that the Act has resulted in increasing the number of uninsured individuals.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 10, 2014

Mr. CASSIDY introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, Education and the Workforce, the Judiciary, Natural Resources, House Administration, Rules, and Appropriations, 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

A BILL

To provide for the repeal of the Patient Protection and Affordable Care Act if it is determined that the Act has resulted in increasing the number of uninsured individuals.

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 “Health Insurance Ac-
5 countability Act of 2014”.

1 **SEC. 2. REPEAL OF PPACA.**

2 (a) IN GENERAL.—The Patient Protection and Af-
3 fordable Care Act (Public Law 111–148) and title I and
4 subtitle B of title II of the Health Care and Education
5 Reconciliation Act of 2011 (Public Law 111–152) shall
6 be repealed effective on the date on which the Comptroller
7 General report under subsection (b) determines that, at
8 any point in time after the date of enactment of this Act,
9 the number of individuals in the United States who are
10 uninsured exceeds the number of individuals who were un-
11 insured on the date of enactment of the Patient Protection
12 and Affordable Care Act.

13 (b) REPORTS.—

14 (1) IN GENERAL.—Not later than 30 days after
15 the date of enactment of this Act, the Comptroller
16 General of the United States, in consultation with
17 the Census Bureau, shall conduct a study to deter-
18 mine the number of individuals in the United States
19 who are uninsured, and submit to the appropriate
20 committees of Congress a report concerning the re-
21 sults of such study, including both the number of in-
22 dividuals in the United States who are determined to
23 be currently uninsured and the number of individ-
24 uals in the United States who were uninsured on the
25 date of enactment of the Patient Protection and Af-
26 fordable Care Act.

1 (2) SUBSEQUENT STUDIES AND REPORTS.—The
2 Comptroller General shall conduct one or more sub-
3 sequent studies every 60 days (and submit reports
4 based on the results of such studies) until the Comp-
5 troller General makes a determination that the num-
6 ber of individuals in the United States who are unin-
7 sured exceeds the number of individuals who were
8 uninsured on the date of enactment of the Patient
9 Protection and Affordable Care Act.

10 (3) SUNSET.—No reports shall be submitted
11 under this section after the date that is 5 years after
12 the date of enactment of this Act.

13 (c) TRANSFER OF FUNDING.—

14 (1) IN GENERAL.—If, based on the last report
15 submitted during a fiscal year under subsection (b),
16 the Comptroller General of the United States deter-
17 mines that the number of uninsured individuals for
18 such fiscal year has decreased as compared to the
19 number of uninsured individuals on the date of en-
20 actment of the Patient Protection and Affordable
21 Care Act, the Secretary of Health and Human Serv-
22 ices shall reduce the funding described in paragraph
23 (3)(A) by an amount determined in accordance with
24 paragraph (2), and such amount shall be rescinded

1 and permanently cancelled for the purpose of debt
2 reduction.

3 (2) AMOUNT.—The amount determined under
4 this paragraph for a fiscal year shall be equal to the
5 amount which bears the same ratio to the total
6 amount of funding for such fiscal year as described
7 in paragraph (3)(A) as the total number of unin-
8 sured individuals determined for such fiscal year
9 bears to the total number of uninsured individuals
10 on the date of enactment of such Act.

11 (3) FUNDING DESCRIBED.—

12 (A) IN GENERAL.—The funding described
13 in this section includes—

14 (i) the amount provided for under sec-
15 tion 2793 of the Public Health Service Act
16 (42 U.S.C. 300gg–93) for the fiscal year
17 involved and which remains unobligated;

18 (ii) the amount provided for under
19 section 1311 of the Patient Protection and
20 Affordable Care Act (42 U.S.C. 18031) for
21 the fiscal year involved and which remains
22 unobligated; and

23 (iii) the amount provided for under
24 section 1005 of the Health Care and Edu-
25 cation Reconciliation Act of 2010 (Public

1 Law 111–152) for the fiscal year involved
2 and which remains unobligated.

3 (B) REDUCTIONS.—With respect to any
4 reductions required to be made under this sub-
5 section for a fiscal year, each amount in fund-
6 ing described in subparagraph (A) shall be re-
7 duced by the pro rata percentage required to
8 reduce the total amount of such spending by
9 the amount required under this subsection for
10 the fiscal year involved.

11 (d) DEFINITION.—In this section, the term “unin-
12 sured” with respect to an individual, means an individual
13 lawfully present in the United States who is not covered
14 by health insurance.

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